POWER OF ATTORNEY.

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, of for any sum of money which may be coming to me for the reason	ssaid. 1M WITNESS WHEREOF I have hereunto set my hand and seal. this
awful atto	noney I restated in or any Wa	hand
e and I	dier, as	È
ıv tru	amour e Sok my r h may	9
	rhatever onfederat receipt in ney which	hereint
	pt for v of a C orney to m of mo	- Auch I
appoint	nd received widow said atto	FOF
hereby	receive a prizing my tor, of	WHFR
County, in said State, do hereby appoint_of	name, to ate of Gee by author he Govern	TWESS
in said	in my the St: ; here	d.
unty,	from from idavit issue	aforesaid.



1891. Mo2336 Widows' Pension COUNTY. \$200.00. Warrant Issued AND HANDED TO

POWER OF ATTORNEY. FORM N

STATE	OF	GEO	R	GIA,
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If allowed, send amount by

Contraction of the contraction o

County.	J		
Know all Men by these Presents, That	Í,		
	of	**	
County, in said State, do hereby appoint			· · · · · · ·)
of	my	true and lawful at	torney in fact, for
me and in my name, to receive and receipt to from the State of Georgia as a widow o affidavit; hereby authorizing my said attorn be issued by the Governor, or for any sum aforesaid. IN WITNESS WHEREOF, I day of	f a Confederate S ney to receipt in m of money which n	Soldier, as stated ny name for any V nay be coming to set my hand	in the foregoing Varrant that may me for the reason
			Гь. s.7
Executed in the presence of us:			



Affidavit to be Made by the Widow.

Form	MT-	
LOLIN	MO.	40

STATE OF GEORGIA,	
× 11 1	In person came before me, the undersigned Ordinary
County of De Koll	In person came before me, the undersigned Ordinary in and for the County of De Touth
Mrs Sahella I Reede	, who being sworn according to law, says under
oath that she is the widow of . Natt	rancel Reeder, who was a soldier in
	ved as a member of Company , of the
Regiment of	derriging Volunteers; that he enlisted in said
service on or about the	day of Ang 1861, and was in the
- Confederate Army up	to Sefet 1862 That while in the day of Sefet 1862 (See Note No. 1)
Army, he was on the	day of Sold Son N. N.
Marie College	180 Z. (See Note No. 1)
Mound of at	Me. Salte of
wramplones.	Jak. M.S. He was
gaptierea and	carging to a federal
hispital where	he died from
The expects of	I the rebuild
received in	fattle on the 23d
day of Tuse	1.1 1960 De 2011
Bur he will	· ///www.

Sworn to and subscribed before me, this, the

Haday of Mil 1891.

M. M. May selace Ordinary.

Poer-Opping Gaston. La.

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

Affidavit for Three Witnesses.

State of Georgia,	
County of Dekatt	In person came before me, the undersigned Ordinary in and for said County, witnesses forus, J. M. Liddell
and the Mitchell, Good Ho	Jones, J.M. Liddell -
and	(each known to said Attesting Officer as truthful,
Mrs. Is a Letta Pheno	say under oath, that, from their own personal knowledge, of the County of Dekalto. The who was a soldier in
State of Georgia, is the widow, of	etkaniel Keefer, who was a soldier in
Company of the 16	Regiment of Su Volunteers.
That said soldier enlisted in the service of the	e Confederate States (or the Georgia State Troops) on or Regular 1861 That while in said service, or by
reason of said service in the Army, he lost hi	s life as follows:
	dad in Bather on
Mr 14 al de	Whenher 1802 at
L'iamplons sa	p Med, and was
Caplained and	o died atoht the
	I months at

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

Some fight

We further swear that Mrs. Islabel to g heed was the wife of sald 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 25 day of April 1891. The Milebell on La citizen Gridinary. Fin Liddelle

Michetarile hel

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

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

State of Georgia,

i, or Llocehon ordinary

County of Fuelow in and for said County of Fuelow
State of Georgia, hereby certify that I am acqueinted with Mrs.

the applicant for a pension in this case, and know, from my own knowledge, or from positive proof pension to me by reputable and the state of Georgia on December 23d, 1850, and has not lived out of the State since that date. I also certify that the witnesses whose testimony one 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

SEAL }

Mr LRocielinary Ordinary

Form No. 4

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

Those whose husbands died in the army of wounds or disease contracted in the service.

Those whose husbands went to the army and have never been heard from since the war.

Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.

Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.

No widow is entitled unless she was the wife of the soldier during the war, and has neveremarried.

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 lawer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.

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

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

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

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

By order of the Governor.

W. H. HARRISON.

Sec. Ex. partment.

Bertify the

NO. 1672

NO. 16

ror widows heretoiore allowed Pensions.

	The second of the second second second second
STATE OF GEORGIA	
County of De Kall	L. L. Reeder
who being sworn, says on oath, that s	she is a bona fide resident of said County of
Le Kalt Sta	te of Georgia, and that she has resided in said State
continuously ever since.	189/. That she is the Widow of
Mathaniel Leed	who was a Soldier in Company
7 of the 16th	Regiment of
Volunteers, that he enlisted in said R	Regiment on or about the month of July
186/ and served in the Army up to	
	day of 1862 (State here
full particulars of the husband's deat	
	a ar beraktons Jak
	ed to Hagerstown where
	hospital of the would
on the 23th of	
nie si e e e e e e	
ingree of the second se	
Deponent swears that she was the wi	ife of said deceased soldier during his service in the
army as a soldier, and that she has ne	ever married since his death aforesaid, that she became
his wife in the year 1807; that Geo	rgia is her home and she resided in this State 23d day
of December, 1890, and has not lived	in any other State or locality since that date. I have
been allowed a pension for the year e	ending February 15th, 1893, and now apply for the
allowance provided by law for the year	er ending February 15th, 1894.
Sworn to and subscribed before me	e, this
(11)	1094.
The Land Caro	inary.) Post-office

STATE OF GEORGIA, Degsonally comes Mrs.
County of De Hall I deeder
who being sworn, says on oath, that she is a bona fide resident of said County of
State of Georgia, and that she has resided in said State
Continuously ever since. May 18.3/ That she is the Widow of Wathaniel Cleecker who was a Soldier in Company
H of the 16th Regiment of Georgia
Volunteers, that he enlisted in said Regiment on or about the month of
1861 and served in the Army up to Sefet 1862. That he lost his
life on the 23 rd day of Sept 1862 (State here
full particulars of the husband's death, when, where and from what cause.) (Mas revereded at Koglestown Pul.
on the 10th of Sept 1862 and died
how the effects of the servine on
the 23 rd of Sept 1862.
Ty The second 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 1849; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this	1 /
31 st day of line 1893.	
MM Ragsdale. Ordinary.	Post-office

For Widows' Heretofore Atlowed Pensions.

STATE OF GEORGIA.	Bersonally Comes Mrs.
County of De Halt	Il Reeder
The state of the s	9
who being sworn, says on oath, that she is a bona	fide resident of said county of
De Call State of Georgi	a, and that she has resided in said State
continuously ever since	1831. That she is the Widow of
Nathaniel Reder	who was a Soldier in Company
H of the 16 4 R	egiment of Georgia
Volunteers, that he enlisted in said Regiment on o	or about the month of Ang
186 and served in the Army up to	1862 That he lost his
life on the 232 day of	ekt 1862, (State here
full particulars of the husband's death, when, where	e and from what cause.) (
Was wounded at 16	agerstown Mid.
and died from	the mound
ten days afte	
	c som booting,
was received.	
A CONTRACTOR OF THE CONTRACTOR	2.33.33.43
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	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, that she became his wife in the year 18 47, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to a	nd subscribe	d before me, thi	8
14"	day of	an 1895	
111.	day of	ed before me, thi	

Post-office 236 Milleard St.

FOR THOSE HERETOFORE

No. 2612

W'S PENSI

I. The Raysdacci Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. the applicant for a pension in this case, and from my own knowledge (or from positive proof presented to me by reputable witnesse-,) that she In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this Millags decer Ordinary. POWER OF ATTORNEY. STATE OF GEORGIA. County. hereby authorize ato receive and receipt for the pension paid-hereon and request IN WITNESS WHEREOF, I have hereunto set my hand and seal, this. Executed in the presence of DOUT'S PENSIO RICHARD JOHNSON, WARRANT ISSUED

Certificate of Ordinary of the County of Applicant's Residence

STATE OF GEORGIA, County of De Nath 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 Nathaniel Reader deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

For Widows Heretolore Allowed Pensions.

STATE OF GEORGIA,	Dersonally Comes Mrs.
County of De Kall	I. J. Reeder
County of 22 /Carr	_) Cp. octor
who being sworn, says on oat	h, that she is a bona fide resident of said county of
0 11 11	Georgia, and that she has RESIDED in said State
continuously ever since all her life	
Nathaniel Reeder	
	Regiment of La
Volunteers, that he enlisted in said regiment on or about	t the month of
186/ and served in the Army up to Sef	186 2 That he lost his
ife on the 2372 day of e	Sept 1862 (State here
ull particulars of the husband's death, when, where and fro	om what cause.) (
has wounded in 1	Parti Alasa Tan
Grad a tak	bill a series
Jah and taken	prisoner, and die
Jap and taken	prisoner, and die
Dap and taken	prisoner, and die
Dap and taken	prisoner, and die
Dap and taken	prisoner, and die a short while town Md.
Dap and taken	prisoner, and die
Dap and taken	prisoner, and die a short while town Md.
Jap and taken from the wound of terwords Hogers	prisoner, and die A short while Town Md,
Jap and taken from the wound of terwords Hogers	prisoner, and die A short while Town Md,
Sap and Taken from the wound of ter wards Hogers	prisoner, and die a short while town Md,
Sap and taken	prisone, and die A short while Town Md, Iddier, during his service in the army as a soldier, I, that she became his wife in the year 1850,
Jap and Taken from the wound uf tercoards Hagers deponent swears that she was the wife of said deceased so ad that she has never married since his death aforesaid at Georgia is her home and she resided in this 8	Prisone, and die A short while Town Md, Iddier, during his service in the army as a soldier, I, that she became his wife in the year 18 50, Intate 23d day of December, 1890, and has not
from the wound agers of the transfer of the was the wife of said deceased so and that she has never married since his death aforesaid at Georgia is her home and she resided in this S ared in any other State or locality since that date.	Drisone, and die A short while Town Md. Iddier, during his service in the army as a soldier, I, that she became his wife in the year 1850, tate 23d day of December, 1890, and has not I have been allowed a pension as a resident of
from the wound agers reponent swears that she was the wife of said deceased so and that she has never married since his death aforesaid at Georgia is her home and she resided in this 8 and in any other State or locality since that date. Le Kalk County for the year	A short while Town Mid., Iddier, during his service in the army as a soldier, that she became his wife in the year 1850, thate 23d day of December, 1890, and has not I have been allowed a pension as a resident of ending February 15th, 1895, and now apply for
Jap and Taken from The wound of the wound deponent swears that she was the wife of said deceased so and that she has never married since his death aforesaid that Georgia is her home and she resided in this 8 wed in any other State or locality since that date. De Kall County for the year see pension provided by law for the year ending February	A short while Town Mid., Iddier, during his service in the army as a soldier, that she became his wife in the year 1850, thate 23d day of December, 1890, and has not I have been allowed a pension as a resident of ending February 15th, 1895, and now apply for
deponent swears that she was the wife of said deceased so ad that she has never married since his death aforesaid at Georgia is her home and she resided in this Seed in any other State or locality since that date. De Kall County for the year expension provided by law for the year ending February	A short while Town Mid., Iddier, during his service in the army as a soldier, that she became his wife in the year 1850, thate 23d day of December, 1890, and has not I have been allowed a pension as a resident of ending February 15th, 1895, and now apply for

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Dersonally Comes Mrs.
County of De Kalk	Rechir .
10	
who being sworn, says on oath, that she i	s a bona fide resident of said county of
De Kalk State of Georgia, a	nd that she has RESIDED in said State
continuously ever since Ray	18 31, That she is the Widow of
Nathaniel Reeder	who was a Soldier in Company
of the 16 Th Regiment	of Ga
Volunteers, that enlisted in said regiment on or about the month	
186/ and served in the Army up to Sefit.	1862, That he lost his
life on the 23 day of Lef	1862 (State here
full particulars of the husband's death, when, where and from what ca	
has wounded as the but	teed Letterburg
and died of the would as	Hagerstown Mili
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management mining of the control of	enniment of the contract of th
Deponent swears that she was the wife of said deceased soldier, during	
and that she has never married since his death aforesaid, that she be	
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 be	
the pension provided by law for the year ending February 15th, 189	
Sworn to and subscribed before me, this	Reeder
2/ 1/	11 LEVILO

POWER OF ATTORNEY.

POWER OF ATTORNEY.

· . I,		County.	hereby aut	horize		
	* *		of			
to receive	and receipt for	or the pension	n paid hereon	and reques	st that he re	mit san
						
IN	vitness w	HEREOF,	have hereunto	set my hat	nd and seal,	this
day of			_1899.	• • • • • • • • • • • • • • • • • • • •		
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13.	Executed in p	resence of	ar y grad			
						
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	\	U(I),	County.	f, Pensions.	1889	
Paid.	S-	5th, 1899.	County.	SON, mer of Pensions.	RD	
	65- \ ENGINE	Exploy, ary 15th, 1899.	County	OHNSON, nmissioner of Pensions.	SSURD 1899.	or o
Heretofore Paid.	NO. 2465	DUM 3 FENDIUM, or year ending February 16th, 1899.	or County aniel Reeder	RICHARD JOHNSON, Commissioner of Pensions.	WARRANT ISSUED 2// 1889.	Chy or

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of I chalk 1 C. Lecder
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
31 - 31 - 31 - 31
Continuously ever since
the of the 16th Regiment of Salar in Company
Volunteers, that he enlisted in said regiment on or about the month of August 21
Volunteers, that he enlisted in said regiment on or agont the month of the last his 186 / and served in the Army up to Act / 186 / That he lost his
full particulars of the husband's death, when, where and from what cause.)
and delice & same they take and lied
Deta council as Hoge whom Mili
1 September 1 Sept
C
Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, and that she became his wife in the year 18 50.
I have been allowed a pension as a resident of Schath County for the year ending
February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.
Sworn to and subscribed before me, this
day of 1898.
Post-Office
State of Georgia
State of Georgia, County. Ordinary of said County, certify that I am well acquainted
who made the above affidavit and an satis-
With Mrs.
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since theday of18
Given under my official signature and seal this the 27th day of Land 1898.
Lill legodace.
() () () () () () () () () ()
Official County.

For Widows Heretoiore Allowed Pensions.

STATE OF GEORGIA	Personally Comes Mrs.
County of De Rach	I. Keeder
	, that she is a bona fide resident of said county of f Georgia, and that she has RESIDED in said State
Descare De State of	
continuously ever sines.	18 3/ That she is the Widow of
Hathaniel Reeder	Who was a soldier in Company Regiment of
Volunteers, that he enlisted in said regiment on or about the m	That he lost his
186 and served in the Army up to	
life on the . 232 day of	
full particulars of the husband's death, when, where and fro	
	amplono Jap
and died at hagers	www midi
	and the same of th
•••	* * * * * * * * * * * * * * * * * * * *
	the state of the s
Deponent swears that she was the wife of said deceased soldier, she has never married since his death aforesaid, and that she bec I have been allowed a pension as a resident of February 15th, 1898, and now apply for the pension provided to Sworn to and subscribed before me, this lay of 1899. Magazina C. Ordinary.	ame his wife in the year 18.33. County for the year ending
State of Georgia, County, Ordin	M. M. Magslace
with Mrs. I.J. Reeder	who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the	
has continuously resided in this State since the	day of May 18.31
Given under my official signature and seal this the	10 day of Jun 1899.
	nagodale.
Official Seal:	of DeKall County.
	and the second of the second

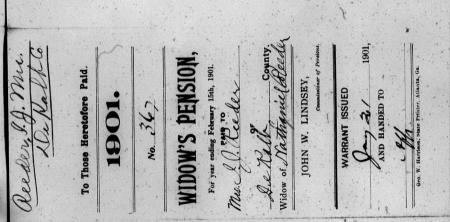
POWER OF ATTORNEY.

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o receive and	receipt	for the p	ension p		and requ	est tha	t he ren	nit same	to
1 16	Z.,	nnnn	annipality description		ontononional actions		and this	. /31	nigeria.
7	11			hereunto	set my nat	ia ana i	ear, thi) us knowledges Mi	
day of K			1900,	111	Kee	1.		[L. \$	e 1
				1	Py and in		·		J. J
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Heretonor 100	NO. 14)	DOW'S PENSIO	year ending February 15th, 1900. PAID TO	100	JNO. W. LINDSEY	WARRANT ISSUED	7 /S	ry Cy	rrison, State Prin

- Widow

POWER OF ATTORNEY.

STATE OF GEORGIA	·		4 (T. /
De Kall	County.		hereb	v authori
un R.S. Hille	y	of Ste	ente	
to receive and receipt for	the pension pa	id hereon and r	equest that he re	mit same
ana a mara a				
IN WITNESS WE		ve hereunto set n	ny hand and seal,	this / 2
day of tan	.1901.	21	Keeder	[L. §
Executed in present	ce of			
Am Ra asila	le			
Ort	mary.			P
	7. 0		1. 100 1. 1.	



For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
who, being sworn, says or	oath, that she is a bona fide resident of said county of
So litt , s	ate of Georgia, and that she has RESIDED in said State
continuously ever since 1471	182/ . That she is the Widow of
Inthand leeder	
H of the 16th	Regiment of Za
Volunteers, that he enlisted in said regiment on or about	the month of Luguel
186 and served in the Army up to	
life on the 2 3 day of C	C/12 186 4 (State here
particulars of the husband's death, when, where and fre	om what cause)
	istem Sapanddies
The doined it to	gession
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	and an arrange to the second s
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Deponent swears that she was the wife of said deceased sold	ier during his service in the army as a soldier, and that
she has never married since his death aforesaid, and that sh	
I have been allowed a pension as a resident of	
February 15th, 1897, and now apply for the pension p	기본 사람은 회사 전에 가는 가게 살아가고 있는데 나는 사람들이 가지 않는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하는데 하
Sworn to and subscribed before me, this	
15 day of Sec 1900.	I Heeder
William a Cordinary.	Post Office
	11 2. D .
State of Georgia,	1 MM Regulace
. // //	rdinary of said County, certify that I am well acquainted
with Mrs. L. Mecder	, who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is	
	day of 1831
Given under my official signature and seal, this th	day of 12 1900.
(Official)	Magalage
Seal. Seal.	ary of D. C. Cath County.

For Widows Heretofore Allowed Pensions.

County of Secretary	Personally Comes Mrs.
County of Auto-Carro) Children
Q No of the being sworn, says	on oath, that she is a bona fide resident of said County of
Delally	State of Georgia, and that she has RESIDED in said State
continuously ever since May 2	:
Fathaniel Ree	who was a soldier in Company
H of the 16th	Regiment of Hy
Volunteers, that he enlisted in said regiment on or or	out the month of Vary
186 and served in the Army up to.	186 2 That he lost his
	Sept 18.6 4 (State here
particulars of the husband's death, when, where	and from what cause)
monnea ar C	raptions Cape lies
as regressions	mai
	and the state of t
Billion of the control of the second of the	
Deponent swears that she was the wife of said deceased	soldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, and the	
I have been allowed a pension as a resident	of Sel Kalk County for the year ending
February 15th, 1902, and now apply for the pens	ion provided by law for the year ending February 15th, 1901.
Sworn to and subscribed before me, this	VIV.
1901.	Jef Keeder
Magalle Ordinary.	Post Office
	M.M. Rapdace
State of Georgia, County	Ordinary of said County, certify that I am well acquainted
Descary County.)	
with Mrs.	, who made the above affidavit and am satisfied
has continuously resided in this State since the	day of May 18.34
Given under my official signature and seal, th	
Given under my omoiat signature and sear, to	magslace
Official Seal.	02 200
the state of the s	Ordinary of County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

1. , hereby authorize

of ______

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

at ______

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

day of ______

[L. S.]

Executed in presence of

JOHN W. LINDSEY,

WARRANT ISSUED

WIDOW'S PENSION

1902.

No. 272

POWER OF ATTORNEY

	County. J	hombu	autho
	of	, hereby	autio
	eipt for the pension paid he		nit san
	at		
In Witness	Whangof I have haveunto	ot my hand and seal, this	
	Whereof, I have hereunto s	set my hand and seal, this	
	Whereof, I have hereunto s	set my hand and seal, this	
		set my haud and seal, this	[r
of		set my haud and seal, this	
of	1903.	set my hand and seal, this	
of	1903.	set my hand and seal, this	

To Those Heretofore Paid.

1903.

No. 24

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT ISSUED

AND HANDED TO

awai Pankions

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, PERSONALLY COMES MRS. County of De Kall I Recder
He Hall State of Georgia, and that she has RESIDED in said State
Continuously ever since My 2d 1831. That she is the Widow of Nathaniel Receive who was a soldier in Company
Wolunteers, that he enlisted in said regiment on or about the month of Lag
186/, and served in the Army up to Sept. 1862. That he lost his life on the 23d day of Sept. 1864 (State here
particular of the husband's death, when, where and from what guess).
Hogerstonn the wound at
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 50. I have been paid a pension as a resident of Dellall 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 subgribed before me, this 15 day of an 1902.
State of Georgia
State of Georgia, Sounty. State of Said County, certify that I am well
am satisfied that the facts therein stated are true, and I know she is the individual she represents
day of May 1834.
Official (Seal) Ordinary of Dellath County.

NOTE. All blank spaces must be filled.

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA	ONALLY COMES MRS.
County of De Hall	Meder
who, being sworn says on oath, that she is a bor	a fide resident of said County of
State of Georgia, and the	t she has RESIDED in said State
continuously ever since May 2 & 163/	
Nanthaniel Reegler	who was a soldier in Company
H of the 16th Regime	nt of Ha
Volunteers, that he enlisted in said regiment on en about the month	of August.
186 / , and served in the Army up to Seffer	186 . That he lost his
life on the 231 day of Seft	1867, (State here
particulars of the husband's death, when, where any from what cause.)	Pas wounded
	died of the
wound as Hageistown	
	<u> </u>
Deponent swears that she was the wife of said deceased soldier, du	ring his service in the Army as a
soldier, and that she has never married since his death aforesaid,	
the year 18 52	
I have been paid a pension as a resident of AcKet	County for the
year ending December 31, 1902, and now apply for the pension pr	
	ovided by liew for the year ending
December 31, 1903.	
Sworn to and subscribed before me,	1 Reeder
this day of Aug 1908.	0 27
Magsdeles, Ordinary. Post-Office.	Helwwr.
	2111
State of Georgia,	M. Cogsdace
De Teath County. Ordinary of s	aid County, certifiy that I am well
acquainted with Mrs. I Reeley	, 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	
Man 31	
Given under my official signature and seal, this the	
Given under my official signature and seal, this the	day of 1903.
- Illiman	day of 1903.
(Official)	day of Sen 1903.
Official Seal. Ordinary of.	day of San 1903.

NOTE.—All blank Spaces must be filled.

Youther and Affidavit must bear date after January 1st, 1903.

POWER OF ATTORNEY.

Ι					hanabar	authorize
	of					authorize
receive and receipt for the pension paid hereon, and request that he remit same to					at he remit	same to
at						
To Winner	SS WHEREOF, I					
of	SS WHEREOF, I	1904.				
01						[L. S.]
Evenuted	in presence of				4	
Executed	in presence of		•		d 13.	
					1	
			*			
		(6)				55° 1
		1. 1				
		<u> </u>				
	and the section		1 505		904,	
		±.	9 11	1 8	The second second second	
	NOI	1904	Sount	Pension		4 -
	NOISN	R 31, 1904	Bount	Y, Pensions	2	Atlanta.
	ENSION	4BER 31, 1904.	in Para	1 5	SUBD	unter, Atlanta.
) 4.	PENSION	CEMBER 31, 1904.	nies Pull	1 5	F ISSUED	ate Printer, Atlanta.
04.	S PENSION	POR DECEMBER 31, 1904. And TO	unid But	1 5	ANT ISSUED (2) 1 HANDED TO	M. State Printer, Albuta.
1904.	W'S PENSION	POR PAID TO PA	Me Count	Regiment /6" JOHN W. LINDSEY, Commissioner of Pension	WARRANT ISSUED (2) AND HANDED TO	Harrison, State Frinter, Atlanta.

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 day of.... Executed in presence of JOHN W. LINDSEY,

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Chall		Jef.	Ruder	
Lellalb	State of Geo	rgia, and that s	resident of said County of the has resided in said State	
Hathaniel Per	9, 18		That she is the Widow of ho was a soldier in Company	
M of the	/	6" Regimen		
Volunteers, that he enlisted in said regin			aug	
1867 , and served in the Army up	-//		186 2 . That he lost his	
life on the 13 day of	/		1864 (State here	
part where of the husband's death, when, we commended les as	here and from wh	at cause.)	(Nich Ilm 4	
cumul was	ngsuoi	is riggo	cally Naginaris	
			· · · · · · · · · · · · · · · · · · ·	
	1	1 7		
Deponent swears that she was the wife of	f said deceased	soldier, during	his service in the Army as a	
soldier, and that she has never married	l since his deat	h aforesaid, and	that she became his wife in	
the year 18_5 O				*
I have been paid a pension as a res	ident of	EMa	County for the	
year ending December 31, 1903, and nov	apply for the	pension provide	d by law for the year ending ,	
December 31, 1904.				
Sworn to and subscribed before m		11R		
this 121 day of Jaury	1904.	1 10	eder	
James Rylorge ord	linary. Post	Office	culir	
1		04	6040	
State of Georgia,		//	nus. 18. Teorg	8
(1) (1)			ounty, certify that I am well	
acquainted with Mrs. J. J. Te			ade the above affidavit and	
am satisfied that the facts therein state				
herself to be, and that she has continuous		his State since	the	
day of 110ay 183		91		
Given under my official signature a	nd seal, this the	day		
Official Seal	Jan	WI /E	George	
	Ordin	ary of	Malb county.	

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, PERSONALLY COMES MIS.
County of Lestall J. J. Reader
who, being sworn says on oath, that she is a bona fide resident of said County of State of Georgia, and that she has respect in said State
continuously ever since That she is the Widow of Who was a soldier in Company Of the Regiment of S
Volunteers, that he enlisted in said regiment on or about the month of Cauca
186, and served in the Army up to 186 That he lost his
life on the day of 18 (State key)
particulars of the husband's death, when, where and from what caffe.)
Died in prison, Sept 14, 1862
- North Control of the Control of th
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
year ending December 31, 1904, and now apply for the pension provided by law for the year ending
December 31, 1905. Sworn to and subscribed before me, I A Reider
Line /8 day of Jally 1905. } January Release Ordinary. Post-Office
State of Georgia, I. Janus, P. Jungs Ordinary of said County, certify that I am well acquainted with Mrs. F. Puller, Who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual slie 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 tip /8 day of Janey 1905.
Jonat Regional
Seal. S Ordinary of Mustall County.

JOHN W. LINDSEY,

WARRANT ISSUED

AND HANDED TO

WIDOW'S PENSION

For year ending Dec. 31, 1906.

To Those Heretofore Paid.

19061

No. 1695

POWER OF ATTORNEY.

or the pension	paid hereon,		hereby aut	hor
receive and receipt for the pension	paid hereon,		1	
and the penalon	Para Hereon	and requiect t	hat he wamit "no	
	at	and request t	nat ne remit sa	ine
In Witness Whereof, I have heret	**	nd and seal th	ie .	
y of		ad and scal, th		
	T			Ĺ.

WIDOW'S PENSION
For Year ending Dec. 31, 1907.

No. 152

Mrs. J. Reicher OF DOFALB. Count Widow of Nathanil Reecler Co. H. Regiment 164, Ha

JOHN W. LINDSEY,
Commissioner of Pen
WARRANT ISSUED

AND HANDED TO

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
7	that she is a bona fide resident of said County of Georgia, and that she has resided in said State
continuously ever since May 2,1	83/ That she is the Widow of
Hathanul Reed	who was a soldier in Company
of the 6 George	Regiment of
Volunteers, that he enlisted in said regiment on or	about the month of Muguet
186 and served in the Army up to	186 2. That he lost his
life on the day of	e /
particulars of the husband's death, when, where and	from what cause.)
Due in prise	
Deponent swears that she was the wife of said dece	ased soldier, during his service in the Army as a
soldier, and that she has never married since his d	HER
the year 18	de al l'il
I have been paid a pension as a resident o	12 (Kall County, for the
year ending December 31, 1905, and now apply for	the pension provided by law for the year ending
December 31, 1906.	in the second
Sworn to and subscribed before me	11111
This 17 day of fling 1906.	_ of Reeder
Amus Rylorge Ordinary.	Post Office do eceitur
	2 22
State of Georgia,	James M George
2 1 Mally County.	Ordinary of said County, certify that I am well
acquainted with Mrs	, who made the above affidavit, and
am satisfied that the facts therein stated are true, a	and I know she is the individual she represents
herself to be, and that she has continuously resided	in this State since the 2/ 4b
day of May 18 3/	1
Given under my official signature and seal, thi	s the 17 day of Jarry 1906.
JOfficial)	mus Ryinge
Seal Ordi	nary of De Nalla County.
NOTE All black and an all a	

NOTE:—All blank spaces must be filled.

Voucher and Addaylts must bear date after January 1st, 1906

For Widows Heretofore Allowed Pensions.

	ALB.	J. J. Reade	<u>v</u>
who, being	ng sworn says on oath, tha	t she is a bona fide resider	nt of said County
DeKAL	B. State of Geo	rgia, and that she has RE	SIDED in said Stat
outinuously ever since		That sh	e is the Widow
nathani	el Reeder	who was a s	oldier in Compan
	th Ga		1, 17, 17, 17
Volounteers, that he enlisted	iu said regiment on or abou	it the month of	ug.
186/, and served in the			
life on the	day of	is	(State he
varticulars of the husband's de			
Diedi	a prison &	Left 14th 186	62
			, j.
* .			-
soldier, and that she has nev			became his wife
I have been paid a pen vear ending December 31, 1907. Sworn to and subscribis day of Jan	sion as a resident of	DescALB. pension provided by law to	County, for the
I have been paid a pen ear ending December 31, 1907. Sworn to and subscribes day of Jan.	sion as a resident of 1906, and now apply for the cibed before me 1907.	h aforesaid, and that she	County, for the year ending
I have been paid a pen vear ending December 31, 1907. Sworn to and subscribes day of January Control of Georgia,	sion as a resident of	DescALB. pension provided by law to	County, for the year ending
I have been paid a pen rear ending December 31, 1907. Sworn to and subscribes day of January Charles of Georgia, DeKALB.	sion as a resident of 1906, and now apply for the cibed before me 1907. Post Ordinary. Post Ordinary.	h aforesaid, and that she	County, for the year endir
I have been paid a pen rear ending December 31, 1907. Sworn to and subscribes day of January Charles of Georgia, DeKALB.	sion as a resident of 1906, and now apply for the cibed before me 1907. Post Ordinary. Post Ordinary.	pension provided by law in toffice. January of said County, cer	County, for the year ending
I have been paid a pen rear ending December 31, 1907. Sworn to and subscribis day of January Classics State of Georgia, DeKALB.	sion as a resident of 1906, and now apply for the cibed before me 1907. County. County. Or	pension provided by law to the first office. I January of said County, cen, who made the	County, for the year ending the year end
I have been paid a pen rear ending December 31, 1907. Sworn to and subscribes day of John Charles of Georgia, DeKALB. Sequented with Mrs.	sion as a resident of 1906, and now apply for the cibed before me 1907. County. County. County. Or Research	pension provided by law to toffice I January I know she is the individed to the control of the	County, for the year ending the year end
I have been paid a pen rear ending December 31, 1907. Sworn to and subscribes day of January Region (Control of Georgia, DeKALB.) State of Georgia, DeKALB. Equainted with Mrs. January Region (Control of Georgia), and satisfied that the facts the serself to be, and that she have	sion as a resident of 106, and now apply for the ribed before me 1907. County. County. County. Ordinary. Portuge of the county of the cou	pension provided by law to toffice I January I know she is the individed to the control of the	County, for the year ending the year end
I have been paid a pen rear ending December 31, 1907. Sworn to and subscribes day of Journal Report State of Georgia, DeKALB. Coquainted with Mrs. Company of the facts the correct to be, and that she has a portaged as the company of the correct to be, and that she has a portaged as the company of the correct to be, and that she has a portaged as the company of the correct to be, and that she has a portaged as the correct to be, and that she has a portaged as the correct to be, and that she has a portaged as the correct to be, and that she has a portaged as the correct to be, and that she has a portaged as the correct to be, and that she has a portaged as the correct to be, and that she has a portaged as the correct to be, and that she has a portaged as the correct to be, and that she has a portaged as the correct to be, and that she has a portaged as the correct to be a portage	sion as a resident of 106, and now apply for the cibed before me 1907. County. County. County. Or County	pension provided by law in tomce I James I divary of said County, cerm, who made the individual this State since the	County, for the year ending of the year end of the year e
I have been paid a pen rear ending December 31, 1907. Sworn to and subscribes day of Journal Republication of Georgia, DeKALB. State of Georgia, DeKALB. Sequential with Mrs. 2. Sem satisfied that the facts the erself to be, and that she has also of the series of th	sion as a resident of 106, and now apply for the ribed before me 1907. County. County. County. Ordinary. Portuge of the county of the cou	pension provided by law in tomce I James I divary of said County, cerm, who made the individual this State since the	County, for the year ending the year end
I have been paid a pen year ending December 31, 1907. Sworn to and subscribes day of Journal Research of Georgia, DeKALB. State of Georgia, DeKALB. State of that the facts the nerself to be, and that she had you	sion as a resident of 106, and now apply for the cibed before me 1907. County. County. County. Or County	pension provided by law in tomce I James I divary of said County, cerm, who made the individual this State since the	County, for the year ending the year end year

NOTE.—All blanks must be filled.

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

Reeder, J. g. (Mus.)

1921

Application for Pension Due Deceased Pensioner (UNDER ACT 1904)

(To	pay expense	es of last MI	ness or I	uneral)
Ju	mus	Elier	nge o	Ordinary
of	Dist	all		County
	Mave	h 26		192
Amou	nt \$ 34		-::	
Pa	Approv	ed and order	red paid.	1001
		J. V Commission	V. LINDS per of Pe	
		11-1 X		-0

Ordinary: Fill out above in full and send this blank to Pension Office for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Office with your receipted pay-rolls to be permanently filed with them. Do not keep this application in your office. your office.

Index Printing Co., Atlanta, Ga.

(Under the Act of August 15,	1904)
To Be Paid to the Ordinary for Funeral Expenses a	nd Expenses of Last Illness.
GEORGIA. De Kall County.	
Personally before the, the Ordinary of said County, comes	
	ty, who, after being sworn, on oath says f said County, and that said pensioner
was on the old Pension Roll of all	
V. Oly roll	County, in this
State, on the 26 day of March n Pension of Me hundred Twenty five	(125 00) 1921, and that
a Pension of ONE termandal of went five	Dollars was due pensioner and
unpaid at the time of pensioner's death. That he left no wide	
no estate of any value sufficient to pay these funeral expenses,	
per sworn statement fully and completely itemized, hereto attac	hed.
Sworn to and subscribed before me	
this 27 day of the 1921 min	e. A. A. Woodall
Janus R George Ordinary.	
Justille County.)	
AFFIDAVIT OF ORD	DINARY
GEORGIA Wellalby County.	
1. James R. Gronge that personally know Mus AR wooder	Ordinary of said County, do certify
citizen of said County, and that said person is of a truthful a	nd trustworthy character, entitled to full
faith and credit. 1 also knew Muss J. J. Ruder	while in life and that this
was the same person whose name appears on the	Pension C
was the same person whose name appears on the Roll of Roll of	County, and was paid a Pension
ou hundred of or	Dollars in said County for 1920, and
I now believe said pensioner to be dead.	

INSTRUCTIONS:

Inst. For use in all cases where pensioner died after January ist, had not been out of State longer than twelve months, and died without owning sufficient property to pay such expenses. The wildow of a soldier, if she is living, has prior claim over these extremely contained to the state of the state

Given under my hand and official seal, this

(SEAL)

The above and foregoing account is rendered for services in the last illness tor for funeral expenses, as the case may be of the control of t

H. M. PATTERSON

FRED W. PATTERSON

H. M. PATTERSON & SON

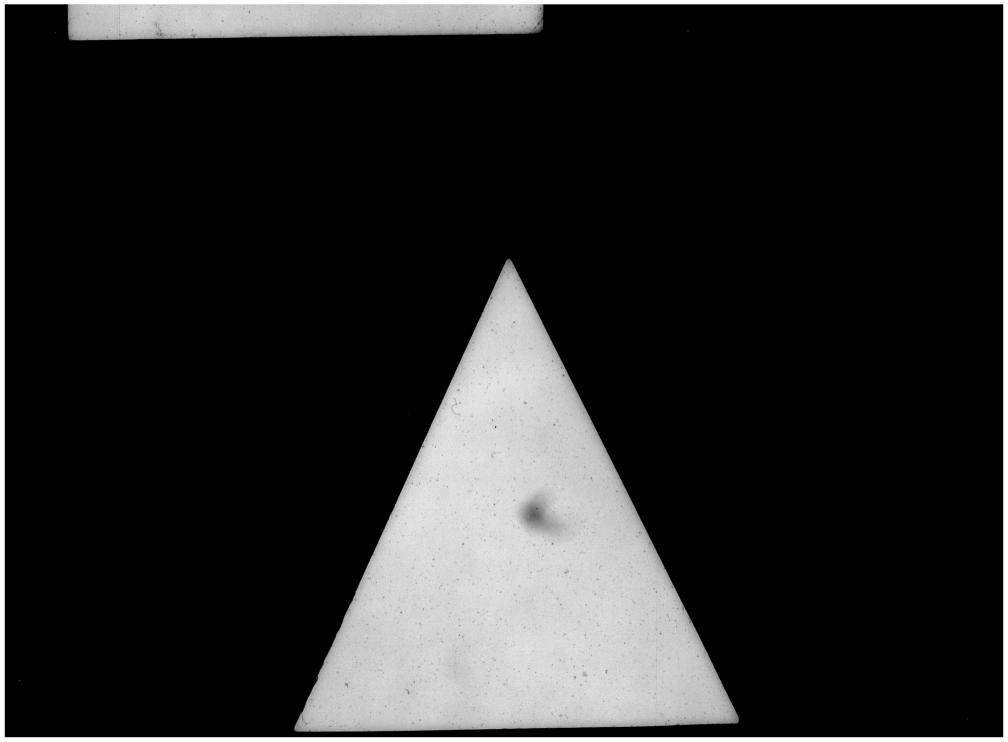
FUNERAL DIRECTORS

96 North Forsyth Street

Atlanta, Ga., March 27, 1921.

Sold to Funeral Expenses of Mrs. Isabella Jane Liddell Reeder:

	Casket Embalming, dressing, etc. Dress Two Constitution notices Two Georgian notices Two Journal notices Cement Vault Motor Flower Car Motor Hearse Pall-bearers' Motor Coach Two Limousines	175 15 33 4 7 8 50 15 12 23	14 92 64	348 70
County of Fu State of Geo		is	ileis	
	M. P. Zueton Co En Communi replin ap 1922			



necessary delays to applicants, and to enable all parties interested to understand uses to disabled soldiers, as well as the rules adopted by the Governor touching the Howing suggestions are submitted.

Is been wounded, the description of the wound should be carefully and fully set hysician, and followed by a plain statement of facts showing the except of the lains disability from disease contracted in the service, a tull and carefully stated all be given, tracing the disability by positive proofs to the service.

ver to say that an arm is "substantially useless for ordinary pursuits of life, etc." in to the clause of the Act in reference to the arm or leg, but the limb must for all ally and essentially neeless." it would seem to be a fair construction of the Act, and the say that unless the injury is such as to require the constant use of crutch or stick, stantially and resentially useless." stantially and resentially useless."

No. 1830

APPLICATION FOR ALLOWANGE

Set arm Desoble
Applicant, & Recoes
county & Kalk

Amount 50 Date of Warrant 468

SECRETARY EXECUTIVE DEPARTMENT.

applicant

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 tull 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 exactly the service.

2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered succentually 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 relevence 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 added some or the substantial to the substant

been duly sworn to.

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

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

APPLICATION FOR ALLOWANGE

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
county.)
PERSONALLY appears 4. Regues of Dekall 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 day of
January 1886; that he enlisted in the military service of the Con-
federate States (or of the State of Georgia) during the war between the
States, and served as a Private in Company B., of HI th Regiment of Georgia Volunteers Stovalls 's Brigade; that whilst engaged
in such military service, at the battle of Jonesborough in the State
of Ga, on the I day of August 1864, he was
wounded as follows: Bone of left aim Shot into
afove Elbow. Rendering arone Suchtan
teath reless.
the same of the sa
Sworn to and subscribed before me, this the Alleviso B day of Feb 1889 mark David Cagle J. P. Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.
the extent of the disability.
Commissioned Officer's Affidavit.
STATE OF GEORGIA,
County.')
Personally came before me of the county
of State of Georgia, who, being duly sworn, says that he was
a commissioned officer in Company, of Regiment of
Volunteers, and that deponent knows, 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
as stated by him in said affidavit. Deponent further states that said
is a bona fide citizen of this State and resides
incounty.
The state of the s

STATE OF GEORGIA, State of Georgia Schall County.	STATE OF GEORGIA,
	I, M. Ragedale Ordinary of said county
PERSONALLY CAME J. E. White W.M. Rowdon	do certify that I am well acquainted with A, Reeves, the
citizens of W.S. States Dekell 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 A. Revue	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 Likall 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.	Jestise of the Keneps said county, and the said affidavits and signa-
Sworn to and subscribed before me, this	tures thereto are genuine.
Swam A. Mr. Howard SR 7 8. 20 1870	Given under my official signature and seal, this 6 4 day of 1889.
14 cxf JP	Will Cagodale.
Nors.—Above affidavit must be made by three citizens of the county of applicant's residence.	Ordinary De Pall County.
STATE OF GEORGIA,	District American
Dekath County.	Power of Attorney.
PERSONALLY comes before me Il to godole Ordinary of said county,	STATE OF GEORGIA,
Addayson and Al Loff , both known to	County.
me as reputable physicians of said county, who, being severally sworn, say on oath that	Know all Men by these Presents, That I,
they have carefully examined fullrew Keenes and after such	of the state of th
examination say that the applicant has been injured as follows: Fractive of left	county, in said State, do hereby appoint
crow about schow Redersting a Congramo fraction	ofmy true and lawful attorney in fact, for
lover hieral of ladius, followed by gangrene. Conseins	me and in my name, to receive and receipt for whatever amount of money I may be entitled
de of Some out our half or the Juckes of hours	to from the State of Georgia by reason of the injury received as aforesaid in the military ser-
inclained Saise arm Substantially useles	vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
deely the laid applicant has been sindered for actically	authorizing my said attorney to receipt in my name for any Warrant that may be issued by
recompetent to perform the ordinary anacrious	the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
of life	In witness whereof I have hereunto set my hand and seal, this
Sworn to and subscribed before me, this) Ad Margany Mad	day of188
day of Spril 1889 Of the M.D.	Executed in the presence of us:
day of Spril 1889 J.M. D. M.D.	1
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.

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hom the foregoin	ng affidavits wer			ney was signed, is the said affidavits a
gnatures thereto ar	re genuine. official signature			N.
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before wh	om the forego	oing affidavits	were made	and power of	of attorney wa	as signed,
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signatures	thereto are ger	nuine.			N	,
Giver	under my offic	cial signature	and seal, this.	//. da	y of Te	<u></u>
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For Applicants Heretofore Allowed Pensions.	rut applicants neretolore allowed rensions.
	STATE OF GEORGIA,
STATE OF GEORGIA,	We Half County
De Kall County 1	PERSONALLY appears A. A. Rece very of De Hall,
PERSONALLY appears A Rieves of De Kall county,	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 resided therein continuously ever since the
resident of said State, and has been such continually since the day of	day of 1820; that he enlisted in the military service of the Con-
1847; that he enlisted in the military service of the Con-	federate States (or of the State of State
federate States (or of the State of Games) during the war between the	States, and served as a 22 27 C in Company B, of 4/th Regiment
States, and served as a Private of in Company B, of 4/th Regiment	of La Volunteers Stavalle 's Brigade; that whilst engaged
of Sa Volunteers Stovale 's Brigade; that whilst engaged	in such military service at the battle of force for in the State
in such military service, at the battle of Jonesbord in the State of La on the 31 day of Lag 1864, he was	of Ita , on the 31" day of Air 1864, he was
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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
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 of
entitled for the year ending October 26, 1890. I have heretolder been allowed a pension	Glify dollars, for
Sworn to and subscribed before me, this the	Sworn to and subscribed before me, this, the
14" day of Jeb 1890 mask	day of Jel 1891. mish
M. Mossdale, Ordinary,	Milliagsdale, Ord incom,
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POWER OF ATTORNEY.	POWER OF ATTORNEY.
STATE OF GEORGIA	STATE OF GEORGIA,
County	County. \
KNOW ALL MEN BY THESE PRESENTS, That I,	Know all Men by these Presents, That I,
of	ofCounty, State of Georgia, do hereby appoint
county, in said State, do hereby appoint	manuscomo anteces es contratos contratos contratos con contratos con contratos contrat
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 whatever amount of money I may be entitled
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	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 stat II in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be	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 Gover-
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, this	day of1891.
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Executed in the presence of us:	Executed in the presence of us:
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and the state of t	DIRECTION.
DIRECTION.	Send money to me as follows, by
Send money to me as follows, by	toP, O.
County, Georgia.	County, Georgia.
- County) 05018-111	

STATE OF GEORGIA. En soldle 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 repesents himself to be, and that he resides in this county. Given under my official signature and seal, this / day of March 1892. County. **PENSION** H. HARRISON,

For Applicants Heretofore Allowed Pensions.

Executed in the presence of us and and well and trained that the statements Catal and the state of the world to designing and and DIRECTION. Send money to me as follows, by STATE OF CLORGIA, I P. O. ... County, Georgia. Monday, or good look to be to be Swort to and or the ullowance County, State of Georgia, who, being duly sworn, says on oath that he is a Jona Jide citizen \$ STATE OF GEORGIA.

POWER OF ATTORNEY. STATE OF GEORGIA,

County.

dividual he represents handento be, and that he sessidas it this Count

of my true and lawful attorney in fact, for me und the any manage of 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 affidivir, hereby authorizing my said atterney 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.

WITTHES WHEREOF, I have hereunto set my hand and seal, this

said affidavit are true, and true de is all abled, to the extent by corner, and a legique in the far 2]

County, State of Georgia, do hereby appoint

Know all Men by these Presents, That I

Responding appears County, State of Georgia, who, being duly sworn, says on oath that he is a homa field citizen and resident of Georgia, and has been such continuously since the Confederate States (or of the State of Confederate States) and the military service of the Confederate States (or of the State of Confederate States) and served as a Confederate States (or of the State of Confederate States) and served as a Confederate States (or of the State of Confederate States) and the State of Confederate States (or of the State of Confederate States) and the State of Confederate States (or of the State of Confederate States) and the set of Confederate States (or of the State of Confederate States) and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 36, 1892. Thave hererofore been allowed a pression of Confederate States (or of the State of Confederate States) (or of the State of Confederate States) (or of this State), as stated in the foreign affidiate the military service of the Confederate States (or of this State), as stated in the foregoing affidiate; 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 WITEREOF, I have hereunto set my hand and seal this. County, Send money to me as follows, by DERECTION. Send money to me as follows, by To County, Georgia.	I of Application i leterolote Allowed I etisi	21.12.
The second in the presence of the Confederate States (or of the State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously since the Activative of the Confederate States (or of the State of the State of the military service of the Confederate States (or of the State of the State of the military service at the battle of the State of the Military service at the battle of the State of the St	STATE OF GEORGIA,	
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on oath that he is a dona fide citizen and resident of Georgia, and has been such continuously since the ACL Ay of ACL 18 ; that he enlisted in the military service of the Confederate States (or of the State of ACL 18 ; that he enlisted having the war between the States, and served as a ACL 18 ACL IN COUNTY OF THE NEW YOUNGERS OF ACTION IN STATE OF GEORGIA. Sworm to and subscribed before me this the day of ACL 1892. That I, sof County, in said State, do hereby appoint of me and in my name, to receive add receipt for whatever amount of money I may be entitled to for or any sum of money which may be coming to me for the redson aforesaid. IN WINNESS WHEREOF, I have hereunto set my hand and seal this. DIRRECTION. Send money to me as follows, by DIRRECTION. DIRRECTION. Send money to me as follows, by DIRRECTION. P. O.		
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Brigades, that whilst engaged in such anilitary service at the battle of Service 20 day of the state of the s	during the war between the States, and served as a drivate, in Comp	any B.,
Brigade, that whilst engaged in such military service at the battle of Service 10 day of 1864, he was wounded as follows: 1864, he was wounde	of 4/ th Regiment of Leal 29 Volunteers Stuvall	's *
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To P. O.	DIRECTION.	1 - 1 - 1
	Send money to me as follows, by	· · · · · · · · · · · · · · · · · · ·
County, Georgia.	to management to the state of t	P. O.
	County, Georgia.	

De Well	County.	Assertation	4	2
Personally appea	111/1	eeves	of De 1	Rall
County, State of Georg	ia, who being duly	sworn, says on	oath that he is a	bona fide citizen and
resident of said State, a				
				service of the Con-
federate States (or of t	61			he war between the
States, and served as a	Volunteers &	·Ve		of #/ th Regiment hat whilst engaged in
such military service at		onestor		in the State
of Ga	on the	3/ 1 da	y of Aug	1864, he was
wounded as follows:	Shor n	with a	missier	ietall
in the	est an	m bo	ne sece	ted and
albow st	J. Mend	ering	me arm	Essentially
and su	as to all	ally us	eless	
~	# 15.			2 1 h
8				
Deponent desires	to praticipate in the	é benefits of the	Act, approved Oc	tober 24th, 1887, and
the acts amendatory the	ereof, and makes a	pplication for the	en allowed a pens	nich he is entitled for
Gittes	a. 10, 123.	dollars, for		lam.
Sworn to and subs	scribed before me, th	his, the	10 x Rex	nes!
13th day	of March	1893.	much	¥
Monk	godale Or	dinas		
Morn—State fully nature disability, resulting from the w	of wound or character of d	lleense which causes t	ne disability, and englain	particularly the extent of the
		um Lagrangen		in the first of a
STATE OF G		. "	SANTA PERSON	
	County	an farme		
I,		aale,	Ord	inary of said County,
do certify that I am we		11	Reenes	
applicant in the forego				
said affidavit are true,	and that he is disab	bled, to the exten	the claims, and	know he is the in-
dividual he represents	himself to be, and t	that he resides in	this County.	
I further certify th	rectivity prof. 1	ave, hereu	aro ar a sur p	and the first and and
before whom the fore	going affidavits we	ere made and	power of attorn	ey was signed, is a
the Confederate, street	tor of the State),	of	said County, and	the said affidavits and
signatures thereto are	genuine.	a fin contact	The state of	Land De The
	official signature and	d scal, this 10	day of	1893.
en and the second	Mm	Road	etts, of Georgia	"qo posipi shis is"
Nuove wil Men	by these Prese.	That I	0 7/11	County.
	County. S	Ordinary	Maria Maria Maria Maria	County.
STATE OF G	EORGIA (
300000000000000000000000000000000000000	POWER	UF ALT	ORNEY,	

POWER OF ATTORNEY.

STATE OF GEORG	GI	A.
----------------	----	----

Know all Me	n by these Presents,	That I,			
		of			
	Georgia, do hereby a	ppoint			
d			my true at		
State of Georgia States (or of thi ney to receipt in which may be co	by reason of an injure s State), as stated my name for any Wa wring to me for the re	ceipt for whatever at ry received as aforesa in the foregoing at arrant that may be iss ason aforesaid. have hereunto set my	id in the militar fidavit; hereby ued by the Govern	y service o authorizing nor, or for a	f the Confeders my said Atto
lay of	es williams, i		nand and seat,		
					[r.,
· Execut	ed in the presence of	us			
				•	
		() ()	2		
		DIRECTIO	ING		
Sand money	to me as follows, by		1110.		•
	to me as informs, o	to	74		
		County, Georgia			
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	ur •	- 11	1 1		
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3	\$	Agriculture.		. 0	21.5
olled.			0	V. 15	2 2
Enrolled.)	2 4	2	1	0 1	2 W 1
dy Enrolled.)	Pension	7	rie .	RISO.	NDE
readly Enrolled.)	P8 4	140	men C.	ARRISO.	HANDE
Already Enrolled.)	S Per	red Ass	nem u	. HARRISO	ANT HANDEL
se Aiready Enrolled.)	2 00	aved As	men usu	. H. HARRISON, Scordary Executive Department	LACL &
Those Already Enrolled.)	2 00	eaved Au	Wem worn	/W. H. HARRISO	WARRANT HANDED TO
For Those Aiready Enrolled.)	Soldier's Per	Reaved Ass	Were wow	/W. H. HARRISO: Serretury Erecut	WARRANT HANDEL

	OWER OF AL	CORNE I.
STATE OF GEOR	GIA,	3.6
·	County,	
KNOW ALL MEN	BY THESE PRESENTS, That I	4
	of	
County, State of Georgia,	do hereby appoint	
of		my true and lawful attorney in fact, for
State of Georgia by reason States (or of this State) as in my name for any Warra be coming to me for the re	of an injury received as aforesal stated in the foregoing affidavit; ant that may be issued by the C	nount of money I may be entitled to from the id in the military service of the Confederate hereby authorizing my said Attorney to receipt lovernor, or for any sum of money which may be hand and scal, this
		[(· H.]

DIRECTIONS. Send money to me as follows, by

SOLDIER'S PENSION.

For Applicants Heretofore Allowed Pensions.

i of Approunts Horotorolo Milonou Lousions.
STATE OF GEORGIA,
De Kalb County.
PERSONALLY appears Al Reeve of he 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 . 185%; 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 Privale in Company B, of 41 th Regiment
of Ja Volunteers Movall 's Brigade; that whilst engaged in
such military service at the battle of Jonestono in the State of Ja on the 23/1 day of Jacq 1864, he was
wounded as follows: Was shot in left asm in sellow, joint causing facts foins
rendering that arm substantially
and essentially uscless.
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 dollars, for the year 1895
Sworn to and subscribed before me, this, the) Allino
The day of March 1894. I mark
Min Rogedale Ord inary.
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,)
0 1/11
I, M.M. Lagsdale M. Ordinary of said County.
do certify that I am well acquainted with My Reeve the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 Murch, 1894.
(AMX)
(your here) MMLogadacu
Ordinary De Kall County.
, and the same of

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, De Call County.
personally appears the ceives of he Kall
becoming appared
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 All his life 18 that he enlisted in the military service of the Confederate States (or of the State of —) during the war between the
tederate States (or of the State of 100) dutting the war between the
States, and served as a Mirates in Company D, of #1 th Regiment
of La Volunteers, Theraf 's Brigade; that whilst engaged in
such military service at the battle of loves bora in the State
of Sa , on the 31" day of Jeeg 1864, he was
wounded as follows: Was shor with minnie
ball in the left arm cousing
resection of elbow Joms rendering
arm substantially useless.
The same of the sa
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 Hitty dollars, for the year 189 4.
Sworn to and subscribed before me, this, the
ich Ch C
day of Jeft 13 1895.) mark
Millograde Charman
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,
Delan County.
I, Am Rogsdale in D Ordinary of said County,
do certify that I am well acquainted with Al. Reeved the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 <i>Ole t</i> 1895.
Mank!
seal seal shere
Ordinary Delatt County.

POWER OF ATTORNEY

	TOWER OF ALTORNEY.
STATE OF GEOR	RGIA,
4	County.
I, ****	hereby authorize
	of
to receive and receip	pt for the pension paid hereon and request that he remit.same to
	by
at 💮	
IN WITNESS	WHEREOF, I have hereunto set my hand and seal, this
day of	1896.
	[t. s.]
Executed in	presence of us
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
A CONTRACTOR	
	N 2 1 7 1880
9	
	LSBG. LSBG. LWINNETT I CONTRACT STOCK S
	PE COLLECTION OF THE PROPERTY
l'rear	Land Control of the C
A A D	FIGURE See
Those Aiready	ISBB. JULIANDER TO SECRETE AS SECRETE AS SECRETE BEONISON SECRETE BANDED TO SECRETARY BACONING DE SECRETARY BANDED TO SECRETARY BACONING DE WARRANT HANDED TO SECRETARY BACONING DE SECRETARY BANDED TO SECRETARY BACONING DE SECRETARY BANDED TO SECRETARY BANDED T
(For Those Aiready Enrolled.)	
	Name County Dir bilit Amount,
	2 S G A

Maimed Soldiers. Voucher No. 1830. Amount, & TO.

Paid to A. Rec 1202

For Left a 170

Al 10 A.C. Included in Warrant No. issped to Treasurer

Copple oa at ..

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, Se Noll County.
personally appears Africa 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 all his life
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 Knivate in Company B, of 41th Regiment
of - Za Volunteers,''s Brigade; that whilst engaged
in such military service in the State of Ja, , on the 3/21 day
of \(\frac{1}{2}\) 1864, he was wounded, injured or diseased as follows;
Mas shot with a minnie base through
the left Arm elbow joyit froeturing joing
end rendering the arm substantiaces
aich essentially risclers,
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 county been allowed a pension of dollars, for the year 1896. Sworn to and subscribed before me, this, the land and the day of left left left left left left left lef
STATE OF GEORGIA,
Ne Kall, County.
I, Magsdalein a Ordinary of said County,
do certify that I am well acquainted with A. Reeves the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this 12 Th
day of
(inj 01_1) is 1 1000.
Affir Just Thille agodele.
X 1.00

No. 1830

STATE OF GEORGIA, EXECUTIVE DEPARTMENT.

Atlanta, Ga, April 8 1889.

Mr. A Reenew of A Kalk

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 aim Scialelae
He is entitled to receive the sum of High & o. o.

for such disability, the same being the allowance due for the year ending October 24, 1889.

The Treasurer will pay the same and hold his receipt on this voucher, and return same to

Executive Department for warrant.

By the Governor.

An IX Harrer Con Executive DEPARTMENT

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

DeKall

Maimed Soldiers!

Voucher No. 1/59

Amount \$ 50

COMPTROLLER-GENERAL

Audited

Paid wo Reever

For arm disabled.

Sely 14 1890

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

applicant

Reeves, a. Ji

1891.

Maimed Soldiers.

Voucher No. 1156

1891.

COMPTROLLER-GENERAL.

Amount \$ 50

Paid to A Recres

Stoley 11 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-GLERK.

12

Ch Mican (

Audited.

WHEN AND WHERE BORN?

ENLISTED WHEN AND WIERE?

RANK.

Frivate Co. B, 41st. Regt. Georgia Vols. COMPANY AND REGIMENT? Srovall's Brigade.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Jonesboro, Ga. August 31st. 1864. Bo e of left arm shot into above elbow, arm useless.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERL SUPRENDERED?

IF NOT TRESENT AT SURRENDER, WHERE WELL YOU?

DIED, WHEN AND WALRE?

BURIED.

WITNESSES. J.E. White, W.M. Bowden and W.B. Staples. No data.

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Mr. A. Reever

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

Elm disables

He is entitled to receive the sum of Hefly 700

Dollars

for such disability, the same being the allowance due for the year ending October 24, 18GO

The Treasurer will pay the same and the his receipt on this voucher, and return same to Executive Department for warrent of

GOVERNOR.

By the Governor,

du A Hamsin

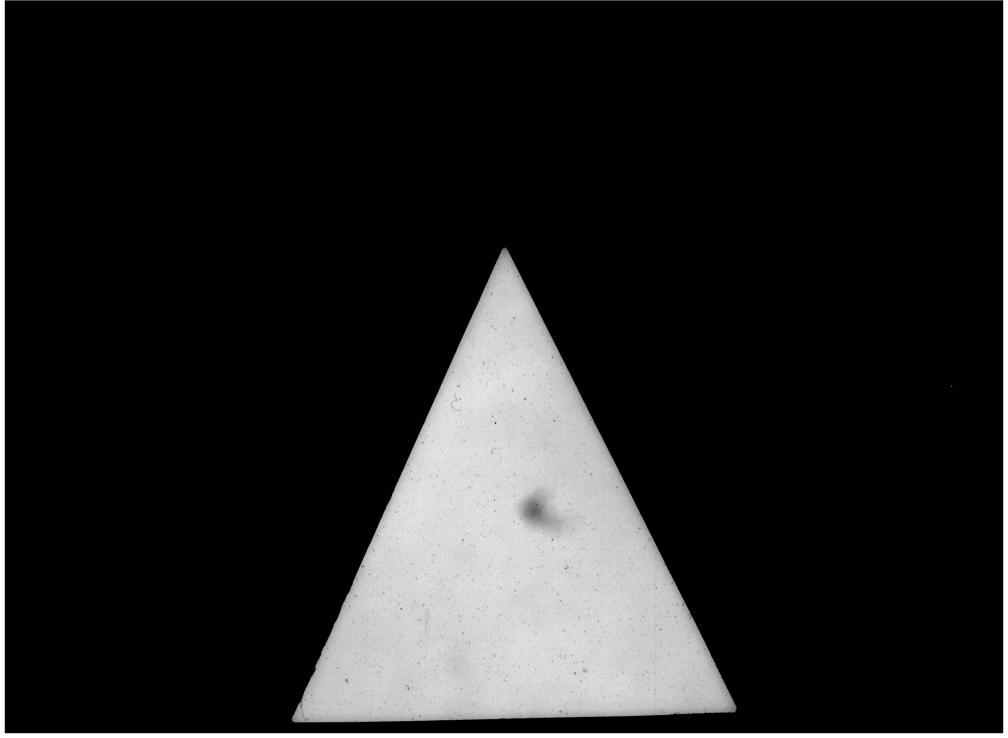
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Dollars,

per above voucher, this

1891. No. 1056 STATE OF GEORGIA, EXECUTIVE DEPARTMENT. 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 $\stackrel{\circ}{\text{approved}}$ Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for ann die He is entitled to receive the sum of Refly tor Dollars for such disability, the same being the allowance due for the year ending October 24, 1891. The Treasurer will pay the same and hold his receipt on this voucher and return same to Executive Department for warrant. 150 RECEIVED OF R. U. HARDEMAN, Treasurer of the said Dollars, 1891.



WIDOW'S INDIGENT PENSION. 1903. Name Martha & Rievs County DeKall Widow of Jac. N. Russ Approved JOHN W. LINDSEY, Commissioner of Pensions. WARRANT HANDED TO 1903.

Geo. W, Harrison, State Printer, Atlanta

OF ATTORNEY

•	STATE OF GEORGIA	County.		STATE OF GEORGIA, County.
		hereby authorize		avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
	4		asint for the number allowed and that he	passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
٠, ,	or	County, to receive and re	by his cheek or resistand well	Marko & Relu 18 Skall County and Post office)
·	remit the same to me at. Witness my hand this	day of	by his check or registered mail.	2. How long and since when have you been a resident of this State?
	Executed In presence of	$1 + \sqrt{1 + 1}$		3. When and where were you born? nuwlon Cornet,
		Ordinary,	L 8.	4. When and where was your husband, born—state his full name, and when were you and he married?
	SRAL }	County.		(Attach copy marriage license in every case) 114 17839. Southe anoline Land. M. Hunz Jan 272/866. Bekan Co
*	()			6. How long did your husband serve in said Company and Regiment? 4 years
			•	7. When and where did your husband's Company and Regiment surrender and was discharged?
				8. Was your husband present at the time and place when his Company and Regiment surrendered?
				9. If not with his command at surrender, state clearly and specifically where he was, when he left com-
				mand, for what cause, and by what authority?
				Ellering the control of the control
				10. When and where did your husband dies Fully 8" 1502 Wekalt Carney
				11. Which of the following grounds do you base your application for Penaion, viz.: First-Age and
# ·			AND OF THE PROPERTY OF THE PROPERTY OF THE PARTY OF THE P	Poverty; Second-Infirmity and Poverty, or Third-Blindness and Poverty? Age Poverty Infirmity
	7 22 5			12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your eight? about 5 years two yours of your of the third, state whether you are totally blind, and when and where you lost your eight? about 5 years two your of the third. The form of the borner of your brindle that the brindle that the borner of your brindle that the brindle that t
eni .	1 33.4			13. What has been your occupation since your husband's death? have have noce no.
100	121 15			14. How much can you earn gross, by your own exertion or labor? Multi-ing. 15. What property, real or personal, or income do you have or possess, and its gross vade?
				16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, and what di-position, if any, by sale or gift, have you made of the same?
	1 3 C 3 (3)			17. In what counties did you reside in 1899, 1900, 1901 and 1902, and what property did you return for taxation? 18 10 2 10 2 10 2 10 2 10 2 10 2 10 2 10
				18. How have you been supported fince desth of husband, and especially for 1899, 1900, 1901 and 1902?
Name of the last	CHARLES AND THE SE	The second second	oil II I mill	19. How much did you support cost for each of those years, and how much did you contribute by your own labor or income? # 15-00 Williams
ka/s	3	B 8	1900 19	20. What was your employment during 1899, 1900, 1901 and 1902, how much did you receive for each year? had no lumilaryment untwing
2 3	200	. 3 3	SY.	21. Have you a family? /If/so, who composes such family? Give their means of support? / Have they
12/4	5 5	W 6316	DSS I DE LEGIS	any lands or other property? I have no having I live with My chilo
3	M H	25 6 10 33 10 10 10 10 10 10 10 10 10 10 10 10 10	LINDS unferione HANDER HANDER	22. Have you ever made application for pension before? Par Max 23. How many applications have you made for a Pension, and under what class? Navice
13	1 2 -	01345		23. How many applications have you made for a Pension, and under what class? Monte
22	WID	19	JOHN W. Om WARRANT WARRANT	Sworn to and subscribed before me this # Martha & Reaves day of Life To Luws or Ordinary,
9 3	1 3	nry o	5	of Ogklath County.
600	, 5	N Son	3	

SIATE OF GEORGIA,	
Dekalt County.	27. How was he supported for 1899, 1900, 1901 and 1902?
L.L. Hudgin Z B newton of good State and County, having been presented as a witness in support of the Application of Mrs. ME Roches	28. How much did applicant contribute to her support for last two years? Withiles at wellers
been presented as a witness in support of the Application of Mrs	29. Give a full and complete statement of applicant's physical condition?
for a Pension under the Act of 1900, and after being duly sworn true answers to make to the	
1. What is your name and where do you reside? J. W. I. W. J. W. W. J. W. J. W. J. W. J. W. J. W. W. J. W. W. J. W. W. J. W. W. J. W. W. J.	the went feath or entitles
Both in Dethall Go	for more than 2 year not oble to work
2. Are you acquainted with the applicant, Mrs. M. & Cleeves	30. What interest have you in the recovery of this pension by the applicant? World
If so, how long have you known her?	7
3. Where does she reside, and how long and since when has she been a resident of this State?	Sworn to and subscribed before me this
4. When and where was she born?	Jas Ryeory Ordinary, TB Scurin
5. Were you ever acquainted with her husband?	LOESCOLL County. Witnesses.
6. Where did she reside in 1861?	
7. When and to whom was he married?	AFFIDAVITS OF PHYSICIANS.
8. When and where was he born?	STATE OF GEORGIA,
9. How long have you known him? 260 delay - 1861	
10. When and where did Carrie Multip which enlist in the war between -	(1-7-2)
the States, and in what Company and Regiment did be enlist, and how do you know this? Co A 38" Yu	Personally before me comes 1 4 Januar and
was a member of 87 12 by Reguent and was acquarted within	N. Trouston, both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs.
11. Were you a member of the same Company and Regiment? Hungins Was a member of coll	Martha & Reves , applicant for a Pension under Act of 1900, and after
and Newton belinged to co to	such personal examination say that her physical condition is this Clarage and no man of
12. How long did he perform regular military duty? Was Captund 7" April 1865	making awhart onacture of left thigh which rehades
The long with the property of	her a criffle, having to use a crutch to walls
13. When and where was his Company and Regiment surrendered and discharged from service?	Totally disables her, o
In April 1865 - Appointage Court House Virginia	- Control of the Cont
14. Were you with the Command when't surrendered?	and we have no interest in said pension if allowed.
15. Was Jet . Rewes the husband of applicant present?	Sworn to apti subscribed before me this
he was captured you spril 2 days freewords in in Summer	day of September 190.3 \ 100 (1 Farmer M D
	Jas. R. Gurge Ordinary, 1910
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
17. When and where did he leave his command? Men Fauntille Taymus	VERALL County. County.
For what cause? Misuner of mar	ORDINARY'S CERTIFICATE.
By whose authority he left?	
How do you know all this? (State fully and clearly.) I mus mile in Continued.	STATE OF GEORGIA,
There was to few of us and being premary aggrested	destall county.
I could not ob mestally	I. Jos R Gury Ordinary, in and for said County, hereby certify
18. When and where did. J. Heews die?	that the applicant, Mrs. Wortha & Ruus regides in said County,
near worwill Detaill county	and has been a bona fide resident of this State since the day of day of
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?	1839, and that the witnesses, Mr. La Nadgins + Z B newton
Donaville about 40 zens	are of trustworthy character, and that their statements
20. Do you of your wan knowledge know that applicant is the la ful widow of	are entitled to full faith and credit. I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same
21. Has/she rengined unmarried since/her soldier husband's death, and is now his widow?	ungs signed and subscribed
	I further certify that the tax digest of County shows that applicant
22. What property reflects or income, has the applicant, if any, and how do you know this of your own	returned for taxation in her own name in 1899 LONL dollars worth
knowledge? She has not. I have more sure any or ix	of property, and in 1900 dollars worth of property,
	in 1901dollars worth of property, and in 1902
23. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what dispo-	dollars worth of property.
sition did she make of it? We do not Know	Witness my hand and official seal this 7 day of Sufer 1903
	(SEAL.) Jan R Gray Ordinary.
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to	Next Mie County
whom? World	Notes.—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions saked of you
	and the evidence you shall give will be the whole truth; So help you God."
25. Yhat is applicant's physical condition and her chances and ability to earn a support?	3. All affidavits must be made before Ordinary.
Thylical conditions, vry land	widows. Those married since 9th April 1865, not entitled.
She Cannot Euppy her bell	Notes.—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God. 2. Additional safidavits may be attached, it blank spaces are insufficient. 3. All affidavits must be made before Ordinary. 4. Only widows who were the wires of the dead husbands while they were soldiers need apply—and are now widows. Those married since 9th April. 1895, not entitled. 5

on course uppers and o. Attach certined copy marriage nicense in every case, or show why it cannot be obtained. 5

De Kall Bounty No. 443 Application for Allowance Genderability mind,
Applicant for I. Richardson
County De Kall Amount 25 Date of Warran Dec 30/8 Entered on Record,

Ale 3, 188'

Colff H.

Secretary Executive Department.

pplication for Allowance

STATE OF	GEORGIA,	1
Do Kall	. County	5

LLY appears James , Richards on of Schall country
orgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said
has been such since the first day of August 18. ; that h
he military service of the Confederate States (or of the State of
war between the States, and served as a Portuale in Company & , o
Regiment of Leavy Volunteers, Larlow 's Brigade; that
ged in such military service, at the battle of first Management in
of Leo gene, on the 21 day of Inter 1867, he wa
follows:

Her was wounded on the iner surfus of to This to the laceration of the muscles were extension Sicalicist contraction in left stigh is in a to render him principles incompeled to lift his leg in wall is or laborer, without pain. The disabling condition is permanent and is liable to grow works to he advances in like

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and makes application for the allowance to which he is entitled thereunder.

Sworn to and subscribed before me, this the

day of direction 1887 John Mullitarily Wiggs

1 cold !

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA.

County.

PERSONALLY came before me well formers of the county of tulture

Sworn to and subscribed before me, this 3 1 day of 101

State of Georgia, who, being duly sworn, says that he was

a commissioned officer in Company of of Regiment of Collection Volunteers, and that deponent knows were street that the received the wounds (or contracted the disease) in the politary service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said 1/20 1 Mediano, as stated by him in said affidavit. Deponent further states that said fire the fire for the fire is a bona fide citizen of this State, and resides in

A Power

STATE OF GEORGIA,	
Count Personally came.	y.)
citizens of	county, in said State,
who, being duly sworn, say that they are acqua	inted with
and	know that he received the wounds (or contracted the
disease) in the military service, as stated by	y him in the foregoing affidavit; that said wounds (or
disease) permanently disables applicant, as st	ated by him; that said applicant is a bosta fide citizen
of this State, and resides in	County, and we are well satisfied that all the state-
ments in his attidavit are true.	
Sworn to and subscribed before me, this	0 0 0
day of 188-	0.
	0
0.	
STATE OF GEORGIA,	
Lehalle County.	
Personally comes before me 2000 71	Mour ya nor ordhand of said county,
L. Hamieton and	C. C. Summer, both known to
	to, being severally sworn, say on oath that they have
carefully examined of as. L. Richard	
3. 18. P. C. P	ounded in both theyes by a shell,
	I him, the muscles are so constructed the
이 경기가 되었다. 이 사람이 하고 있다면 하면 있다면 하고 있는 것이 되었다. 그 사람이 되었다면 하는 것이 되었다면 하는데 하는데 없다면	사용 보다 보는 보는 경기에 보고 있는 나는 집에 모르는 하는 것이 없는 것이 없다.
	oil products pain and disable fine
from profesionery for seeing at the	of a or various, of any Hind without pain
Sworn to and subscribed before me, this	(Harring To Med.
47. day of Ceceiviber 1887	has L. Oummey mill
you M. Maleurdy 3:3744	
ORDI	NARY. 0

NOTE. The physicians will state fully the extent of the wound and the disability resulting therefrom

STATE OF GEORGIA,
I, John B Steen and Ordinary of said county.
do certify that I am well acquainted with James & Richardson the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said
affidavit are true, and I know he is the individual he represents himself to be, and that he resides in
this county. I also certify that the foregoing witnesses are persons of respectability, and that their
statements are worthy of full credit and belief.
I further certify that John W Mcbardy before whom the foregoing
affidavits were made and power of attorney was signed, is a Notary Republic ris
of said county, and that the said affidavits and signatures thereto are genuine.
Given under my official signature and seal, this John day of Oger 1884
John B Slewood County.
Ordinary Dekalb County.
10
POWER OF ATTORNEY.
STATE OF GEORGIA,
County.)
Know all men by these presents, That I
of
county, in said State, do hereby appoint
of my true and lawful attorney in fact, for
me and in my name to receive and receipt for whatever amount of money I may be entitled to from the
State of Georgia by reason of the injury received as aforesaid in the military service of the Confed-
erate States (or of this State), as stated in the foregoing affidavit. Hereby authorizing any 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 188
[LS]

Executed in the presence of us

STATE OF GEORGIA,
Dellall County S
PERSONALLY appears Lander & Kichardson of De Kall county,
State of Georgia, who, being duly sworn, says on oath that he is a bong fide citizen and resi-
dent of said State, and has been such continuously since the day of
1834; that he enlisted in the military service of the Confederate
States (or of the State of -) during the war between the States; and
served as a Private Bartonin Company C, of 7" th Regiment of Storgia Volunteers 2" S Brigade; that whilst engaged
in such military service, at the battle of Manassa in the
State of Wirginia, on the 2/" day of fully 186/ he was
wounded as follows: By the exploration of a bunt
Shell breaking both thinks rendering
left leg substantially and essentially
hiseless.
The contract of the second of

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the Act amendatory thereof, approved Dec. 24, 1888, and makes application for the allowance to which he is entitled for the year ending Oct. 26, 1889

Sworn to and subscribed before me, this the 13" day of Jel

STATE OF GEORGIA, Le Kala

PERSONALLY comes before me Magnolale Ordinary of said county, I Hyreen On 2 and I & Mayon , both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined James & Richardson and after such examination say that the applicant has been injured as follows: Jun shot would feathering half thigh Bones, which

transially of the feet of where the property of the said former & dichardion has rendered by the first on the

Sworn to and subscribed before me, this) It green lu &.

of the wound, and then give facts to show the extent of the

STATE OF GEORGIA, Quenty. Ordinary of said county, do certify that I am well acquainted with Las & Richardson the applicant in the foregoing affidavit, and an well satisfied that the statements made by him in his said affidavit are true, and that he is disabled to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit: are persons of respectability, and that their statements are worthy of full credit and belief. I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said county, and that the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this 13" day of Hit " 1889 MM Regardate

Ordinary Re-Kalt, County. POWER OF ATTORNEY. STATE OF GEORGIA. County. KNOW ALL MEN BY THESE PRESENTS, That I, 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, 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 (L.S.) Executed in the presence of us: DIRECTION : Send money to me as follows, by

County, Georgia.

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 fact showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

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

dered substantially and essentially useless.

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

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

5. If application is for loss of fingers or toes the proofs must be made to show the

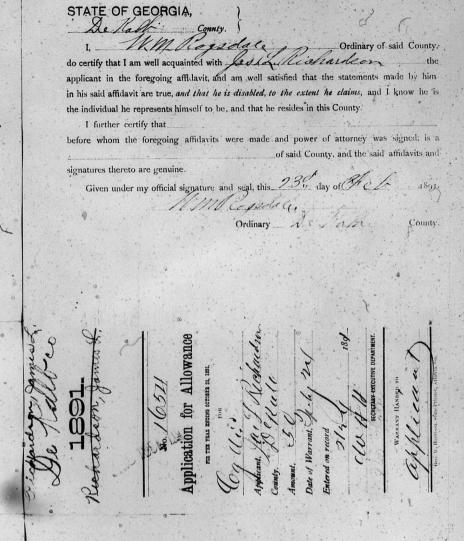
number, and points where amputated.

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

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

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

STATE OF GEORGIA,
Net / County.
do certify that I am well acquainted with he Kichardson the
do certify that I am well acquainted with & Lichardson the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and that he is disabled, to the extent he claims, and I know
he is the individual he represents himself to be, and that he resides in this county.
I further certify that before
whom the foregoing affidavits were made and power of attorney was signed, is a
of said county, and the said affidavits and
signatures thereto are genuine.
Given under my official signature and seal, this day of day of
Ordinary De Valle, County.
Ordinary De Vall. County.



For Applicants Heretofore Allowed Pensions.	ror applicants neretolore allowed Pensions.
STATE OF GEORGIA,	STATE OF GEORGIA,
	De Ha M. County.
De Hall gounty	PERSONALLY appears Jas L. Michaelas Kapi A. Michael
PERSONALLY appears & Accelerates of De Jall county, State of Georgia, who, being duly sworm says on oath that he is a bone fide citizen and	County, State of Georgia who, being duly sworn, says on oath that he is a boya fide citizen and
resident of said State, and has been such continually since the day of	resident of said State, and has resided therein continuously ever since the
1832; that he enlisted in the military service of the Con-	day of 1832; that he enlisted in the military service of the Con-
federate States (or of the State of La) during the war between the	federate States (or of the State of) during the war between the
States, and served as a water in Company 6, of 7 th Regiment	States, and served as a Source in Company E, of the Regiment
of Volunteers Sartow 's Brigade; that whilst engaged	of Volunteers Seaz Luw's Brigade; that whilst engaged in such military service at the battle of State in the State
in such military service, at the battle of / Lanasa in the State	of 24, on the Gilly day of 2 186/, he was
of Ta on the 21 day of July 1861, he was wounded as follows: &x plosion of but shell which	wounded as follows: The selection the explosion
broke the left thingh and coneing such	of bunk shell in both thighe
injuries that afficient is unable to	Swhich permaneetly disples
follow his daily abocation, necesitating	applant rendering this less
the use of Stick, injuries being!	es dentially
sermament.	- and strostantially us less,
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Deponent desires to participate in the benefits of the Act, approved October 34 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	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
entitled for the year ending October 26, 1890. I have heretofore been allowed a pension	dollars, for
Sworn to my subscribed before me, this the	Sworth to and subscribed before me, this, the fact of the shows the
13 n day of tab 1890 mark	2-31 day of tel 1891. Menses
M. Magsdale, Ordinary,	- Mille Cogsdale Ordings
Note: State fully nature of would or character of disease which causes the disability, and explain particularly the extent of the disability.	Nors State failly 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.	4. 1-24 1891 DOWED OF ATTORNEY
	STATE OF GEORGIA. POWER OF ATTORNEY. Jav Little Charles
STATE OF GEORGIA	Craime,
County.	Know all Men by these Presents, That I.
KNOW ALL MEN BY THESE PRESENTS, That I,	ofCounty, State of Georgia, do hereby appoint
county, in said State, do hereby appoint	minimanian para a sa
my true and lawful attorney in fact, for	omy 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
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.	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; hereby authorizing my said attorney to receipt in my name for any Warrant that may be	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 Gover-
issued by the Governor, or for any sum of money which may be coming to 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
aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	day of1891.
day of 0 189	[L. S.]
[L. S.]	Executed in the presence of us:
Executed in the presence of us:	
and the second s	DIRECTION.
Send money to me as follows, by	Send money to me as follows, by
to P.O.	to P. O.
County Georgia	County, Georgia.

... Ordinary of said county, do certify that I am well acquainted with & Leilla , lo 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 I day of Min s ah County. SOLDIER'S PENSION W. H. HARRISON

STATE OF GEORGIA.

my true and lawful attorney in fact, for me what we 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 atterney to receive in my same for any sWarrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. INTEREST WHEREOF, I have hereunto set my hand and seal, this dividual he represents hithself to be, and that he resides it this County. said affidavit are true, and that he is disabled, to the extent he claims, and I know he is [In 2] appliguschted of the brescatelogie and an well salisticd that the statements made by him in do certify that I am well acquainted with, Send money to me as follows, by STATE OF GEORGIA. County, Georgia. wounded as follows 's Brigade ; that wla States, and served as a. that he enlisted in the military service of the resident of said State, and has resided therein continuously ever since the County, State of Georgia, who, being duly sworn, says on oath that he is a bons fide cuizen an STATE OF GEORGIA, For Applicants Heretofore Allowed Pensions.

POWER OF ATTORNEY

County, State of Georgia, do hereby appoint

STATE OF GEORGIA.

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

STATE OF GEORGIA,	
The / Lact/ County.)	
PERSONALLY Appears Ville Cicturition	
County, State of Georgia, who, being duly sworn, says	
on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously	
since the day of 2005 1832; that he enlisted	
in the military service of the Confederate States (or of the State of	
during the war between the States, and served as a Price in Company E,	100
of 7 th Regiment of 200 gia Volunteers Bastow 's	
Brigade; that whilst engaged in such military service at the pattle of 13 Min massay	
in the State of 211 on the 2116	
186/, he was wounded as follows: Built	
- will en horded - true turing the	
stone of lest les anticon de addered	
the less intoler control se ibdired	
con many many	
	L
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 his hid Log	
Sworn to and subscribed before me this the	1100
H day of flitte of 1892.	
- Aldric Ordinary	
Nore.—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 the state of th	
County, in said State, do hereby appoint	
of my true and lawful attorney in fact, for	
me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal this	
day of1892.	
(L. S.)	
Executed in the presence of us:	*
DIRECTION.	
Send money to me as follows, by	
P. O.	

County, Georgia.

LOL White use describing allowed STATE OF GEORGIA. 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 18/2 that he enlisted in the military service of the Con-.) during the war between the States, and served as a Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of dollars, for... Sworn to and subscribed before me, this, the ad or character of disease which causes the disability, and enplain particularly the extent of the STATE OF GEORGIA, 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 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 the Controllisto States (or or this State). of said County, and the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this ound, State of Georgie, do hereby ap. g.

POWER OF ATTORNEY

POWER OF ATTORNEY.

DITTE OF GEORGIA,	STATE	OF)	GEO	RGIA,
-------------------	-------	-----	-----	-------

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
ane and in my name, to receive and receipt for whatever a State of Georgia by reason of an injury received as afore States (or of this State), as stated in the foregoing ney to receipt in my name for any Warrant that may be is which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set m	said in the military service of the Confederate affidavit; hereby authorizing my said Attor- sened by the Governor, or for any sum of money
day of1894.	
Executed in the presence of us	[L, s.]
DIRECTION	ONS
Send money to me as follows, by	SNS.
to	P. O
County, Georgi	ia.
1 .	The second section of the second section secti
	894.

WARRANT HANDELLTO

County De Kalb. Distility Leg Workerd. Soldier's Pensio (For Those Aiready Entolled.) Secretary Executive De W. H. HARRISON, 1894. No. 87 9

POWER OF ATTORNEY

STATE OF GEORGIA.	
\	
County.)	
KNOW ALL MEN BY THESE PRESENTS, That	I,
of	
County, State of Georgia, do hereby appoint.	
생물하다 중 이 전에 들어보는 사람이 얼마나 나를 잃어지는 것이 때문에 되었다면 이 경기를 받는 것이 없다고 있다.	
of	my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever ar	nount of money I may be entitled to from the
State of Georgia by reason of an injury received as aforesa	id 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 Warrrant 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 m	y hand and seal, this
day of1895.	
day of1895.	[n. s.]
Executed in presence of us	
	State of the state

DIRECTIONS. Send money to me as follows, by County, Georgia.

SOLDIER'S PENSION. (For Those Aiready Enrolled.) 1895. No. 260

For Applicants Heretofore Allowed Pensions.

- V II	
STATE OF GEORGIA.	
De rich County.	
15.7	1. 9. 1/1/2
PERSONALLY appears L. Richa	rason of we call
County, State of Georgia, who, being duly	sworn, says on oath that he is a bond flue citizen
and resident of said State, and has resided	therein continuously ever since the
	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) during the war between the in Company , of th Regiment
Volunteers Mas	later 's Brigade; that whilst engaged in
such military service at the battle of	Manada of in the State
of la , on the 21	day of feel 1 1861, he was
of la , on the 21 wounded as follows: Horze de g	by howing
han hattell treate	ing and fixe uning
Are le st think sen	der zero alle lez
wieber Tanttalle	and Essentiace
circledan de	
Deponent desires to participate in the	benefits of the Act, approved October 24th, 1887,
and the acts amendatory thereof, and ma	kes application for the allowance to which he is
entitled for the year ending October 26, 1	894. I have heretofore been allowed a pension of
History	lollars, for the year 1893,
Sworn to and subscribed before me, t	
· 12 th day of March	1894. V 22/45/
1-19 Conduciord	
Note-State fully the nature of wound or character of of the disability, resulting from the wound or disease.	disease which causes the disability, and explain particularly the extent
STATE OF GEORGIA,	
Se Kall County.	
1. Jul Aagac	Ca Ce. Ordinary of said County.
1, 2, V// Cargarated with	h for Cochardson the
do certify that I am wen acquainted with	am well satisfied that the statements made by him
applicant in the foregoing amount, and	he is the individual he represents himself to be
H '무리가 '오는 1985 이 경우는 네 이 프라마 프랑기를 가장 보았다. [2015년 12] 이 경우는 전투 12 (2015년 12) (2015년 12) (2015년 12) (2015년 12)	
and that he resides in this County.	official signature and seal, this 15 the
day of 12140	
day of // dad	1894.
Affix your your here.	Mass dale
Liere.	
	Ordinary De Rall County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, Detall County. Personally appears La Richardson of Le 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 1832; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Wirale in Company £, of 7 th Regiment of Volunteers, Partow 's Brigade; that whilst engaged in such military service at the battle of managed in the State of a shelf of the follows: By the Exployion of a shelf outling that more exploration of a shelf outling that more exploration of a shelf of Wienking the bone, sendering the London Sendering the Lone of Sendering the Sendering the Lone of Sendering the Sendering the Lone of Sendering the Send
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 dollars, for the year 1895. Sworn to and subscribed before me, this, the day of day of dollars, for the year 1895. 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, County. I, Ordinary of said County, do certify that I am well acquainted with La Rechardson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.
Antis gour grander. Ordinary Rella 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 hereunto set my hand and seal, this Executed in presence of us SOLDIER'S PENSION

POWER OF ATTORNEY

to receive and receipt for the pension paid hereon and request that he remit same by at IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1898.	of to receive and receipt for the pension paid hereon and request that he remit sam by at IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of Executed in presence of	Ι,		ounty.			
to receive and receipt for the pension paid hereon and request that he remit same by the s	to receive and receipt for the pension paid hereon and request that he remit sam by IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of	+ j				orize	
at in WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1898.	at						
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of Executed in presence of	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of	to receive and	receipt for th	he pension pai	d hereon and	request that	he remit sam
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of Executed in presence of 888 15	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of Executed in presence of			· · · · · · · · · · · · · · · · · · ·	.by		
Executed in presence of	day of 1898. [L. Executed in presence of	at					
Executed in presence of	day of 1898. [L. Executed in presence of 88 5	IN WITH	NESS WHER	EOF, I have 1	hereunto set m	y hand and sea	d, this
Executed in presence of	Executed in presence of						
Executed in presence of	Executed in presence of						· .
State State	1	Exec	uted in present	ce of			
ready Enrolled.) 5556 ALID ALID PENSION ORNINGON, Commissioner of Prasion. ANDED TO	SOF A OCT. 18T. 2 556 VALID P'S PENSION R'S PENSION R'S PENSION R'S PENSION SOF L'S ISBB. ANT HANDED TO ANT HANDED TO ALL ANT HANDED TO ALL ANT HANDED TO ALL ANT HANDED TO ALL ALL ALL ALL ALL ALL ALL A		acca in present				
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ALID ALID ALID ALID ALID ALID ALID OBS. OBS. OHNSON, Calb Commissions of Pension. ANDED TO	86 Already Enrolled.) 2556 VALID RYS PENSION. SPOR. RRAD SOFE STAND SOFE SOFE SOFE SOFE SOFE SOFE SOFE SOFE						
ALID ALID ALID ALID ALID ALID ALID ALID	86 Already Enrolled.) 2556 VALID RYS PENSION. SPOR. RRAD SOFE SOFE Commissioner of Pranton. Commissioner of Pranton. ANT HANDED TO ANT HANDED TO ANT HANDED TO ANT HANDED TO						
Feady Enrolled.) 5526 ALID ALID OB. OB. OHNSON, Commissioner of Pension. ANDED TO	PYALID PYALID PYALID PYS PENSION PYS PENSION PYS PENSION PRICHARASA PRICHA						
Feady Enrolled.) 5556 ALLID ALLID ALLID OBS. OBS. OHNSON, Commissioner of Prasticus. ANDED TO ANDED TO	RY S PENSION. PYALID RYS PENSION. RED DE. CRUDANDSON. CRUD JOHNSON. CRUD JOHNSON. CANTHANDED TO AMT HANDED TO AMT HANDED TO AMT AMDED TO THE COMMISSION OF PRINCIPLE. COMMISSION OF PRINCIPLE. COMMISSION OF PRINCIPLE. CANTHANDED TO AMALL AMALL CANTHANDED TO AMALL CANTHANDED TO AMALL COMMISSION OF PRINCIPLE. C				1		
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ALID ALID ALID PENSION. SST6 ALID ALID PENSION. ALID OB. 104NSON, Commissioner of Pension. ANDED TO	RYALID RYS PENSION. PRICHANDED TO COMMISSIONSON, COMMISSION						
ALID ALID ALID ALID BENSIO OBS. CAND TOHNSON, Commissions of France AND EXTERMAND TOHNSON, Commissions of France Commissions of France The Commissions of France Commissions of	86 Already Enrolled.) 2556 VALID RYS PENSIO RYS PENSIO RYS PENSIO SEDS. RYLICHARDAS RED JOHNSON, Commissioner of Fensio ANT HANDED TO ALA			.0	0		
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Feady En 1557 (1987) (1	RYS PE RYS PE RY	ر من ا	Tol.	Som		1898.	
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E A N I O E A N O O E A	B B N S N B B R	ady Enrolled.)	PENSION.	DB.	a Jb	Perm	(MDED TO
LE Z H Z H Z H Z Z		For Those Aiready Enrolled.) No. 2556	AVALID ER'S PENSION.	1898.	DeKalb Leg	Pen	WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
dellaction County.
personally appears & Cichardion of Le Kell
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 4269 1832; 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 113 interest in Company E, of 7 th Regiment
of La Volunteers, Vieder 's Brigade; that whilst engaged
in such military service in the State of 1, on the 21 day
of July 1861, he was wounded, injured or diseased as follows:
was commented by me in mostor of a
- Mul, in John Might so statusing
The bone of the le for thingh than in
contest the leg substantially and
recuntially meeters
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 10 county been allowed a pension of Frighty
dollars, for the year 1890
Sworn to and subscribed before me, this, the
17th day of March 1896. \ mars
1 Minke gedace, man
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.
of the disability, resulting from the wound or disease.
STATE OF SECROLA
STATE OF GEORGIA,
Se Nath County.
I, WM Agsdall of Ordinary of said County,
do certify that I am well acquainted with I Daichardson the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this /704
day of_ March_ 1896.
10.00
Sout South

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Deralle Gounty)
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citize and resident of said State, and has resided therein continuously ever since the land day of land 1832; that he enlisted in the military service of the Con
federate States (or of the State of Learna) during the war between the
States, and served as a Sivate in Company , of the Regimer of La Volunteers, Fields are 's Brigade; that whilst engage in such military service in the State of land, on the 2/ day of Lieby 186/, he was wounded, injured or diseased as follows:
by the explosion of a sheet in both
thigh the right thigh being broken
The leg substantially underseitide
neelies
county been allowed an invalid pension Sworn to and subscribed before me, this, the Bh day of 1898 POST-OFFICE Nork-State fully the nature of wound or character of disease which causes the disability, and explain particularly the ext
of the disability resulting from the wound or disease. STATE OF GEORGIA,
Select County.) I. Will Resolution of Said County.
do certify that I am well acquainted with L. Lie Mardson t applicant in the foregoing affidavit, and am well satisfied that the statements made by his
in his said affidavit are true, and I know he is the individual he represents himself to
and that he resides in this County.
Given under my official signature and seal, this /8/4 day of 1898.
JABA Juli Magsolace,
Ordinary A. Laio Coun

POWER OF ATTORNEY. STATE OF GEORGIA, De Kalf, COUN alf COUNTY.) to receive and receipt for the pension allowed and Judge City Court RICHARD JOHNSON, 1897.

For Use of Applicants Who have Not Heretofore Drawn.

	TATE OF GEORGIA,
****	Detall COUNTY.
	PERSONALLY appears J. Dicharlian of Die Kalh
Ço	unty, State of Georgia, who being duly sworn says on oath that he was born on the
da	y of Ang 1832, that he is a bona fide citizen and resident of Georgia, and
has	s been continuously since the 121 day of Ary 1832,
	at he enlisted in the military service of the Confederate States (or the State of
) during the war between the States, and served as a
	Private in Company E of 7 th Regiment
of.	Volunteers Andersono Brigade; that whilst engaged in
suc	ch military service, and in line of duty in the State of, on the
	2/ M day of July 186/, he was disabled or wounded as follows:
1	as wounded by the explosion of a
-	shell between the thighs. Breaking
=	The bone of the left thigh and tearing
_	The musale and Jeesh from the
	Thigh. Rendering the leg for locomor
_	and north substantiacy and
	essentially necless
	6.0
	THE STATE OF THE S
	X.I.
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•	
	Deponent desires to participate in the benefits of the Act approved October 24th, 1887, and the Acts
am	Deponent desires to participate in the benefits of the Act approved October 24th, 1887, and the Acts endatory thereof, and makes application for the pension to which he is entitled for the year thereunder,
enc	endatory thereof, and makes application for the pension to which he is entitled for the year thereunder,
enc	endatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ling October 26th, 1897.
end	endatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ling October 26th, 1897. Sworn to and subscribed before me, this the
enc	endatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ling October 26th, 1897. Sworn to and subscribed before me, this the Market Charles Market 1897. May of Market 1897.

Affidavit for Three Witnesses.

STATE OF GEORGIA, County.
PERSONALLY appears before me, the undersigned, Ordinary in and for said County,
and Ono C. Chewning personally known to me to be trustworthy citizens,
each of whom, being duly sworn according to law, severally say, under oath, that they are personally well acquainted with
whose application is herewith presented for a pension, that he has resided in this State continuously since
1 - 0 -
personal knowledge he was injured by the service as follows: (give full statement, and tell in your own
language when and how the injury happened, and how badly applicant is disabled from work. If he does any
the nas wound of by The explosion of
as has wounded by the explosion of
Sheel between the thigh tearing the bone
Lette left thigh which would so
Lerresuler and reader the
waid leg substantisely and
rescriticacey weekers, applican is
now unable to do any brind of
labor for a support
Silver Control of the
WE personally know above stated facts. We were with him in the army, and have known him eyer
since. He was honorably discharged or retired from the service day
of OW 1864. Applicant is permanently disabled as stated, and has been so
to our certain knowledge ever since 186/ We have no interest in the recovery of a pension by him.
Sworn to and subscribed before me this
o langeton
3 d day of March 1897. Raby Ti Davis.
Milagidace & la Checonine
Ordinary. J. C. Checon Mily

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

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

3.—All blank spaces must be filled when signed.

4.—Three witnesses are required.

800	DUA	AUTUU	NU'	AUUIII	AVIT
		(SICIA	ILD.	AFFIU	AVII.

State of degrain, Se Kalt County.	6
Mrch D. A.O.	110
PERSONALLY comes before me W. M. oth godal Ordinary of Officery of Amery M. and Areph H. Green M.D., is	said County,
me as reputable physicians of said County, who being severally sworn, say on oath, that they	have carefully
examined I. X. Ritch aschen and after such personal exa	mination, say
that the present condition of applicant is as follows: Directled by mounted Brown while brakers the left though and distanting presents as the formal of court of court of court of the mounted with distanting to graph of graph of my miles are graphed.	when af at
And a general beach down of his five fil health of the condition of later a healt sender him make	to perfe
and that the condition is permanent,	
We further say that said condition arises from the following facts:	tated
	p.
	1 4 2 3 1
	1 1 1
We have treated applicant professionally for five years, and his condi	tion, as above
Sworn to and subscribed before me this the Aday of March 1897. ORDINARY. Note 1.—The physicians will state fully the extent of the wound, and then give facts to show the extent resulting therefrom. Note 2.—If claim is for disability resulting from disease, state how the disease is known to result from the soldier. Also, state how long physicians have known and treated applicant. Note 3.—The physiciane will be careful to fill every blank space in oath.	
STATE OF GEORGIA, Se Kall County.	Form No. 4.
1. M. Wayslace D. Q. Ordinary of	said County,
do certify that I am well acquainted with J. D. Richardson	the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him	n in his said
affidavit are true, and he is disabled, as he claims, and I know he is the individual he represent	its himself to
be, and that he resides in this County. I also certify that the foregoing witnesses, to-wit:	ewing
are persons of respectability, that their statements are worthy of full credit and belief, and	that the full
text of the affidavit was read to and understood by them before they signed the same.	,
Given under niy official signature and seal this 2 day of March	1897:
Mogsdee	
Ordinary De Kalk	County.

POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA, STATE OF GEORGIA, County. County. hereby authorize hereby authorize 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_ [L. S.] Executed in presence of Executed in presence of SOLDIER'S PENSION. SOLDIER'S PENSION RICHARD JOHNSON, JOHN W. LINDSEY, 1899. No. 2697

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
De Kall County.	
() () 2) 2	
personally appears & Kichardson Se Kall	-
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citize	en)
and resident of said State, and has resided therein continuously ever since the	
lay of Q 20 4 1882; that he enlisted in the military service of the Con	n-
ederate States (or of the State of (a) during the war between the	ie
States and served as a Psivate in Company E, of 7 th Regimen	nt
Volunteers, Volunteers, Strigade; that whilst engage	ed
n such prilitary service in the State of Ha, on the 2/ da	ay
of Luly 1861, he was wounded, injured or diseased as follows:	
or reded by the Explosion of a shell	0
broke thigh and cur and locerated	
elech so as to render les substa.	nti
and excentially useless	
and the state of t	
Deponent makes application for the pension to which he is entitled for the year en	d-
ng October 28th, 1899. I have heretofore under said law as a resident	of
Sella ll County been allowed an invalid pension	of
Dollars, for the year 1898	
Sworn to and subscribed before me, this, the	or
31 day of Lan 1899 Post of recher &	9
Nork State fully the nature of wound or character of disease Thich causes the disability, and coplain particularly to state of the disability resulting from the wound or disease.	
Norse State fully the nature of wound or character of disease which causes the disability, and explain particularly taxent of the disability resulting from the wound or disease.	ho .
	(
STATE OF GEORGIA,	
Heltall County.	
1, Milli Regolace, Are no Ordinary of said Count	
· / ,	he
applicant in the foregoing affidavit, and am well satisfied that the statements made by h	
in his said affidavit are true, and I know 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,	
day of Min Magsilae,	
your seal . VUIVUICagsWall ,	
Ordinary Stellall Coun	itv

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
De ath County.
Alphie. a just
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 L 2017 1832; that he enlisted in the military service of
the Confederate States (or of the State of the States, and served as a 1820 of the in Company &, of the
tween the States, and served as a in Company 2 ; of / th
Regiment of Wolunteers, Wilder of Brigade; that whilst .
engaged in such military service in the State of A, on the 2 day of 186/, he was wounded, injured or diseased as follows:
Mas wounded at 14 halle of Margasas
The sight thigh and love cony the sters
The sight third and love ceway the flest
with musel sendering the leg
supetacitiadin and cascillally inclease,
The second secon
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1900. I have heretofore under said law as a resident of
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 wakers
1, Cigalie Cadinelly,
Norm Hate fully the nature of wound or character of disease which causes the disability, and coplain particularly the extent of the disability resulting from the wound on disease,
STATE OF GEORGIA,
A.c. latte County.)
I, Milledaglice De Ordinary of said County,
do certify that I am well acquainted with C. D. Cickas Aco the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of 1900.
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Ordinary & Mah County.

These Already Enrolled. I hereby authorize of to receive and receipt for the pension paid hereon and request that he remit sa by at IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of 1901. Executed in presence of Executed in presence of Markey HANDED. To the presence of the pension of the pension paid hereon and request that he remit sa by at IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of 1901.	STATE OF		1	F AT				
to receive and receipt for the pension paid hereon and request that he remit sa by at IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of Executed in presence of	***************************************	Co	ounty.					
to receive and receipt for the pension paid hereon and request that he remit sa	I'			hereb	y authori	ze		
at IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of		+ + .		of		······································		
IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of	to receive and	l receipt for the	pension p	paid hereor	n and req	uest tha	he re	mit same
IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of				by	*	**;		
day of1901. Executed in presence of	at *	<u> </u>						
day of1901. Executed in presence of	IN WIT	NESS WHERE	OF, I hav	e hereunto	set my l	and and	seal th	is
Executed in presence of								
Executed in presence of								Γ.
				*				[L.
	Exec	uted in presence	of					
Those Already Enrolled.) No. 2304 DISABLED IER'S PENSION. 1901. Leg Weard Son Leg Weard Son Commissions of Position. Commissions of Position. Commissions of Position.					•			
Those Already Enrolled.) No. 304 DISABLED IER'S PENSION. 1901. Leg We hand Leg We hand So 301. Commissions of Pineton. Commissions of Pineton. Commissions of Pineton.	<u> </u>			11.				
Those Already Enrolled.) No. 304 DISABLED IER'S PENSION. 1.BOI. Leg We hand son Leg We hand Son Leg We hand Leg We hand Thomas of Position. Committeer of Position.							- 2	
Those Aiready Enrolled.) No. 304 DISABLED IER'S PENSION. I.B.O. L. Richardson L. Richardso								•
Those Aiready Enrolled.) No. 304 DISABLED IER'S PENSION. I.BOI. L. Richardson Leg Wourd Son Commission of Printer. Commission of Printer. Commission of Printer.								3
CODE SECTION 130 No. 364 DISABLED IER'S PENSION. 1. Richardson L. Richardson L. Richardson Commissions of Pincion. Commissions of Pincion. Commissions of Pincion.			.,					
CODE SECTION 150 No. 3204 DISABLED DISABLED IER'S PENSION. L. Richardson L. Richardson L. Richardson Commission of Position. Commission of Position. Commission of Position.		1 1000						
Those Already Enrolled. No. 307 DISABLED IER'S PENSIO IER'S PENSION IER'S	_	Z				901.		
Those Already Enrol No. 304 DISABLED DISABLED L.R. chards L.R. chards L. R. Char	Te led			1	P		Penaio	
IBOLE INC. 3004 IPOSABLEI IPOIL IP	2	O S		180	प्रभ	EY.	er of	TO
ILER'S P ILER'S) # H	田田	7	12 6	Vo	V2 DSI	niesion	ED
Those Air Those	Bad 7	문		37-	1	LIN	Соти	NEW YORK
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	Se	SI	W	M -	125	SE		SEA.
	S S	D		1	\ \s	OH		WAII

POWER OF ATTORNEY

STATE OF GEORGIA,

.		hereb	y authorize		
receive and receipt	for the pension	paid hereon	and request th	at he remi	t same
		by			
IN WITNESS W	HEREOF, I ha	ve hereunto set	my hand and	seal this	
y of	1902.		THE S		1
					5

LDIER'S PENSION DISABLED 1902.

JOHN W. LINDSEY,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
2. 2016 County.
1.0 (1)
Personally appears L. Michaidson 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 State, and has resided therein continuously ever since the
day of C 9 cc 9 1832; 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 E, of 2 th Regiment
of Volunteers, Sulescon 's Brigade; that whilst engaged
in such military service in the State of , on the 21 day
of lucci 186/, he was wounded, injured or diseased as follows:
This worning by the explosion of a sheep
freehing both thigh sight one less
substantially indessentially welless
Deponent makes application for the pension to which he is entitled for year end- ing October 26th, 1901. I have heretofore under said law as a resident of
Se Hack County been allowed an invalid pension of
Dollars, for the year 1900.
Sworn to and subscribed before me, this the
It day of lan 1901 Postoffice Tucher
Mink place Ordinary
Note.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Du Math County.
I, M.M. Chapakece Ordinary of said County,
do certify that I am well acquinted with & Whichardan the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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
min Till Registre
Ame pour les de la Company de

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

and the second s
STATE OF GEORGIA,
Lessally County.
Ocen a company
Personally appears Alexandra of De 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 1832; that he enlisted in the military service of the Con-
federate States (or of the State of Ca) during the war between the
States and served as a Associate in Company , of 7 th Regiment
of da Volunteers, Angleson's Brigade; that whilst engaged
in such military service in the State of Ja , on the 2/ day
of July 186/, he was wounded, injured or diseased as follows:
Mounded by the explosion of a she
as 1st hatter Dynanassas breaking
thigh rendering leg substantial
useless,
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1902. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1901.
Sworn to and subscribed before me, this the) Land Collar de land
day of Lin 1902 Post-office
umagado co Ordinas,
Nore.—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.
particularly the extent of the disability resulting from the wound or dischee.
STATE OF GEORGIA.
0 52.0
The ready Gounty.)
I. Will Wingstlee for Ordinary of said County,
do certify that I am well acquainted with Afficellar Asm
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
be and that he resides in this County.
be and that he resides in this County. Given under my official signature and seal, this
Given under my official signature and seal, this day of 1902. Amar Jan
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 (FOR THOSE ALREADY ENROLLED.) LDIER'S PENSI JOHN W. LINDSEY, DISABLED 1903. Name Richardson

No. 332

POWER OF ATTORNEY.

	Cou	NTY.				
Ì,					hereby au	thoriz
	* * * * * * * * * * * * * * * * * * * *	of		······	-	
receive and receipt	for the pension	n paid hereon	, and req	uest that	he remit sa	ime
***		by		1 2 1		
t		7,		A . 100 10	A COLLEGE	
			and and add	al this		
IN WITNESS WHERE	or, I have here	eunto set my h	and and sea	, this		
		eunto set my h	and and sea	si, this	C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		eunto set my h	and and sea			
		eunto set my h	and and sec	, tills		-[[-]
	1904.	eunto set my h	and and sec	a, tiiis		-[
ay of Executed in present	1904.	eunto set my h	and and se	s, tiis		_[L.]
ay of	1904.	eunto set my b	and and se	si, tills		-[k]
ay of Executed in present	1904.	eunto set my h	anu anu se	si, tuis		-[5]
ay of Executed in present	1904.	eunto set my h	anu anu se	si, tills		-[1 -[1 -]
ay of	1904.	eanto set my h	anu anu se	i, uis		-I s ()
ay of	1904.	eanto set my h	giu aiu se	i, uis		-[- [-]

(FOR THOSE ALREADY EMBOLLED.

SOLDIER'S PENS DISABLED

1904

JOHN W. LINDSEY.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
Le Hall County.	
Personally appears LRichardson of De Walk)
County, State of Georgia, who being duly sworn, says on oath that he isa bona fide cit	iz en
and resident of said State, and has resided therein continuously ever since the /	
day of Aug 1832; that he enlisted in the military service of the	Con-
federate States (or of the State of) during the war between	
States, and served as a Private in Company 2, of 7 th Regin	
of Ha Volunteers, Anderson's Brigade; that whilst enga	aged
in such military service in the State of la , on the 2/	day
of July 186/, he was wounded, injured or diseased as follows:	
In first battle of Monneson Mounded be	4
the explosion of a speep breaking sight	
Thich rendering some substantially and	
essentiacey necless	
Coat at the year of the second	,
	—
ending October 26th, 1903. I have heretofore, under said law, as a resident County, been allowed an invalid pension Dollars, for the year 1909.	n of
Sworn to and subscribed before me, this the Post-office Pucker Ju	-
UM Mondace, Oldinary	
Norg.—State fully the nature of the wound or character of disease which causes the disability, and eparticularly the extent of the disability resulting from the wound or disease.	xplain
STATE OF GEORGIA,	
Ac Nath County.) I WM Rosseless A Q Ordinary of said Cou	intv.
do certify that I am well acquainted with A. Richardson	,,
the applicant in the foregoing affidavit, and am well satisfied that the statements made	le by
him in his said affidavit are true, and I know he is the individual he represents himse	elf to
be and that he resides in this County.	
Given under my official signature and seal, this 10	
day of 1903,	, ,
my of MMR condoce	
your {	unty.
New Pill all blacks and of Company and Pagiment	

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Description of Description of Descriptions

Personally appears J. C. Michaelson of Descriptions

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 Clery 18 32; that he enlisted in the military service of the Confederate States (or of the State of_) during the war between the as a Bi in Company E, of 7 th Regiment Volunteers and Structurson 's Brigade; that whilst engaged States, and served as a in such military service in the State of of feely 1861, he was wounded injured or diseased as follows: Explosions of Shell both thingh brother musale Josh. Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1903. Sworn to and subscribed before me, this the Norg.—State fully the nature of the wound or character of bisease which causes the disability, and explaint particularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, do certify that I am well acquainted with I Stick and son the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this

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

Note.—All vouchers and affidavits must bear date after January 1, 1904.

DOWED OF ATTORNEY

STATE OF	GEORGIA,	COUNTY.			y authorize
to receive an	nd receipt for the p	of. pension paid here	on, and reques	st that he rea	nit same to
at.	èn -	by			
	NESS WHEREOF, I ha	ave hereunto set	my hand and s	seal, this	
lay of		1905.			[L. s.]
Exec	uted in the preser	nce of			
					43.
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LED.	010	Clark). 190	ensions.	1
FOR THOSE ALREADY ENROLLED No. 27/	ENS	263	14	/ W. LINDSEY, Commissioner of Pensions	WARRANT HANDED TO
EADY 13	DISABLEI IER'S PE	Rich Mach Mad	00 1	JOHN W. LINDSEY, Commissioner o	HANI
SE ALR	DISAB IER'S	5 7 7 8		OHN W.	RANT
THOS		150	Disability. Amount, S. 56) H	WAI
E	SOI	Name	Disability Amount,		

matte

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to receive and rec	eaint for the ne	nsion paid he	ereon, and	request th	nat he re	mit sam
to receive and rec	terpt for the pe	by_	•		, J.	
at						
	s Whereof, I h	ave hereunto	set my han	d and seal	l, this	
day of	1906.					[
Executed in	n the presence o	f				
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OLLE O	S	1 3 2	Rich	227	W. LINDSEY.	WARRANT HANDED TO
W EN	世紀で	1 / 1/2	Hent	8	JOHN W. LINDSEY.	NDE
CODE SECTION 1250. SE ALREADY E.	II SO	53 W	Regiment	5	W. L.	H H
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0 111 0			. / /			- V
COM SECTION 1280. COM SECTION 1280. NO. 2 3 C. NO. 2 3 C.		1 1/2 8	60 10	Amount, \$		B

STATE OF GEORGIA,
X, (//((/ COUNTY.)
Personally appears J. K. Michandson Chettall -
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
federate States (or of the State of) during the war between the States, and served as a in Company & , of 7 th Regiment
of Va Volunteers''s Brigade; that whilst engaged
in such military service in the State of, on theday
Regit leg Misable, Mornanzers, July 21-1864
the said of the sa
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
Dollars, for the year 1904.
Sworm to and subscribed before me, this the
150 8/1/0/201/07/
A day of fure use 1905. Make Donaville
Land Sylong Protosing Post-omce Dovatile 1
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.
particularly the execution the discussion,
STATE OF GEORGIA,
hullacle country,
I, JUIIII If Me of ge, Ordinary of said County,
do certify that I am well acquainted with Ith Michaellson
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 100000000000000000000000000000000000
(AMIX) OUT OF THE PROPERTY OF
ber. Ordinary All II County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,	
Personally appears I Rich	andson of De Rail
	orn, says on oath that he is a bona fide citizen
and resident of said State, and has resided t	herein continued and that he is a bona fide citizen
	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 , ofth Regiment
of Georgia Volunteers an	derson's Brigade; that whilst engaged
in such military service in the State of	require, on the day
of July 186 / he w	yas wounded, injured or diseased as follows:
Saplosion of sh.	ell injured both
thighs	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Tolle-	tofore, under said law, as a resident of County, been allowed an invalid pension of
Testre	
1988.	Dollars, for the year 1905.
Sworn to and subscribed before me, this	Dollars, for the year 1905. the Alexander
1988.	Dollars, for the year 1905. This Richardson marky
Sworn to and subscribed before me, this	Dollars, for the year 1905. S the Like Richards
Sworn to and subscribed before me, this 20th day of January 1906. Januar Rusry Online	Dollars, for the year 1905. This Pichards Post Office Montreal Octoor of disease which causes the disability and explain.
Sworn to and subscribed before me, this 20 th day of January 1906. Amus Reserve Decline Nore.—State fully the nature of the wound or chara particularly the extent of the disability resulting from the w State of Georgia,	Dollars, for the year 1905. The Richards Post Office Montreal Country of disease which causes the disability, and explain ound or disease.
Sworn to and subscribed before me, this 20 th day of January 1906. Januar Record Ordinary Norz.—State fully the nature of the wound or charaparticularly the extent of the disability resulting from the w State of Georgia, County.	Dollars, for the year 1905. The Richardso mark Post-Office Montreal Post-Office Montreal and explain ound or disease.
Sworn to and subscribed before me, this 20th day of January 1906. Januar Reserve Dysline Note.—State fully the nature of the wound or chare particularly the extent of the disability resulting from the w State of Georgia, County. I, James R. Je	Dollars, for the year 1905. The Richardso mark Post-Office Montreal ordinary of disease which causes the disability, and explain ound or disease. Ordinary of said County
Sworn to and subscribed before me, this 20 th day of January 1906. More.—State fully the nature of the wound or chars particularly the extent of the disability resulting from the w State of Georgia, County. I, January do certify that I am well acquainted with	Dollars, for the year 1905. This Richardso mark Post-Office Montreal Car of disease which causes the disability, and explain ound or disease. Ordinary of said County Richardson
Sworn to and subscribed before me, this 20 th day of Acceptant 1906. More.—State fully the nature of the wound or charapartical farily the extent of the disability resulting from the w State of Georgia, County. I, Lannes do certify that I am well acquainted with the applicant in the foregoing affidavit, and	Dollars, for the year 1905. The Richards Post Office Montreal Country of disease which causes the disability, and explain ound or disease. Ordinary of said County of said County are well satisfied that the statements made
Sworn to and subscribed before me, this 20 th day of Accuracy 1906. Nore.—State fully the nature of the wound or charapartic flarily the extent of the disability resulting from the w State of Georgia, County. I, Lannes County. the applicant in the foregoing affidavit, and by him in his said affidavit are true, and I kn	Dollars, for the year 1905. The Richards Post Office Montreal Country of disease which causes the disability, and explain ound or disease. Ordinary of said County of said County are well satisfied that the statements made
Sworn to and subscribed before me, this 20 th day of Auray 1906. Nore.—State fully the nature of the wound or charaparticularly the extent of the disability resulting from the w State of Georgia, County. I, County. do certify that I am well acquainted with the applicant in the foregoing affidavit, and by him in his said affidavit are true, and I kn to be, and that he resides in this County.	Dollars, for the year 1905. The Richards Post Office Montreal Post Office Montreal Ordinary of said County Archards am well satisfied that the statements made ow he is the individual he represents himself
Sworn to and subscribed before me, this 20 th day of Aultary 1906. Nore.—State fully the nature of the wound or chara particularly the extent of the disability resulting from the w State of Georgia, County. I, Lander County. do certify that I am well acquainted with the applicant in the foregoing affidavit, and by him in his said affidavit are true, and I kn to be, and that he resides in this County. Given under my official signal	Dollars, for the year 1905. The Richards Post Office Montreal Post Office Montreal Ordinary of said County Are have been a said to the statements made ow he is the individual he represents himself ture and seal, this 20 th
Sworn to and subscribed before me, this 20 th day of Auray 1906. Nore.—State fully the nature of the wound or charaparticularly the extent of the disability resulting from the w State of Georgia, County. I, County. do certify that I am well acquainted with the applicant in the foregoing affidavit, and by him in his said affidavit are true, and I kn to be, and that he resides in this County.	Dollars, for the year 1905. The Richards Post Office Montreal Post Office Montreal Ordinary of said County Are have been a said to the statements made ow he is the individual he represents himself the said said, this the said said to the said said the said said the said said said said said said said said
Sworn to and subscribed before me, this 20 th day of Autory 1906. Nore.—State fully the nature of the wound or charaparticularly the extent of the disability resulting from the w State of Georgia, County. I, Lannes do certify that I am well acquainted with the applicant in the foregoing affidavit, and by him in his said affidavit are true, and I kn to be, and that he resides in this County. Given under my official signal day of the said affidavit are true, and I kn to be, and that he resides in this County.	Dollars, for the year 1905. The Richards Post Office Montreal Post Office Montreal Ordinary of said County Are have been a said to the statements made ow he is the individual he represents himself the said said, this the said said to the said said the said said the said said said said said said said said

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

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

POWER OF ATTORNEY.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this y of	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this yof	DeKALB.	County.)			, h	ereby aut	horise
y of	Executed in presence of	- C	by				e remit 80	ame to
	100N	y of190'		set my han	d and sea	l, this		[L. 8.]
	(a SO) (7) 1800;				1			
COOR THOSE ALREADY ENROLLED NO. 307 DISABLED DISABLED TOOT TOOT OUT, S. S. Regiment Tet. Regiment Tet. Regiment Tet. Regiment Tet. Out, S. S. R. LINDSEY. COMMISSIONS OF POUR WARRANT HANDED TO TO TO TO TO TO TO TO TO TO		SE ALREAD EN SE ALREAD EN SE ALREAD EN SABLE EN SPECIAL	Rieha	Regin	0	JOHN W. LINDSEY,	RANT BA	REISON, STATE

Maimed Soldiers. Audited Feb. 14 Voucher No. H.96 Amount & & U. Paid to Kellier J. Hickardson Heinbled Theby 14 Included in Warrant No. issued to Treasurer. WARRANT CLERK

State of Georgia. DeKALB: County. Personally appears 9. L. Richardson of DeKALB. County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 18; that he enlisted in the military service of the Confederate States (or of the State of____ during the war between the States and served as a Soldier in Company & of 7 th Regiment of Seoveral Volunteers andersons Brigade; that whilst engaged in such military service in the State of ______, on the 2/At day __186/ , he was wounded, injured or diseased as follows: Left leg disolled Manassas Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1906. Sworn to and subscribed before me, this the day of January 1907. Mus R George Onlinea Postoffice Nors.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease. State of Georgia, DeKALB. County. I, James R. George Ordinary of said County, do certify that I am well acquainted with J. L. Richardson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this

No. 496, STATE OF GEORGIA, EXECUTIVE DEPARTMENT. \ Monta, G. Koby 111 1889 Mr. Lacius L. Richard son of the County of X Hall having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, Dec, 24, 1888, and the same having been allowed for Jest deg Recabled He is entitled to receive the sum of Heffy Vool for such disability, the same being the allowance due for the year ending October 24, 1889. The Treasurer will pay the ame and hold his receipt on this youcher, and return same to Executive Department for warrant. By the Governor Harney (7 ECEIVED OF STATE TREASURER, R. U. HARDEMAN Dollars. per above voucher, this

Jennes Xd Rechardson

mich Roupine

Nove.—Fill all blanks and of Compa

Nors.—Fill all blanks and of Company and Regiment.
Nors.—All vouchers and affidavits must bear date after January 1st, 1937.

County.

DeKall Maimed Soldiers. Voucher No. 1098 Amount \$ 50 Paid of Richardson For Leg derables Included in warrant No.

issued to Treasurer.

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

Milicant

18

WARRANT CLERK.

Audited

COMPTROLLER-GENERAL

Audited.

1891. Maimed Soldiers. Voucher No: 1634 Amount \$ 50 Paid fas L Nelland son Holy 2 4 1891. Included in warrant No. , issued to Treasurer, 1891.

COMPTROLLER GENERAL.

WARRANT-CLERK.

No. 1098
STATE OF GEORGIA, Atlanta, Sa., Rely 13 1890
IJ Poli
Mr J. Richardson 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 He is entitled to receive the sum of Dollars
for such disability, the same being the alternative for the year ending October 24, 18
The Treasurer will pay the same and holding receipt on this voucher, and return same to Executive Department for warrant.
By the Governor,
La H Hamiser
CLERK EXECUTIVE DEPARTMENT.
,00
RECEIVED, OF STATE TREASURER, R. U. HARDEMAN,
Right tool Dollars,
per above voucher, this 13 portely 1870

1891	
No. 1694	4
STATE OF GEORGIA, EXECUTIVE DEPARTMENT. \ Allanda, Ba. John 24, 189	71.
production of the second of th	
Mr. Jus. L Richards of the Cou of DeKull having filed his application in the Execu	inty
of 1.887 as amended by	Acts
Department for an allowance under the Act approved October 24, 1887, as amended by	
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed the is entired to receive the sum of the sum of the same having been examined and allowed the sum of the same having been examined and allowed the same having been examined to same the same having the s	() () () () () () () () () ()
He is entired to receive the sum of Megly	llars
for such disability, the same being the allowance due for the year ending October 24, 1891.	
The Treasurer will pay the same and hold his receipt on this voucher and return sam	e to
Executive Department for warrant.	nous
TE OF DEUKS GOVERNO	or.
By the Governor, SEC'Y EXECUTIVE DEPARTMENT.	
,50	
RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.	•
() All	llars,
per above voucher, this of Hely 1891.	0

NAME, Richardson, James L YEAR 1887 COUNTY DeKalb YEAR ADDED TO ROLL: 1887

WHEN AND WHERE CORIT Resident of Ga. since 1st day of August, 1833

EMBISTED WISH AND MISKE?

RATE. Private

CONTANT AND BY HAMTT? Co E 7th Begt. Ga. Vols. - Bartow's Brigade

NAME OF CAPULTY AND COLUMNEY Lieutenant J J Powell

WOUNDERST In both thighs - 1st Manassas, Va. - - 21st July 1861.

CALTURED, WILH AND ARLES

RELEASED.

WHEN AND WHERE SURRANDIRED?

IF NOT TRESENT AT DURRUILER, WHILE WHAL YOU?

DIED, WHEN AND W... 12?

BURIED.

WITNESSES. Lt. J J Powell

No data

NAME. Richardson, James L. "YEAR 1889 COUNTY DeKalb

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

RANK.

Private Co. E, 7th. Regt. Georgia Vols. COMPANY AND REGIMENT? Bartow's Drigade.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Manassas, Va. July 21st. 1861. Shell breaking both thighs, left leg useless.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES.

None

NAME Richardson, J.L.

WHEN AND WHERE BORN? August 1st. 1832 Ga.

ENLISTED WHEN ALL WHERE?

RANK. Private

COMPANY AND REGIMENT? Co. E, 7th. Regt. Ga. Vols. Anderson's Brigade.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? July 21st. 1861 wounded by explosion of shell between the thighest breaking the bone of left thigh and tearing the muscles and flesh from the thigh.

CAPTURED, WHEN AND WILEAR?

RELEASED.

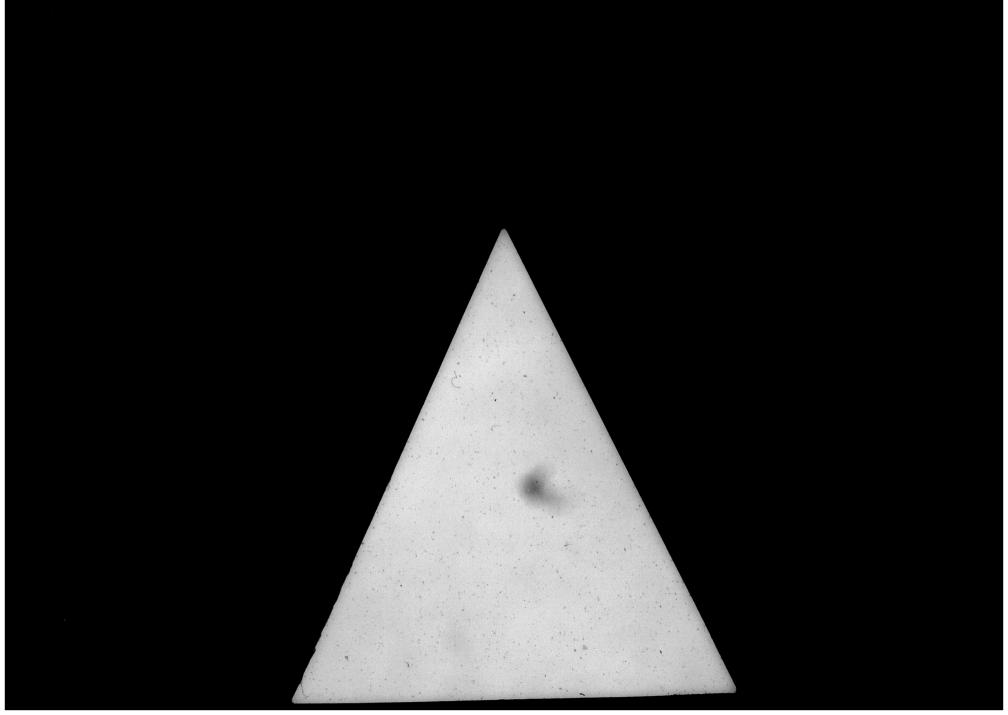
WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENUER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. James Hunter, Robert F. Davis and J.C. Chewning, served in army with applicant -- No data.



138.464 Application for Allowance Seft ann aiables. County DeKalb Amount 25. Date of Warrant Milly 4/88 Lany 4 1888

STATE OF GEORGIA, County

Personally appears William M. Richardson of De Kalb county, State of Georgia, who, being duly sworn, says on oath that he is a bond side citizen and resident of said State, and has been such since the First day of October 1856; that he enlisted in the military service of the Confederate States (or of the State of during the war between the States, and served as a Private in Company K, of 38 th Regiment of Georgia Volunteers Fordows 's Brigade; that whilst engaged in such military service, at the battle of Second Manassas in the State of Originia on the day of 186, he was wounded as follows: by a Georgian volunteer of all the Bones of the Elbour front, and a dislocation backward of the Same resulting in the distriction of the Joint and a considerable harding of the bones composing the fourt to the breaking up the attachments of murseles, ligaments we leaving the arm greatly deformed and almost useless.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and makes application for the allowance to which he is entitled thereunder.

Sworn to and subscribed before me, this the 30 day of Deculor887

William MI Richardson

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

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA,
- County.
Milian Wallet Com
PERSONALLY came before me William M. Richardon of the count
of Do Kall
of Di-Kall State of Georgia, who, being duly sworn, says that he wa
a commissioned officer in Company K, of 38 Regiment of Georgia
Volunteers, and that deponent knows Wilson Richardion, and that he received the wound
(or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wound
(or disease) permanently disables the said win M. Ruchardson , as stated by him in said
affidavit. Deponent further states that said William M. Richardson is a hong fid
citizen of this State, and resides in De Kalle county.
Sworn to and subscribed before me, this 4 day of Jane
hell on the set

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

_Co	
	unty.
Personally came	
citizens of	county, in said State,
who, being duly sworn, say that they are a	cquainted with
	and know that he received the wounds (or contracted the
liance in the military service as state	ed 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 state-
ments in his affidavit are true.	
Sworn to and subscribed before me, t	
day of	188
CTATE OF CEORGIA	
STATE OF GEORGIA, County,	
	Ordinary of said county,
County. Personally comes before me	
County. Personally comes before me A. S. Mayron,	nd a.H. Brantly, , both known to
County. Personally comes before me A. J. Mayson an eas reputable physicians of said County.	nd A.H. Brantly, , both known to
Personally comes before me A. S. Mayson	nd A.H. Brantly, , both known to , who, being severally sworn, say on oath that they have the classes and after such examination say that the
Personally comes before me A. J. Mayron an as reputable physicians of said County arefully examined Mill, and applicant has been injured as follows:	nd A.H. Brantly, , both known to who, being severally sworn, say on oath that they have the classes and after such examination say that the County will be the Fraction of
Personally comes before me O. J. Mayron an as reputable physicians of said County carefully examined Mill, sure applicant has been injured as follows:	nd A.H. Brantly, , both known to who, being severally sworn, say on oath that they have the classes and after such examination say that the Country would Fracture of found. Levellering the
Personally comes before me O. J. Mayron and as reputable physicians of said County carefully examined Will and applicant has been injured as follows:	nd A.H. Brantly, , both known to who, being severally sworn, say on oath that they have the classes and after such examination say that the County will be the Fraction of
Personally comes before me O. J. Mayron a me as reputable physicians of said County carefully examined Mill, sure applicant has been injured as follows:	nd A.H. Brantly, , both known to who, being severally sworn, say on oath that they have thickers and after such examination say that the County served Fracture of foint. Lenstoning the substantially useless
Personally comes before me A. J. Mayron as as reputable physicians of said County arefully examined Mill, and pplicant has been injured as follows:	nd A.H. Brantly. , both known to who, being severally sworn, say on oath that they have the classes and after such examination say that the Everespoint Fraction of foriet. Lenstering the substantially hackers

NOTE. The physicians will state fully the extent of the wound and the disability resulting therefrom

John B Steward

STATE OF GEORGIA. Dekalt County. 1. John B. Steward 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. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief I further certify that Steller B Steward before whom the foregoing 2 affidavits were made and power of attorney was signed, is Ordinary of said county, and that the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this for day of fleconder, 88%.

Ordinary Deltal County. POWER OF ATTORNEY STATE OF GEORGIA County. Know all men by these presents, That I 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, 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 188

__ L. S

Executed in the presence of us:

STATE OF GEORGIA, County. PERSONALLY appears Il Merchandson of Lva hall State of Georgia, who, being duly sworn, says on oath that he is a bong fide citizen and resident of said State, and has been such continuously since the 1853; that he enlisted in the military service of the Confederate States (or of the State of Leangia) during the war between the States, and served as a Krivale in Company K, of 38" th Regiment of Leorgia Volunteers (1 1 ahta Lefs Brigade; that whilst engaged in such military service, at the battle of 201/1/12 in exact State of Virginia on the 28 day of Jug 1862 he was wounded as follows: That with a musket ball elbour Rendening suid oum Sufetan tiably useless! Deponent desires to participate in the benefits of the Act, approved October 24, 1887,

and the Act amendatory thereof, approved Dec. 24, 1888, and makes application for the allowance to which he is entitled for the year ending Oct. 26, 1889.

Sworn to and subscribed before me, this the day of the MMA Agaidale,

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

STATE OF GEORGIA.

County. and ANNIKES, both known to PERSONALLY comes before me county, XX Loss me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined 20. Maichardson and after such examination say that the applicant has been injured as follows: By a shot near the elbow of left arme leaving a permanent dislocation at elbow & the arm in a withere condition, substantially & executially necless.

Sworn to and subscribed before me, this

Note.—The physician's will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

STATE OF GEORGIA. County. 1. 1. 1. 1. 1. 1. 1. 1. 1.
are persons of respectability, and that their statements are worthy of full credit and belief. 1 further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said county, and that the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this of day of the target and the said affidavits. Ordinary Defails, County.
Ordinary MATE, County.
POWER OF ATTORNEY, STATE OF GEORGIA,
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 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 r88
(L. S.)
Executed in the presence of us;
DIRECTION:
Send money to me as follows by

County, Georgia.

P.O.

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 fact showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

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

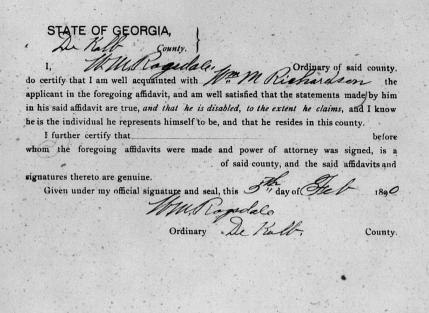
3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."

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

5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.

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

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



Maimed Soldiers.

No. 149

Amount & 50

Paid Will Richardson

For Left Ann

disabled

Audited

COMPERCILER-GENERAL

Included in Warrant No.

issued to Treasurer.

WARRANT CLERK

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

Feb 2/89

For Applicants Heretotore Allowed Pensions. STATE OF GEORGIA, De Tall PERSONALLY appears Mall Richardson De Kall 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 1836; that he enlisted in the military service of the Confederate States (or of the State of Levigia) during the war between the States, and served as a Private in Company 1, of 38 th Regiment of Levigia Volunteers Laskins 's Brigade; that whilst engaged in such military service, at the battle of 2d Massal of brinina, on the 186 / , he was wounded as follows: Shot with a mustlet ball and three buch shot in the feft dom near the elbow. Dislocating the elbow joint dansing the alpho to be substantially and Estentially sitseless Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of dollars. Sworn to and subscribed before me, this the Note State fully nature of Joined or character of disease which could the disability, and explain particularly the extent of the disability. POWER OF ATTORNEY. STATE OF GEORGIA County. KNOW ALL MEN BY THESE PRESENTS, That I, county, in said State, do hereby appoint my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or tor any sum of money which may be coming to me for the reason IN WITNESS WHEREOF, I have hereunto set my hand and seal, this

DIRECTION.

STATE OF GEORGIA, Stlanta, Ga Hor Mr. Spyn. Richardsin of the County of A Kalh having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act. Dec/24, 1888, and the same having been allowed for Larm desabled He is entitled to receive the sum of Heft Dollars for such disability, the same being the allowand did foldby sear ending October 24, 1889. The Treasurer will pay the same at holding town by this coucher, and return same to Executive Department for warrant. GOVERNOR. The Governor Harnson CLERK EXECUTIVE DEPARTMENT. CCEIVED OF STATE TREASURER, R. U. HARDEMAN Dollars.

Send money to me as follows, by

Executed in the presence of us:

P.O.

L. S.

County, Georgia.

De Kall

Maimed Soldiers.

Voucher No. 265

Amount & 50

Andred File ?

Paid Stym Richart son

For Left ann disables

Hely V

Included in warrant No.

issued to Treasurer.

Audited.

applicant

1891.

Maimed Soldiers.

Voncher No. 111-0

COMPTROLLER-GENERAL.

Amount \$, 50

For Arm diso

Included in warrant No.

issued to Treasurer,

WARRANT-CLERK.

up hligant

No. 440 STATE OF GEORGIA, Allanta, Da. Fiely 10 1891. EXECUTIVE DEPARTMENT. of DeNulh having filed his application having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for Um dio He is entitled to receive the sum of High Dollars for such disability, the same being the bowance due for the year ending October 24, 1891. The Treasurer will pay the same and look his receipt on this voucher and return same to ATE OF GEODS Executive Department for warrant. By the Governor M Harrisin Sec'y Executive Department.

Dollars,

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

per above voucher, this____

1891.

NAME, Richardson, William M

YEAR 1888 COUNTY DeKalb

WHEN AND WHERE PORTUResident of Ga since the 1st of Oct., 1856

BULLEVED VIEW ALL ALTO

RATE. Frivate

COLUMNY AND R. MEMETT? Co K 38th Regt. Ga. Vols ordon's Brigade

NAME OF CAPPAIN AND COLONEL? W M Wright, Captain

YOUNDED? Second Manassas. Va - left arm

CALTURED, WHAT AND WALKEY

RELEASED.

WHEN AND MIERE OUTSIE WITHERD?

IF NOT PRESENT AT JUNE LIBER, WHILE WELL YOU?

DIED, WHEN AND WILLY?

BURIED.

WITNESSES. W M Wright, Captain - Commanding officer -

No data

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.

No. 268 The Atlanta, Sa., Fiby 5th

mm m Richardson of the County 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

It arm desables

He is entitled to receive the sum of Highly 100f Dollars

for such disability, the same being the allowance due for the year ending October 24, 18 90

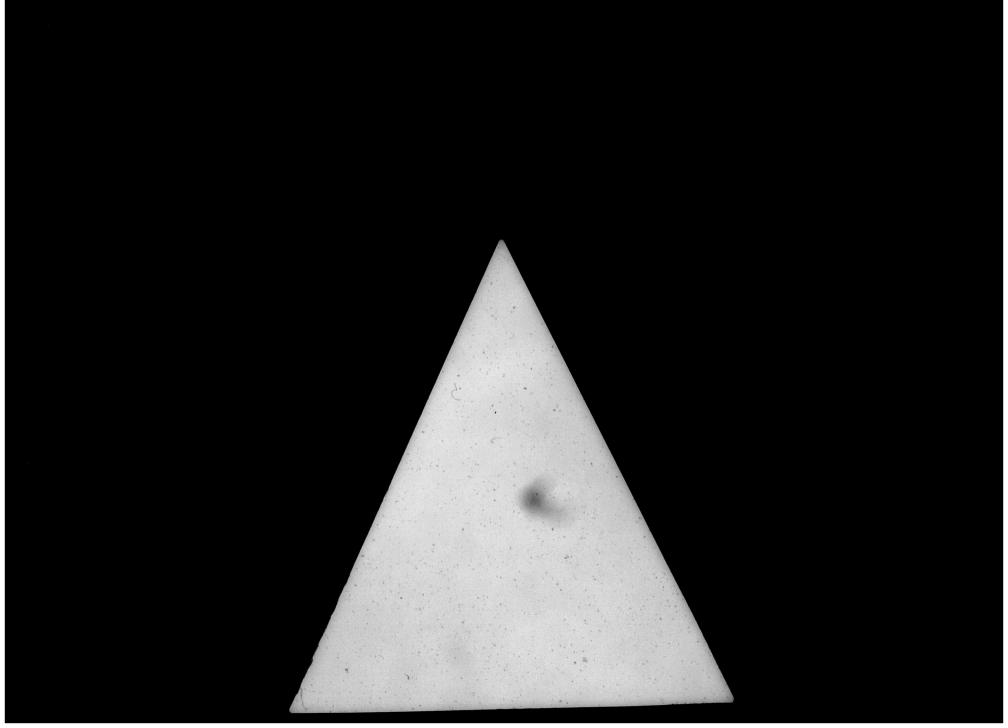
The Treasurer will pay the same and hold his receipt on this voucher, and return same to Executive Department for warrant.

By the Governor,

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

per above voucher, this



NOT ES

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: by the Governor touching the payments provided, the following suggestions are submitted: and fully set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

1. The law makes no allowance for arm or leg, unless the arm or leg has been rendered sestamially and essentially useless.

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

4. If the papers are returned for correction and amendments are added to any of the affidarits, the amendments must be made under outle before an officer, and the proofs must show that the amendments have been duly sworm to.

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

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

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

W. H. HARRISON

W. H. HARRISON Clerk Ex.

DeRalt Co. Ricket, o. m No. 2619. APPLICATION FOR ALLOWANCE Leg des ables, Applicant, P. M. Ricket County, Je Rail Amount, 50 Date of Warrant, March 38 Enleyed on record
Whiel 28 1890 CLO H HAMBERTARY KENDUTIVE DEPARTMENT. WARRANT HANDED TO

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

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

in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.

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

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

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

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

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

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

No payments can be made for any past year.

W. H. HARRISON, Clerk Ex. Dept.

APPLICATION FOR ALLOWANCE

STATE OF GEORGIA,
De Hall County
PERSONALLY appears PM. The feet of the flath county,
State of Georgia, who, being duly sworn, says on oath that he is a bona-fide citizen and
resident of said State, and has been continuously since the day of
March 1857; 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 Wrink in Company A. of The Regiment
of La Articlery Volunteers Brigade; that whilst engaged
in such military service at the buttle of in the State
of Sic, on the of day of May, 1864, he was
wounded as follows: In a rail road executent while hein
- Manshoiled from Lugasta to Wilmington the the
Dingerille, S.C. In this collision many lives were
lost, and affiant was budly injuled anderipple
having his left thigh bally prestured, and the
and ankle crushed, from folich injuries office
hoe dines been disabled from worker sail
inferies heing Kermanent and received while
tal service, as a soldier, of the workederate States.
Deponent desires to participate in the benefits of the Act, approved October 24, 1887,
and the acts amendatory thereof, and makes application for the allowance to which he is
entitled for the year thereunder, ending October 26, 1890.
Sworn to and subscribed before me this the D.M. Ricket
Wo" day of Misch 1890)
Note.—State tull of the whole the disability, and explain particularly the extent of the disability. If claim is based on disease the disability. If claim is based on disease the disability.
the disability. If claim is based on disease five full old connected history of disease, tracing it directly to the service.
Commissioned Officer's Affidavit.
STATE OF GEORGIA,
Pulton County.
PERSONALLY came before me Such a Sylalley of the county
of Julion State of Georgia, who, being duly sworn, says that he was
a postump store your company of or
Colorteers, and that deponent knows P. M. Kiakel-, 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 Plan Rick Kol
2 as stated by him in said affidavit. Deponent further states that said
I he Rockett is a bona fide citizen of this State and resides
Sworn to and subscribed before me this

County. 1

PERSONALLY came

citizens of

county, in said State.

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

and know, from having been with him in the army, that

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

statements in his affidavit are true.

Sworn to and subscribed before me, this

day of

Note: Above affidavit must be made by three citizens who personally know of the service of applicant and can state of their knowledge precisely how he is disabled, and what che with the strength of their Note 2. The attesting officer must see that each witness reads, or has result to him the affidavit he signs.

STATE OF GEORGIA

Denach County.

PERSONALLY comes before me A Ht Ragidate Ordinary of said county,

, both known to

me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined V. JII. Hicket.

examination say that the applicant has been injured as follows: In a felt a coid who is the ferries of affling was shallened with the last we had not and the follows of the fland of the last of the fland of the fl tielly & rescaliably uscle

> Sworn to and subscribed before me, this ! day of flyer the 1890 Thor. Carr. Clary MIX

NOTE. - The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability result-

NOTE 2.—It claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier.

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

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

Given under my official signature and seal, this 25"day of March 1890. MMA Pagsdale. Ordinary De Half

County.

POWER OF ATTORNEY.

STATE OF GEORGIA, De Mastr County.

Know all Men by these Presents, That I; of De Piath county, in said State, do hereby appoint W. L. Errard

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

IN WITNESS WHEREOF, I have bereinto set my hand and seal, this day of March 1890.

Executed in the presence of us:

The de Austin and laporte in the same

If allowed, send amount by

, and oblige,

STATE OF GEORGIA,

Le Manager County.

I, Ordinary of said County,
do certify that I am well acquainted with 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 13 day of 1891.

Ordinary Residual County.

County.

FLERET, R. M.

310. SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 36, 1992.

FOR THE YEAR ENDING OCTOBER 36, 1992.

FOR THE YEAR ENDING OCTOBER 36, 1992.

Name PROPERTY OF PROPERTY.

NAME OF THE YEAR SON.

SOCTION OF SECULAR 1892.

N. H. HARRISON.

SOCTION OF SECULAR 1892.

AGSENT.

AGSENT.

W.M. Rogadale, Ordinary of said county,

County.

STATE OF GEORGIA,

do certify that I am well acquainted with P.M. Richel

individual he repesents himself to be, and that he resides in this county.

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

Given under my official signature and seal, this 1" day of Murah 1802.

Mille godale.
Ordinary De Kill

WARRANT HANGED TO

WARRANT HANGED TO

WARRANT HANGED TO

Gree W. Harrison State France, Atlanta Ca.

For helphan springers Allowed Residens

Tot Applicants heretotore allowed rensions.	OTATE OF OFOREIGN THE OLOTONE ANDWELL FEISIONS.
STATE OF GEORGIA,	STATE OF GEORGIA,
DiRalle County	- Al Malt County. (1)
	PERSONALLY Appears Michiganoto
PERSONALLY appears AM Celetita of De Rosh	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	
day of 1842; that he enlisted in the military service of the Con-	10 / ; that he enhited.
federate States (or of the State of) during the war between the	in the military service of the Confederate States (or of the State of
States, and served as a Sizual in Company A, of Ith Regiment	during the war between the States, and served as a 1111 G in Company 1.
Volunteers 's Brigade; that whilst engaged	of th Regiment of Sergia Satal & offintee Brilling 's
in such military service at the battle of Dranchville in the State	Brigade; that whilst engaged in such military service at the battle of
of lay of lay of lay of last 1863, he was	in the State of, on theday of
wounded as follows: In a Rail Road Collin in	May 1864, he was wounded as follows: Has musted
while returning to command had	Le hing the left thigh holon and
In gest thigh couched and heef	Se having the left thigh bothen and.
and with, which headers the	- We the transfer and the first in
Daid dig assentially and	The Lef Neith to inteally and
Sur la the ally useless,	essentihely necless.
Lettis will my walls of	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	the year ending October 26, 1892. I have heretofore been allowed a pension of
for the year ending October 26, 1891. I have heretofore been allowed a pension of	Dollars for Bod in King A
(If if My dollars, for	Sworn to and subscribed before me this the
Sworn to and subscribed before me, this, the	1st mil (Millichet
13° day of Fe/~ 1891.	day of March 1892.
	Ordinary,
NOTE - State fully rators of wound or character of themse which course the disability and a state of the stat	Norge.—State fully nature of wound or character of disease which causes the disability, and explain particularly the
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
DOWED OF ATTORNEY	POWER OF ATTORNEY.
POWER OF ATTORNEY.	STATE OF GEORGIA,
STATE OF GEORGIA,	County
County.	Know all Men by these Presents, That I,
Know all Men by these Presents, That I,	Anow an men by chose Presents, That I,
of County, State of Georgia, do hereby appoint	
8 7 11 1	County, in said State, do hereby appoint
of 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 whatever amount of money I may be entitled to
me and in my name, to receive and receipt for whatever amount of money I may be entitled	from the State of Leggraphy reason of the injury recovery as aforested in the military
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 authoriz-	the Confederate States for of this State) as stated in the foregoing affiduity hardy authorists
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, or for any sum of money which may be coming to me for the reason aforesaid.
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 hand and seal, this	day of
day of1891.	[i. s.]
[L, S,]	Executed in the presence of us:
Executed in the presence of us:	
an-manananananananananananananananananan	
DIRECTION.	DIRECTION.
Send money to me as follows, by	Send money to me as follows, by
P, O.	
County, Georgia.	County Georgia

POWER OF ATTORNEY.

Thou we vitore by creese	Presents, That I		
	County, State	of Georgia, do l	nereby appoint
<u>ata ili um arti ujilgi ilingi</u>	arrans adulting year	r(\$0), (1),	**************************************
hd in my name of college	my t	true and lawful atto	rney in fact, for
nd in my name, to receive an the State of Georgia by reas Confederate States (or of this aid attorney to receipt in my ny sum of money which may	name for any Warrant that be coming to me for the rea	may be issued by the	ie Governor, or
IN WITNESS WHERE	OF, I have hereunto	set my hand a	nd seal, this
Special Control of the Control	5 10 10 10 10 10 10 10 10 10 10 10 10 10	Tydan a la suba	10 G 13 C 6 R 2 C
Executed in the presence of u			L. S
the the two ends over	14.12.		
		and property	Leader, to
	DIRECTION.		
Send money to me as follows			
10 : 10 : 10 : 10 : 10 : 10 : 10 : 10 :	to		P. O.
	County, Georgia.	market with the following	V P CARREST
* * * * * * * * * * * * * * * * * * * *			
No. 8716 Application for Allowance	Per the Vene Ending October 24, 1884. P. M. L. C. E. F. 19 pitient, D. C. S. C. S. C. Soundy, Della C. C. Timount, S. C. C. C. C. C.	intered on record, MS 1893 MM M M M M M M M M M M M M M M M M M	WARRANT HANDED TO WARRANT HANDED TO Odo, W. Berthon, State Prince, Addition.
unique. No in a partie	1 4 0 4	7 4 1 3	Turt 3
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hillien in the second	a the many	af all comes	out Regimen
The second of the second			a permoner free
		The signach - and	CONTRACTOR OF THE OWNER OF THE PARTY OF THE

. For Applicants Hopetatore Allowed Pensions.

POWER OF ATTORNEY

STATE OF GEORGIA,

COUNTY,) Know all Men by these Presents. That I,	
of	
County, State of Georgia, do hereby appoint.	
of my true	e and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of mone State of Georgia by reason of an injury received as aforesaid in the mill States (or of this State), as stated in the foregoing affidavit; hereb new to receipt in my name for any Warrant that may be issued by the Gov which may be coming to me for the reason aforesaid.	tary service of the Confederate y authorizing my said Attor- cernor, or for any sum of money
IN WITNESS WHEREOF, I have hereunto set my hand and sea day of1894.	l, this.
1004.	
Executed in the presence of us	[F. 9.]
	Maria District
DIRECTIONS.	
Send money to me as follows, by	
to	P. O.
County, Georgia.	
THE ALL STATES OF THE	ได้ รัฐโกร์ โดยกัน
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	at a set a
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Y E GO W	REI O NI E
18 5 2 6 4 40 2 6 8 1	H. H.
	V. H. HARIJSON, Serredury Exerdire Departm ARMANT HANDED TO W. H. C.
1	- 101

STATE OF GEORGIA,)
County, S
PERSONALLY appears AMINICIANT OF DE Half
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 1860; that he enlisted in the military service of the Con-
federate States (or of the State of League) during the war between the
States, and served as a Private in Company of Jeth Regiment
of I attra aphaneration 's Brigade; that whilst engaged in
such military service at the battle ofin the State
of day of 222 1864, he was
wounded as follows: during in a Collection in South
Learthing measthing wille, Sesulting in a
- company fractions of the left thigh
saud crushing the head and ankel
while en renders the leg excentially one
Destablish a Buy was better
The state of the s
Deponent desires to praticipate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory, thereof, and makes application for the allowance to which he is entitled for
the year ending October 26, 1893. I have heretofore been allowed a pension of
dollars, for Disoble & leg
Sworn to and stibscribed before me, this, the
14th day of Massett 1893.)
14 DRated State Condition Sail
Nora-State fully nature of wound or character of disease which causes the disability, and espiain particularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA.)
1) of your)
Lac County:
1, Ordinary of said County,
do certify that I am well acquainted with Philicekok the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this County.
I further certify that
before whom the foregoing affidavits were made and power of attorney was signed, is a
before whom the loregoing annuavity were made and proposed of autority was signed, is
signatures thereto are genuine.
With the state of
Given under my official signature and seal, this / day of Marsu 1893.
- Interpolation
Ordinary De Pall County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
De Kall County.
PERSONALLY appears P.M. Richet of De Ralt
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 1860; 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 , of 9 th Regiment
of La Palallon Volunteers 's Brigade; that whilst engaged in
such military service at the battle ofin the State
of on the day of may 1, 1864, he was wounded as follows: Was in a collision near things villed
wounded as follows: Las in a collision near things villede
resultion in a compound facture of
the thigh, and hele and an hee crushed
rendering the same substitutially and
essentially niceless.
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
Fifty dollars, for the year 1893,
Sworn to and subscribed before me, this, the Am Richard
Mr. Ragedale Cordinary,
NOTE-State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent
of the disability, resulting from the wound or disease.
STATE OF GEORGIA,
De Kall County.
I, M.M.Kagsdali, Ordinary of said County.
do certify that I am well acquainted with &M. Ricket the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 1894.
Antis operation May Rogadale,
Ordinary De Kalk County.

	POWE	R OF A	TTORNI	ΞY.	
STATE OF C	GEORGIA, County MEN BY THESE P		at ,I,		
	Georgia, do hereby ap	of		e and lawful at	torney in fact, for
me and in my nam State of Georgia b States (or of this S in my name for an be coming to me for	e, to receive and receive y reason of an injury tate) as stated in the y Warrrant that may be the reason aforesaids. WHEREOF, I have the reason aforesaids.	received as afo foregoing affida- be issued by the	r amount of mor respid in the mi rit; hereby autho ne Governor, or	ney I may be en litary service of rizing my said A for any sum of	titled to from the f the Confederate Attorney to receipt
day of	<u> </u>	1895.			[I, 8.]
Execute	l in presence of us				
J. 674 16.3		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
•		DIRECT	IONE		
Send money t	o me as follows, by	DIRECT	IONS.		
		to			P. O.
•		County, Geo	rgia,		43.00
(For Those Aiready Enrolled.)	SOLDIER'S PENSION.	Name M. Cie latt	Disability Led	RICHARD JOHNSON, Secretary Executive Department.	WARRANT HANDED TO WARRANT HANDED TO Geo. W. Harrison, State Printer, Alanta.

Dinkett O.

	County.	1		a .	
I,		hereb	authorize		

to receive and rec	eint for the nu				
o receive and rec	cipt for the pe	ension paid ner		st that he r	emit same to
			_by		
at	0.1111111111111111111111111111111111111	•			
	S WHEREOF,	I have hereunt	set my hand	and seal, th	is
day of	*	1896.			
				1.24	[t. s.]
Executed	in presence of t	us)			7
9		3 3 3			
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		19. J. J. J.			
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A A		il II II o			
For Those Aiready Enrolled. No. H6 7	LDIER'S PENSI 1896.	19. 1	33	CH	WARRANT

Name (

County Disability

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
County?	Ru a W of
personally appears Milian	rett of DeKall
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 there	n continuously ever since the
day of 1860; 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 Crivate	in Company Regiment
of Labolo Volunteers,	's Brigade; that whilst engaged in
such military service at the battle of	in the State
of on the	day of 1864, he was
wounded as follows: I it a said	
he regel a Compon	
-let thight and the	
- were erushed, the	
- ibstantially acco	
- riseless,	and many
Deponent desires to participate in the benefit	s of the Act, approved October 24th, 1887,
and the acts amendatory thereof, and makes app	olication for the allowance to which he is
entitled for the year ending October 26th, 1895.	I have heretofore been allowed a pension
of thifty dollar	s, for the year 1894
Sworn to and subscribed before me, this, th	el P.M. Ricket
19" day of the 17 1895	
11 Magsde Ording	asy.
Note-State fully the pature of wound or character of disease who f the disability, resulting from the wound or disease.	ich causes the disability, and explain particularly the extent
•	
STATE OF GEORGIA,	
de Kall County.	
111	
i, MM Rogsdale	Ordinary of said County,
do certify that I am well acquainted with	M. Reellett the
applicant in the foregoing affidavit, and am well	[18] [18] [18] [18] [18] [18] [18] [18]
in his said affidavit are true, and I know he is t	he individual he represents himself to be
and that he resides in this County.	l signature and seal, this
day of the	1895.
day of the	1095.
Amix	Kandale
here	7 2 11 10
Ord	inary Selall County.

For Applicants Heretofore Allowed Pensions.

De Call County,
personally appears P.M. Richett 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
day of 1860; 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 Loof 9 th Regimen
of Tatalion Savolunteers,''s Brigade; that whilst engaged
in such military service in the State of JC, , on the day
of May 1864, he was wounded, injured or diseased as follows:
Was in week on this hoad near
Mings ville & Co fracturing this
here and antill rendering same
Substantially and essentially
useless
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887
and the acts amendatory thereof, and makes application for the pension to which he is
entitled for the year ending October 26th, 1896. I have heretofore as a resident of
De Kall county been allowed a pension of Mifty
Sworn to and subscribed before me, this, the) Phi R
1, A The State of
12 day of 1et 1896.)
Milliagsdale, Ordinary,
Nore-State fully the nature of wound or character of disease which causes the disability, and explain particularly the extens of the disability, resulting from the wound or disease.
STATE OF GEORGIA.
De l'alt County.
I, M.M. Ragsdally in Ordinary of said County
do certify that I am well acquainted with CM Richett the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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
TANK YOUR AND
Anix pour hard here.

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 [L. S.] Executed in presence of SOLDIER'S PENSION RICHARD JOHNSON, INVALID

I,				J	hereby	authorize			, ,
				1		* .			
to receiv	e and re	ceipt for t	he pens	ion paid	hereon	and reques	it that he	e remit s	ame
				, , , , , , , , , , , , , , , , , , ,	by				
atIN	WITNE	SS WHER	POP	I have b					
day of	WIIIWE		CEOF,	1898.		t my hand	and seal,	thin	
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	Executed	d in presen	ce of	5 4 V					Le
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dy Earolled.)	2 64	PENSION.	ø	ch ell	9(2	7	HNSON,	ODED TO	
(For Those Aiready Enrelled.)	64.61	A LID S PENSION.	98.	Rich 474	(Let) b	114 1898	RICHARD JOHNSON, Commissioner of Pensions.	WARRANT HANDED TO CLACK	

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA. Dellall County. Dersonally appears Miliahett of to Kelh 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 1858; 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 Vivil in Company A, of Regiment 's Brigade; that whilst engaged in such willtary service in the State of & C , on the of 1204, 1864, he was wounded, injured or diseased of follows: Year Kings ville & c. in a collision Whice in service had a compound fracture of left thigh rendering - 12 dele LL 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 F.C. Colh county been allowed an invalid pension of Dollars, for the year 189 P.M. Kicket Sworn to and subscribed before me, this, the 1897. POST OFFICE Norz-State fully the nature of wound or character of disease which educed the disability, and explain particularly the extent of the disability, resulting from the wound or disease. STATE OF GEORGIA. County. MIN- Legsde Ce, Ordinary of said County, do certify that I am well acquainted with I M (Ci chett applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this 16 h

Affix your seal here.

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, Deffell personally appears " Millie hett of De lall 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 1833; that he enlisted in the military service of the Confederate States (or of the State of in Company L , of Q th Regiment 's Brigade; that whilst engaged in such military service in the State of A.C. of 12007 1864, he was wounded, injured or diseased as follows: has it a sail roed lactiving rober in service man lie privile to in which he had his lest legand inkle Erushed, rendering of me - Villetautideen and es senticien - Mailers 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 county been allowed an invalid pension of resident of Le Malle Dollars, for the year 189 Sworn to and subscribed before me, this, the PMRESLET STATE OF GEORGIA, Hillach 1 legodaen do certify that I am well acquainted with a Cillic Celeck the applicant in the foregoing affidavit, and am well satisfied that the statements made by him

in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this

County.

POWER OF ATTORNEY. POWER OF ATTORNEY STATE OF GEORGIA, STATE OF GEORGIA, County. County. hereby authorize_ hereby authorize 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 day of___ [L. S.] Executed in presence of Executed in presence of SOLDIER'S PENSIO (Fer These Aiready Enrolled.) RICHARD JOHNSON, SOLDIER'S PENSI INVALID JOHN W. LINDSEY, 1899. INVALID No. 2679 De Walb

For Applicants Heretofore Allowed Pensions.	For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA, Solution County. Dersonally appears M. Richett of Se Kall County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizent and resident of said State, and has resided therein continuously ever since the 12 day of 1833; 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 Sirvate in Company of 1664 Regiment of Volunteers, 's Brigade; that whilst engaged in such military service in the State of , , on the day of 1864, he was wounded, injured or diseased as follows: In a lolling or Crushed Sendering The leg substantiately and	STATE OF GEORGIA, Selicit County. Dersonally appears of Selicit County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizer and resident of said State and County, and has resided therein continuously ever since the day of 9/1/(1833; that he enlisted in the military service of the Confederate States (or of the State of during the war be tween the States, and served as a in Company of Serial Company on the day of 1864, he was wounded, injured or diseased as follows: Substantially service and served or diseased as follows: Substantially service (2112/1621 11 A Red. County states)
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 1899. Sworn to and subscribed before me, this, the PM, Recolor day of the 1899. POST OFFICE East Milesula Noge—State fully the fature of wound or character of disease, which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.	Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of 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 declared to the disability and crylain particularly the state of the disability religing from the wound or character of disease which causes the disability, and crylain particularly the state of the disability religing from the wound or disease.
STATE OF GEORGIA, County. 1. Ordinary of said County, do certify that I am well acquainted with. 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. Given under my official signature and seal, this.	STATE OF GEORGIA, County. I, Ordinary of said County the applicant in the foregoing affidavit, and am well satisfied that the statements made by hin in his said affidavit are true, and I know he is the individual he represents himself to b and that he resides in this County. Given under my official signature and seal, this
day of 1809. Adix your bloom of 1809. Ordinary All Malla County.	day of 1900. Ordinary Ordinary County County
Chullary // /// Canto	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 hereunto set my hand and seal this... day of_ Executed in presence of SOLDIER'S PENSION DISABLED

Orkiel-

Maimed Soldiers.

Voucher No. 9619

Amount \$ 50.

COMPTROLLER-GENERAL.

Audited

Paid to PTH Rickel

For Log desables

ellac > 8.

Included in warrant No.

issued to Treasurer.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
De Kalk County.
Personally appears P. M. Richett of Die 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
day of Anice 1839; 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 &, order the Regiment
of Volunteers, 's Brigade; that whilst engaged
in such military service in the State of S.C., , on the day
of May 1864, he was wounded, injured or diseased as follows:
Had Goot and antile crushed in a
rail road laclision while on transportation
at Kinowville S.C. rendering the les
deletantielle and essentialla more
of avalantacy are continued in the
The second secon
Deponent makes application for the pension to which he is entitled for year end-
ing 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
12" day of Any 1901. Postoffice Cast Atlanta
Il Magsdace Oldinasy
Note.—State fully the nature of the wound or character of disease which causes the disability, and explain partic-
ularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Le Kall County.
I, M. Registale Ordinary of said County,
do certify that I am well acquinted with P. M. Richest the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this 12-11
day of 1901.
(AMI)
ordinary Le Math County.

No.7619 allanta, Sa, Meh 28 is go. STATE OF GEORGIA, EXECUTIVE DEPARTMENT: Mr. P. Mo Nickel of A Mulh 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 Leg ausables He is entitled to receive the sum of Thefty for such disability, the same being the allowance due for the year ending October 24, 48 Q 0, The Treasurer will pay the same and hold his receipt on this you here and return same to Executive Department for warrant, By the Governor, RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

YEAR 1890 COUNTY DEKalb.

WHEN AND WHERE BORN? Resident of ga., since March 1857.

ENLISTED WHEN AND WIERE?

RANK. Private.

COMPANY AND REGIMENT? Co. A, 9th ga. Battn., Ga. Artillery Vols.

NAME OF CAPTAIN AND COLONEL? A. S. Talley, Comm. Off.

WOUNDED? Near Ringsville, S. C. Leg disabled, in railroad accident.

CAPTURED, MIEN AND MICHARY

RELEASED.

WHEN IN WHIPL OUT REND THED?

IF NOT IRESULT AT CURRENDER, WHIRE WELL YOU?

DIEP, WELL AND WALKE?

BURIDD.

WITNESSES. A. S. Talley C omm. Off.

Ricket, P.M.

1891.

Maimed Soldiers.

Voucher No.

Amount & 5000

Paid to Om Cliestes.

For Disabled by

Jely 13 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanti

YEAR 1895 COUNTY Dekalb

WHEN AND WHERE BORN? Resident Ga since 1860

ENLISTED WHEN AID WHERE?

RANK. Private

COMPANY AND REGIMENT? Go A Ga Artillery Battn. Vols

NAME OF CAPTAIN AND COLONEL?

WOUNDED? May, 1864 - at Kingsville, S.C. - in a railroad collision to be in the service, received a compound fracture of the left thigh, heel and envile were crushed, rendering the leg useless. CAPTURED, WHEN AND WILLLE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT MURRENUM, WHERE WERE YOU?

DIED, WHEN AND WHERE?

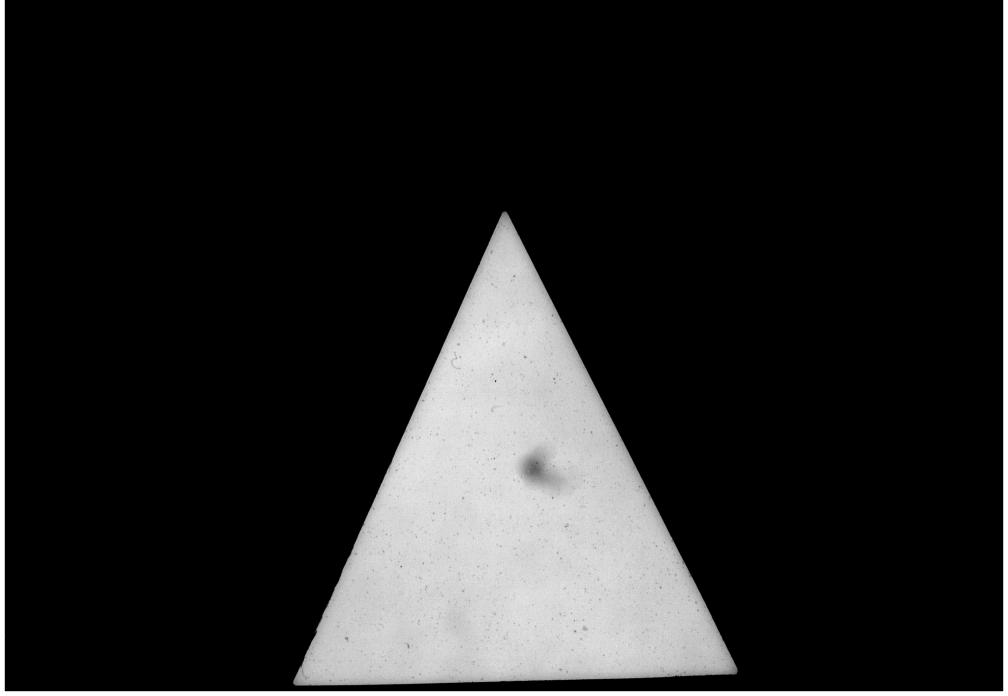
BURIED.

WITNESSES. Mon

Allanta, Sa Jehr Bisgs STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Mr. P. M Riskels 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. 11, 1889, and the same having been examined and allowed for De bybur Dollars He is entitled to receive the sum of. for such disability, the same being the allowance due for the year anding October 24, 1891. The Treasurer will pay the same and hold his receipt on this reacher and return same to Executive Department for warrant. By the Governor, WHamson SEC'Y EXECUTIVE DEPARTMENT. RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia

per above voucher, this_

Dollars



Bley. Robert B. E. Nach Co &	NOTES: 1. you 2.	of	eredit. Swyrn	resides i service;
Confederate oldier's Application for Act 1910—As Amended by Act of 1919. The Robert 13, Ridley	Before any questions are answ. You do solemnly swear that give shall be the whole truth. Additional affidavits may be at All affidavits must be made to must be certified by such Ordin.	We Allegen	rn under my hand and official	resides in said county. That I also know service; that they are both residents of sai
apany B iment 4 Ga Juff	vered the Ordinary shall swear applic you will true answers make to each o So help you God.". It tached if blank spaces are insufficient fore the Ordinary of the county in w ary.	County.	oredit. Swykra under my hand and official seal of office this. He day of the law of the	resides in said county. That I also know the bridging the wit service; that they are both residents of said county and were fully sworn by me before the fifther it.
	Applicant and witnesses in the each of the questions asked was reficient.		ir statements are entitled	the witness by sworn by me before significant
J. W. LINDSEY, Commissioner of Pensions.	following and the e		to full fa	signing the

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,
autalo county.
Robert B. Ridley of said State and County, hereby applies
for the pension provided by Act of 1910, as seended by Act of 1919, to Confederate Soldiers, and submits
his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to
make to the questions propounded, answers as follows, to-wit:
1. What is your name and where do you reside? (Give County and Post-office)
Robert B Ridly DeKall County Decatur Ga
2. How long and since when have you been a continuous resident citizen of this State?
76 geans all My life
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from
1861 to 1865 + Considerales States
4. When and where, and in what Company and Regiment the you enlist! (Give the arm and class of Service) June 15-1861 Norfall Va. Complany B-4 Galley.
5. How long did you remain in the actual military service with said Company and Regiment (Give date of discharge) 12 18 18 18 18 18 18 18 18 18 18 18 18 18
6. When and where was your Company and Regiment surrendered or discharged from the Service?
Afril 9 47865 Afromatty C.H. Va
7. Were you actually present with your command when it was surrendered or discharged?
8. If you were not actually present, state specifically and clearly where you were Privaces
· ·
a. Where was your command when you left it? did not heave
and the second s
b. When did you leave the command?
c. For what cause did you leave? during den
d. By whose authority did you leave!
e. For how long was your leave granted? In what way?
f. Why did you not return to your command after leave expired? did Mo Stave
g. In what way were you prevented?
h. What effort did you make to return?
i Were you captured during the war! Was Mot
j If so, when, and where? In what prison were you held and when were you released?
9. Are you drawing a pension of any amount from this State or the United States? I am Ho
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
not allowed? France Up
Sworn to and subscribed before me, this the
1010 Moth willed
(day of XIIIII day ber 19.5)
Janus Plylarge Ordinary)
of Deflatt County
(SEAL)

STATE OF GEORGIA,
Fulter COUNTY.
William Hogan of said State and County is hereby presented
as a witness in support of the application of
by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to
make to the questions propounded, answers as follows:
1. What is your name and where do you reside?William_Hogan_ Heard_Co., Ga
The state of the s
2. How long and since when have you known Robert B. Ridley the applicant? *
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State,
and how do you know? DeKalb Co., Ga. and lived in Ga. ever since I have
known him
4. When, where and in what Company and Regiment didRobert_B_Ridley_enlist during)
war from 1861 to 1865? (Give date and place.) June 1861, Augusts, Ga., Co. "R" 5. How did you obtain your information of this Service?
I was member of same company
6. How long within your own personal knowledge did he perform actual military service with this
Company and Regiment? (Give date)From enlietment to surrender
7. When and where was his command surrendered or discharged (give date and place)
Apponattox Court House, April 1865
8. Were you personally present at the surrender 1 NQ
9. If not, where were you and how came you there? Pt. Lookout, Md. as priso ner
captured April 2, 1865 at Petersburg . just asvan days bafore surrender
10. Was the applicant personally present with his command at surrender!Yea
11. If not where was he and how came him there! Never left command until after surrende,
12. When did he leave his command?Where was his command
when he left it !For what cause did he leave!
By whose authority did he leave and how
long was he granted leave?How do you know
all that you have stated to be true? If of your own knowledge, tell clearly and specifically_I_was_mamber
of same company and saw him constantly in service until April 2, 1865 when I was captured 13. In what way was he prevented from returning to his command?
How do you know? 14. What effort did he make to return to his command and how do you know?
14. What effort did he make to return to his command and now do you know?
15. Was applicant captured as a prisonerNoIf so, when and where?
15. Was applicant captured as a prisoner is so, when and where and and
when released
Sworn to and subscribed before me, this the) Million 24-
8th day of October 1919 I hereby certify that I know the witness
resident of heard to Go and were dela
Ordinary sworn by me before signing the for egoin affidavit; that he is truthful and that
of Fulton County. wor thy and his statements are entitled full faith and credit.
(SEAL)

Ordinary Fulton Co., Ga

*LIVELY AND WHERE BORN? A resident of Georgia since birth, 1843, 76 yrs.

EXLISTED WHEN AND WHERE? June 15, 1861, Norfolk, Va.

RANK.

COMPANY AND RECIMENT? Co. B. 4th Ga. Regt. Infan try.

NAME OF CAPTAIN AND COLONAL?

WOUNDEDT

CAPTURED, WHEN AND WHERET

RELEASEDT

WHEN AND WHERE SURRENDERED April 9, 1865, Appointtox, Va.

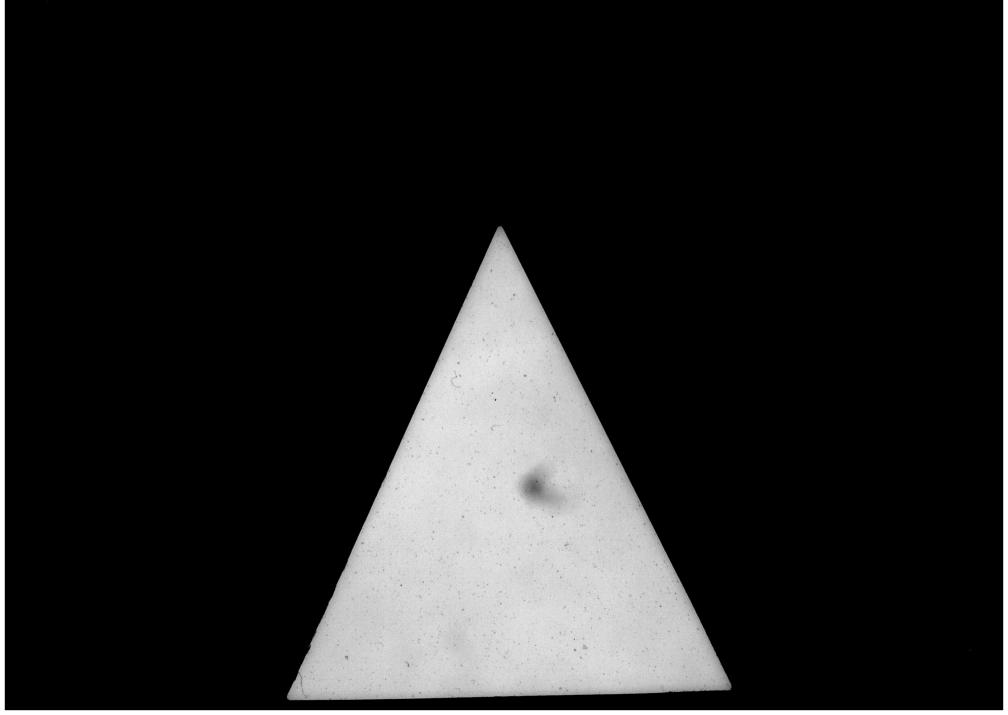
IP OT PRESENT AT SURRENDER, WHERE WERE YOU.

DIED, WHEN AND WHERE?

BURIED.

William Hogan - Same command

Nodata



Confederate Soldier's Application.

UNDER ACT 1910.

County DeKall Name G & Robertson

Regiment Cobbs Legion Dy

Confederate

Confederate

Soldier's Application.

UNDER ACT 1910.

Company

Company

Regiment Cobbits Region

Approved

Approved

Approved

Approved

Approved

Commissions Frances

Full ROSTER OFFICE

CHAS P EVERY State Printer, Atlanta.

Questions for Applicants to Answer. STATE OF GEORGIA,

Defall County.
- 4. Mobertson straid State and Country land
for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions
propounded, answers as follows, to wit: 1. What is your name and where do you reside? (Give County and Post-office)
Go Robertson Desalle Go Ga Killionia Ga
2. How long and since when have you been a continuous resident citizen of this State? [4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
3 Did you enlist in the Army of the Confederate States or of the Organized Militia of this State
from 1861 to 1865?
4. When and where and in that Company and Regiment did you enlist? (Give the arm and class of Services August 1961 - Ducatur Ga Company 6 Cown Fig.
5. How long did you remain in the actual Military Service with said Company and Regiment?
(Give date of discharge) 4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
Africal 9 14/865 Appromatty at Va
7. Were you actually present with your Command when it was surrendered or discharged? I was
8. If you were not actually present, state specifically and clearly where you were
British
a. Where was your Command when you left it? did not have commo
b. When did you leave the Command?
c. For what cause did you leave?
d. By whose authority did you leave?
e. For how long was your leave granted? In what way?
f. Why did you not return to your Command after leave expired?
g. In what way were you prevented? Survivules
h. What effort did you make to return?
i. Were you captured during the war? Was NOS
j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself
and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) I during the 50 acms of \$800.00
1 muly - Hal \$125 20 1 Hog Val \$1020 Those Hold
Garally 835-00 Potal 8/97,00
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? Mostring
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). I durn
Value 3 500 50 Miles 125 Ball 10 43-
Leads Value \$35-20 Potal Val & Ghase
" and the source derived bave
you? have no meen only why I mill on form
13. Are you drawing a pension of any amount from this State or the United States?
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?
Smoon to and subscribed before the Atients of the A
of the think of the state of th
Transa of June 1911
June 1 June 1 Ordinary,
County.

STATE OF GEORGIA, Defraction County.	STATE OF GEORGIA. County.
as a witness in support of the application of G. R. Roll Wilson for the pension provided	Personally before me comes Jumillary & DEhuming who on oath
by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:	the applicant for pension and we know the property that is now in the use, possession and control of himself and of its cash value to wit: (Make List by items and value.)
1. What is your name and where do you reside? J. A. Argo Lilloulla Dikale County Ga 2. How long and since when have you known G. A. Arbertson, the applicant?	1. What property, if any, has been sold or given away by the applicant of his wife since 4 Nov
3. Whose does he now reside, and since when has he been a bona fide, continuing resident in this	1908? (State it fully by items.) Management 1908? 2. When and to whom was it sold or given to?
State and how do you know all Raw County all his life 4. When, where and in what Company and Regiment did J. Robertson enlist during	3. What was the price paid or stated to be paid? 4. What relation is the party to applicant? 5. What disposition was made of the proceeds of the sale?
war from 1861 to 1865? (Give date and place) Augst 187861 Dicatum Ga Company & 5. How did you obtain your information of this Service? J was a Mumber of Service?	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
6. How long within your own personal knowledge did he perform actual military service with	James Plyer of Defening County.
this Company and Regiment? (give date) A POM Angel (1861 - 6 April 5 1865 - 7. When and where was his Command surrendered or discharged (give date and place)	ORDINARY'S CERTIFICATE.
8. Were you personally present at the Surrender? 9. If not, where were you and how came you there?	STATE OF GEORGIA, County.
10. Was the applicant personally present with his Command at surrender? At Long. 11. If not where was he and how came him there?	I. Ordinary of said County, certify that I know the applicant of the county. That I also know the said County. That I also know the witness swearing to the
12. When did he leave his Command? Wid WA LLOUS. Where was his Command when he left it? Lid Not Leave. for what cause did he leave? Survey A	service and J. M. Miller. E. D. Le Louis and
long was he granted leave? How do you know	Tax Returns of Wholbert shows that I Robertsun, and with value for tax is in 1908 8/4.95 for 1909 8/4.50 for 1910 8/385
all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) Was firewall Snow it of my fund Snowledge Swar Samuel Snowledge Snowled	Sworn under my hand and official seal of office this 2 day of 101/
How do you know? Was Orlean 14. What effort did he make to return to his Command and how do you know?	NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God." 2. Additional affidavits may be attached it blank spaces are insufficient. 3. All affidavits must be made before the Ordinary and certified by him. 4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders
15. Was applicant captured as a prisoner AO If so, when and where?	All amdavits 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 freeholders unnecessary.
Sworn to and subscribed before me, this the	
anus R. George Ordinary,	

...County.

Georgia, DeKalb County.

Personally appeared before me, the undersigned, George L. Robertson, and being duty sworn, deposes and says: That during the years, 1907, 1908, 1909 and 1910, he and his son Thoms J. Robertson, both owned property and he, deorge L. Robertson returned the same for taxes in his own name and not in the name of himself and his son, that said Th mas J. Robertson owned 50 acres of the property so returned.

Sworn to and subscribed before me, G. L. Robertson this 26th day of Outober, 1911.

ordinary, Dekalb County, Georgia.

July.

NAME Robertson, G. L.

4 YEAR 1912

COUNTY DeKalb

THEN AND WITERE DORM? May 8, 1837 - Georgia.

BALLUTED MEN AND WHETE? August 1, 1861 - Decatur, Georgia.

FAUL

COMPANY AND REGIMENT? Company C, Cobb's Legion

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED?

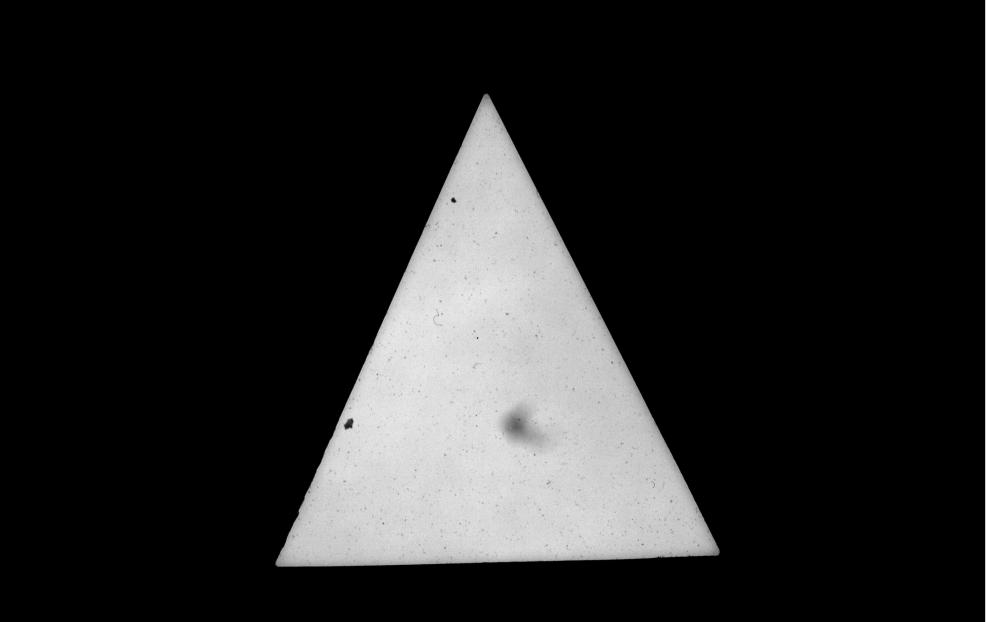
WHEN AND WHERE SURRENDERED? April 9, 1865 - Appointtox Court House, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED. WHEN AND WHERE?

BURLED2

WHINNESSES. J. L. Argo - same Company and Legion -- No data.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

now all Men by these Presents, That I

C

ofmy 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.

my hand and oblige, WHEREOF, I Executed in the presence WITNESS



Robertson, Harriett

Mo. 1180

1891.

Widows' Pension

Mus Harriet Rabentson De Kalh COUNTY.

\$200.00.

Warrant Issued

1891

AND HANDED TO

tieo, W. Harrison, State Printer At

POWER OF ATTORNEY."

STATE OF GEORGIA,

County.

Know all Men by these Presents, That I,

(

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

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

Executed in the presence of us

[L. S.]

DIBECTIONS

If allowed, send amount by

____to

me at

, and oblige,



1891.

276. 180

Widows' Pension

Widows' Pension

Warrant Issued

Normant Issued

1891

Affidavit to be Made by the Widow.

Form No. 1.

CENTRAL SANCTON			
STATE	OF	OFC	DOLA
SIAIF)H((=1/2

0 72 11	In per	son came before me, the	undersigned Ordinary
County of De Rall	in and fo	or the County of	Raff
Mrs. Hearrich Roberts	m,	who being sworn accordi	ng to law, says under
oath that she is the widow of Jane	WM	(Cohertson	, who was a soldier in
the service of the Confederate States, and se	rved as a ir	nember of Company	C of the
63" Regiment of Ge	orgi	Volunteers; th	at he enlisted in said
carries on or about the		(dan	.0
leon federale Army up to	air	ne! 1864	That while in the
Army, he was on the	lay of	186	, (See Note No. T)
our was serve	1/2	com mis	Comman
while near Her.	e seco	law Moi	entain
on account	4.0	ichness	- was
brought to At	tan	ta and	sent to
his home in	De	lott Con	inty.
where he ares	red	on the	12" of france
1864. was very	1 22	ok and	weak
when he arrive	110	ran ha	cough
continually	rill	mis dea	the from
The disease on Sept. 1864.		ne His	lay of
11.1004			

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 13 th day of 1848, and that she has resided in Georgia continuously since the 1820; 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 of locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the 13" day of Affric 1891. Hearne har her her terms.

11. Millo godale.
Ordinary.

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

Affidavit for Three Witnesses.

ST	ΔΤΕ	OF	GFC	RGIA

County of De Roll in and for said County, witnesses M. Chopman

In person came before me, the undersigned Ordinary

(each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own, personal knowledge, Mrs. Harriet Noter ten, of the Country of De Kall State of Georgia, is the widow of James M Ocohester, who was a soldier in

Company C of the 63 Regiment of Lorgia Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or day of Oet 1867 That while in said service, or by

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

Chat he was taken sich while while on the retreat through Georgia de left the Command near Cennesaw Mountain was sent to Attanta and carried to his home in he Roll Country Where he died in Sept 1864. Chat fil heed by provid fever hickorights which resulted in his death as stated above.

soldier during the service, and that she has not intermarried since his death, and that she resides in Dellatt County of the State of Georgia.

Sworn to and subscribed before me, this, the l

day of furil, 1801. Millatopsdale Ordinary.

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

STATE OF GEORGIA.

1, MMRogidale

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

mallogeda G. SEAL

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 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 Nall 1. M.M. Noge dace. Ordinary in and for said County of He Rall State of Georgia, hereby certify that I am acquainted with Mrs.

Restrict Roberton 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, 1850, and has not lived out of the State since that date. That she is the fas A. Robertson deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893. In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the Ordinary. POWER OF ATTORNEY. STATE OF GEORGIA. De Kall KNOW ALL MEN BY THESE PRESENTS, That I, My Harriell Robertson County in said State, do hereby appoint my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. In WITNESS WHEREOF, I have hereunto set my hand and seal, this day of Feb Harrielt x Robertson Executed in the presence of us: On discusaDIRECTIONS. Send amount by me at , and oblige

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,	Dersonally comes Mrs.
County of Se talk	Carriett Roberson
who being sworn, says on oath, that she is a bor	
ale Kall State of Geo continuously ever since all her li	rgia, and that she has resided in said State 18. That she is the Widow of
Jas. A. Robertson	who was a Soldier in Company
Volunteers, that he enlisted in said Regiment	Regiment of Tay
1862 and served in the Army up to	1864. That he lost his
life on the 2/2 the day of w	Seft 186 4 (State here
full particulars of the husband's death, when, a	
service came hor	ne on sick
Sarlis home in	
on the 22d day 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#2; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

day of Stel 1894.

Millage del, Ordinary.

Post-office Carrola. Sa.

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

Dersonally comes Mrs. Farriet Robertson

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

De Malt State of Georgia, and that she has resided in said-State continuously ever since

1899 That she is the Widow of

Lance & Rokerkon

who was a Soldier in Company

of the 683d Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of

1869 and served in the Army up to Access 1864 That he lost his

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

21 day of September 1864.

The way thin very sich near Muriella La, left his command near attanta, and went to his home arriving there on The 12th I Time 1864. He was never able to be up his his death on the

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1848; that Georgia is her home and she reside in this State 23d day of December, 1890, and his not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893

Sworn to and subscribed before me, this 17" day of Jeh 1893. He Heinet Robertson
1893. Post-office

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA. Dersonally Comes Mrs. County of De Kall

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 \\ \mathread \(\) 1825 That she is the Widow of James & Robertson Regiment of Ja Volunteers, that he enlisted in said Regiment on or about the month of 1864 and served in the Army up to 1864 That he lost his full particulars of the husband's death, when, where and from what cause.) (leontracted some chronic disease while in service and died after reacting home indetall courts ow late above named

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1848, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn toand subscribed before me, this MM Jogsdale, Ordinary. Post-office Panola, &

Mrs Harriet Robertson

[L.S.] Executed in the presence of DOW'S PENSION

Delait State of Georgia books and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. the rice of Robertson the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of Lances of Mohertan deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896, In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this The Magadree , Ordinary. POWER OF ATTORNEY. I Harriet Colerlan hereby authorize to total who as of to receive and receipt for the pension paid hereon and request IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1897. Lea La & Colore [1.8] Executed in the presence of med ogsdale, UIDOUI'S PENSIO

Lal Minnay Ucleratolas Vilonen Lenginis.

STATE OF GEORGIA, Dersonally Comes Mrs.
County of De Kall Karrit do Gertson
who being sworn, says on onth, that she is a bona fide resident of said county of Secretary State of Georgia, and that she has RESIDED in said State continuously ever since All Residue 18 That she is the Widow of
Volunteers, that he enlisted in said regiment on or about the month of AN
1869 and served in the Army up to Self 1864 That he lost his life on the 2/1 day of Self 1864, (State here
full particulars of the husband's death, when, where and from what cause.)
Service had come home on sich
furlough in fine and diet of
The disease on late given abour,
· · · · · · · · · · · · · · · · · · ·
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 46.
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
Sel Kalle 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 / Marvial Robertson
MM sasselly Ordinary.) Post-office Causta, La,

For Widows Heretofore Allowed Pensions.

		GEORGIA,
County	of	DeKain

Personally Comes Mrs.

County of We Kain Harriet Colection
who being sworn, says on oath, that she is a bona fide resident of said county of
De Kall State of Georgia, and that she has RESIDED in said State
continuously ever since 11 gust 13th 1825 That she is the Widow of
Comes A Roke its a who was a Soldier in Company
. C of the 631d Regiment of La
Volunteers, that enlisted in said regiment on or about the month of Caric Ja years)
186 / and served in the Army up to Line 186 4 That he lost his
life on the 2121 day of Left 1864, State here
full particulars of the husband's death, when, where and from what cause.)
Sook a violent shell if becough som
which he died on dois production,
· · · · · · · · · · · · · · · · · · ·
Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,
and that she has never married since his death aforesaid, that she became his wife in the year 1844 2.
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 County for the year ending February 15th, 1896, and now apply for
the pension provided by law for the year ending February 15th, 1897.
the pension provided by the of the year and grant and the year and year
Swern to and subscribed hefore me this

Sworn to and subscribed before me, this	1 1
1. 4 day of lan 1897.	+12720
Millia Capallico, Ordinary.	Post-office

POWER OF ATTORNEY. State of Georgia, De Kall I Harrich Robertson hereby authorize to receive and receipt for the pension paid hereon and request IN WITNESS WHEREOF, I have hereunto set my hand and seal, this Harries X Robertson [1. 8.] Corpolace, Odinasy, For year ending February 15th, 1898. PAID TO ALL HATPIEU ROBERT SON Tellalb cours. PENSION RICHARD JOHNSON, WARRANT ISSUED 180081 NO. 25-84 CIDOW'S

POWER OF ATTORNEY. State of Goofgia, County. I Harrier Robertson hereby authorize W. Ko. 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 Regadge Ordinary CLIDOW'S PENSIO RICHARD JOHNSON

1899

NO.3642

WARRANT ISSUED

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs. County of Delach Garries Refertson
who, being sworn, says on oath, that she is a bona fide resident of said county of State of Georgia, and that she has resident in said State
continuously ever pince (9 14 11 11 1825) That she is the Widow of
of the 63 Regiment of Lay
Volunteers, that he enlisted in said regiment on or about the month of Cel
186 2 and served in the Army up to 1864. That he lost his
life on the 22d day of Sept 186 & (State here
full particulars of the husband's death, when, where and from what cause.)
Le contracted disease in Mu war
had got home and dief of
tyce cough at this home in A ella
Leo Carallana
· · · · · · · · · · · · · · · · · · ·
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 44 8.
I have been allowed a pension as a resident of Al Kall County for the year ending
February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.
Sworn to and subscribed before me, this darriet Robertson
131 Augustale, Ordinary.) Post-Office Paralla,
State of Georgia, Nellali, County. Ordinary of said County, certify that I am well acquainted
with Mrs. Harriet Robertson who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since theday of18
Given under my official signature and seal this the 124 day of Hell 1898.
UM Legslace,
Official Seal. Ordinary of Relath County.

For Widows Heretofore Allowed Pensions.

	en Robertson
Aekalk who, being sworn, says on oath, that she is a b	oona fide resident of said county of
continuously ever since 18 18	25 That she is the Widow of who was a soldier in Company
OC of the 634 Regiment of	Ga
Volunteers, that he enlisted in said regiment on or about the month of 1804 and served in the Army up to	186 4 That he lost his
life on the day of Acc	1864 (State here
full particulars of the husband's death, when, where and from what cause.	Hickoryha
and died in De Kall les	
	<u>*</u>
Deponent swears that she was the wife of said deceased soldier, during his service she has never married since his death aforesaid, and that she became his wife ip.	e in the army as a soldier, and that
I have been allowed a pension as a resident of Destall	County, for the year ending
February 15th, 1898, and now apply for the pension provided by law for the ye	ar ending February 15th, 1899.
Jay of Jan 1899. Carrier	mark Cobertson
Mill	Pariola
State of Georgia, County, Ordinary of said Coun	ty, certify that I am well acquainted
with Mrs. Harries Notherson who ma	de the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she re- has continuously resided in this State since the day of	epresents herself to be, and that she
	y of fan 1899.
Official Seal Ordinary of De	Kalh County.

OWER OF ATTORNEY.

POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA, STATE OF GEORGIA. I, barrien Robertonbereby authorize & M. Miller of Della Ch hereby authorize 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 16 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this I'M Harries & Robertsa [L. S.] Executed in presence of Executed in presence of W M Corley For year ending February 15th, 1900. Mrs. Harriet Cherten. See Ra U. County, Widow of S.A. Cherten. WIDOW'S PENSION WIDOW'S PENSION JNO. W. LINDSEY, WARRANT ISSUED NO. 350 1901.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of relation galliely to jeet ken
who, being sworn, says on oath, that she is a bona fide resident of said county of
State of Georgia, and that she has RESIDED in said State
continuously ever since 18.2. That she is the Widow of who was a soldier in Company
of the (3). Regiment of IA
C of the L St. 1 Regiment of CT.
Volunteers, that he enlisted in said regiment on or about the month of
particulars of the husband's death, when, where and from what cause
And and linear and took his course.
and lied mance they do all lands
Level 1. 13 list's home in he lath levely
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 184/8
I have been allowed a pension as a resident of V. County for the year ending
February 15th, 189 , and now apply for the pension provided by law for the year ending February 15th, 1900.
Sworn to and subscribed before me, this Any of 1000. Post Office Post Office
Alay of Alay of Post Office
The Cold Color, Ordinary.
State of Georgia, } in the last con-
County. Ordinary of said County, certify that I am well acquainted
with Mrs. 42111, Cilcilian, who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the day of 4 (1) 18.25
Given under my official signature and seal, this the day of 1900.
(Official)
Seal. Ordinary of County.

for widows heretolore allowed rensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of Se Nall	Harriet do heckon
and the second s	
what haing awarn save on oath	that she is a bona fide resident of said County of
0) 1/2 1/4	
State of	Georgia, and that she has RESIDED in said State
continuously ever since July 1825	
A. Robertson	
1201	who was soldier in Company
C of the 6371	Regiment of
Volunteers, that he enlisted in said regiment on or about the n	nonth of force
186 4 and served in the Army up to. Sept	186 4 That he lost his
life on the day of	186 4 (State Tie)e
particulars of the husband's death, when, where and fro	m what cause)
Diseased died of	dichemidan an
Diseased died of	and the second second
vivs mone	
	and the same of th
· · · · · · · · · · · · · · · · · · ·	The state of the s
Deponent aways that she was the wife of said deceased soldier	during his service in the grow as a coldier and that
Deponent swears that she was the wife of said deceased soldier,	
she has never married since his death aforesaid, and that she be	came his wife in the year 1846,
	came his wife in the year 1846,
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of	came his wife in the year 18 1/2 S, County for the year ending
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Sebruary 15th, 1 100, and now apply for the pension provides	came his wife in the year 18 1/2 S, County for the year ending
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Septracy 15th, 1/22, and now apply for the pension provides	came his wife in the year 18 4/8, County for the year ending led by law for the year ending February 15th, 1901.
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of February 15th, 1/22, and now apply for the pension provide Sworn to and subscribed before me, this	came his wife in the year 18 4/8, County for the year ending led by law for the year ending February 15th, 1901.
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of February 15th, 1/22, and now apply for the pension provide Sworn to and subscribed before me, this	came his wife in the year 18 4/8, County for the year ending led by law for the year ending February 15th, 1901.
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of February 15th, 1/22, and now apply for the pension provide Sworn to and subscribed before me, this	came his wife in the year 18 4/8, County for the year ending led by law for the year ending February 15th, 1901.
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of February 15th, 1/02, and now apply for the pension providence of the second subscribed before me, this day of day of Post	came his wife in the year 1848, Place County for the year ending . County for the year ending February 15th, 1901. Arriver Robertson Office Lie Horized,
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of February 15th, 1/02, and now apply for the pension providence of the second subscribed before me, this day of day of Post	came his wife in the year 18 4/8, County for the year ending led by law for the year ending February 15th, 1901.
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Description of Sworn to and subscribed before me, this day of Mary 1901. Post State of Georgia,	came his wife in the year 1848, Place County for the year ending . County for the year ending February 15th, 1901. Arriver Robertson Office Lie Horized,
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Description of Sworn to and subscribed before me, this day of Man 1901. State of Georgia, Del Manh County. Ordinary	came his wife in the year 18 4 8, Place County for the year ending . County for the year ending February 15th, 1901. Arrice Robertson Office Lie Horizon, A. 1 M. Rogedale, ary of said County, certify that I am well acquainted
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Description of Sworn to and subscribed before me, this day of Mary 1901. Post State of Georgia,	came his wife in the year 1848, County for the year ending Led by law for the year ending February 15th, 1901. Arried Rosella, Office Let Berried, 1 M. Magadale.
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Defence o	came his wife in the year 18 1/8, County for the year ending led by law for the year ending February 15th, 1901. Arried Robertson Office Let Horsella, In. 1. M. Royadale, ary of said County, certify that I am well acquainted , who made the above affidavit and am satisfied
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Separate	County for the year ending County for the year ending Led by law for the year ending February 15th, 1901. Arrich Robertson Office Let Horsela, An I May Adale, ary of said County, certify that I am well acquainted who made the above affidavit and am satisfied dividual she represents herself to be, and that she
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Description of	County for the year ending. County for the y
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Separate	came his wife in the year 18 4 8, County for the year ending. County for
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Separate	County for the year ending. County for the y
she has never married since his death aforesaid, and that she be I have been allowed a pension as a resident of Separate of Se	came his wife in the year 18 4 8, County for the year ending. County for

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Le hall farlich to bertan
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 182,5. That she is the Widow of
who was a soldier in Company
C of the (3)A Regiment of La
Volunteers, that he enlisted in said regiment on or about the month of
1864 and served in the Army up to 1864 That he lost his
life on the 21 day of deff. 18 @ 1/2 (State here
particulars of the husband's death, when, where and from what cause)
Had some disease and took hie cought
and died in afece days after
seculing his hone in he fall Condy
A.
100
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 4/8
I have been allowed a pension as a resident of Section County for the year ending
February 15th, 189 4, and now apply for the pension provided by law for the year ending February 15th, 1900.
Sworn to and subscribed before me, this Larriet X /10 hestron
rlay of All1900. Post Office
State of Georgia
State of Georgia,
County.) Ordinary of said County, certify that I am well acquainted
with Mrs. Harlie Cale Call , who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the day of Q (10, 18, 23)
Given under my official signature and seal, this the day of day of 1900.
(Official)
Official Seal.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	reisonany comes wirs.
County of de Nall 14	errich do bertson
who, being sworn, says on oath, that al	e is a bona fide resident of said County of
	a, and that she has RESIDED in said State
continuously ever since dry 1825	
. St. Robertson	who was soldier in Company
C of the 6371 Res	giment of
	1
Volunteers, that he enlisted in said regiment on or about the month of	
186 4 and served in the Army up to Sept	186 / That he lost his
life on the day of	1864 (State here
particulars of the husband's death, when, where and from who	it cause)
Diseased died of the	on confuso as
no none	
	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	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 h	18 wife in the year 184 (),
I have been allowed a pension as a resident of Ale	County for the year ending
February 15th, 1/00, and now apply for the pension provided by	aw for the year-ending February 15th, 1901.
Sworn to and subscribed before me, this	Sees of
g day of an 1901. Lar	rich & Molecta
day of 1901.	- much verso
Millogodale Ordinary. Post Office	Lichonia, Fa.
State of Gooding	M. M. Rogsdale.
De Kall County. Ordinary of s	aid County, certify that I am well acquainted
with Mrs. Karieh Robertson w	no made the above affidavit and am satisfied
that the facts therein stated are true, and I know she is the individua	1. 1
has continuously resided in this State since theday of_	July 0 1825
Given under my official signature and seal, this the	1 day of Jan 1901.
Im	Magsdale
Official	0 70 08
(Seal.) Ordinary of	He / Call County.

STATE OF GEORGIA, STATE OF GEORGIA, · DeKall I. Harrier Robertson E. Patterson of Dul Maskorrier Robertsen hereby authorize , hereby authorize 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 Executed in presence of Executed in presence of Lagsday Orkinasy, WIDOW'S PENSION WIDOW'S PENSIO Mus Jassier Coberts To Those Heretofore Paid. WARRANT ISSUED ARRANT ISSUED JOHN W. LINDSEY, JOHN W. LINDSEY 1903.

ror widows heretoiore 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 State of Georgia, and that she has RESIDED in said Stafe
contingously over since \\\ \(\frac{1}{2} \) 1825 . That she is the Widow of
who was a soldier in Company of the 63 rd Regiment of La
Volunteers, that he enlisted in said regiment on or about the month of
1864. That he lost his
the on the Ly day of Stept 1864. (State here
Particulars of the husband's death, when when conserved reacting the seaching of this stand in Secretary after seaching of hice or aging to Kath county 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, and that she became his wife in
the year 18 44 8.
I have been paid a pension as a resident of Le Kall 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 13 day of X 1 1902. Harries X Robertson 11/1/Ragaraa (A.C., Ordinary.) Post-Office
State of Georgia, 1. M. M. Ragsdae; De Kall County Ordinary of said County, certify that I am well
State of Georgia, 1. M. M. Ragsdae; De Kall County Ordinary of said County, certify that I am well
State of Georgia, 1. M. M. Ragadae;
State of Georgia, J. M. Ragslae, Gounty. Ordinary of said County, certify that I am well acquainted with Mrs. Havily Robertson, 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
State of Georgia, Gently, Ordinary of said County, certify that I am well acquainted with Mrs. Harrich Robertson, 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 Cocce 1825
State of Georgia, Gounty. Ordinary of said County, certify that I am well acquainted with Mrs. Harvel Askerson, 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 County of the state of t
State of Georgia, Gently, Ordinary of said County, certify that I am well acquainted with Mrs. Harrich Robertson, 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 Cocce 1825

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,	Garrier Robertson
who, being sworn says on oa	ath, that she is a bona fide resident of said County of
Se Kall State	of Georgia, and that she has RESIDED in said State
onlinuously ever since Aug 1823	. That she is the Widow of
A Robertson	who was a soldier in Company
C of the 63 d	
	The state of the s
Volunteers, that he enlisted in said regiment on	
	186 4. That he lost his
ife on the 2/ day of	of Sefs 1864 (State here
particulars of the husband's death, when, where and	from what cause.) Died To
Hickoryha jusy	after reading he
0 0	()
* ***	
<u> </u>	
soldier, and that she has never married since h	deceased soldier, during his service in the Army as a
oldier, and that she has never married since he year 18 $\#\mathcal{S}_{t}$. I have been paid a pension as a resident o	is death aforesaid, and that she became his wife in
he year 18 $\#\mathcal{S}_{t}$. I have been paid a pension as a resident o	is death aforesaid, and that she became his wife in
soldier, and that she has never married since has year 18 # 8. I have been paid a pension as a resident of year ending December 31, 1902, and now apply	his death aforesaid, and that she became his wife in
soldier, and that she has never married since to the year 18 # 8. I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903.	f. A. Malk County for the for the pension provided by law for the year ending
soldier, and that she has never married since he year 18 # 8. I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903.	f. A. Malk County for the for the pension provided by law for the year ending
soldier, and that she has never married since to the year 18 # 8. I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903.	f. A. Malk County for the for the pension provided by law for the year ending
soldier, and that she has never married since he year 18 # 8. I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903.	this death aforesaid, and that she became his wife in a second of the county for the for the pension provided by law for the year ending
soldier, and that she has never married since he year 18 # 8. I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903.	county for the for the pension provided by law for the year ending the formula of the pension provided by law for the year ending the formula of the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension pension provided by law for the year ending the pension p
I have been paid a pension as a resident of the year 18 #8. I have been paid a pension as a resident of the year ending December 31, 1902, and now apply December 31, 1903. Sworn to and subscribed before me, this day of the year and year and year and year. I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903. Sworn to and subscribed before me, this day of the year and year.	f. A. Malk County for the for the pension provided by law for the year ending
I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1908. Sworn to and subgeribed before me, day of the 1908. State of Georgia,	this death aforesaid, and that she became his wife in the Malk County for the for the pension provided by law for the year ending the Malker XX Color Service Secolor RHA.
I have been paid a pension as a resident of cear ending December 31, 1902, and now apply December 31, 1908. Sworn to and subscribed before me, his and subscribed before me, county the subscribed before the subscribed be	Post-Office Se Callus RIA In Magadage Ordinary of said County, certify that I am well
I have been paid a pension as a resident of the year 18 #8. I have been paid a pension as a resident of the year ending December 31, 1902, and now apply December 31, 1903. Sworn to and subscribed before me, his day of the product of Georgia, his december 31, 1903. State of Georgia, County, country wequainted with Mrs. Harrier County.	County for the for the pension provided by law for the year ending the for the pension provided by law for the year ending Post-Office See Cally R. H. M. Rogada ee Ordinary of said County, certify that I am woll best son who made the above affidavit and
I have been paid a pension as a resident of rear ending December 31, 1902, and now apply December 31, 1908. Sworn to and subscribed before me, his day of the 1008. State of Georgia. County bequainted with Mrs. Harries Avanced are trees.	Post Office Se callus RyA I, MR Regalace Ordinary of said County, certify that I am well who made the above affidavit and rue, and I know she is the individual she represents
I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1908. Sworn to and subscribed before me, his day of the 1008. State of Georgia. County acquainted with Mrs. Harries Aram satisfied that the facts therein stated are trees.	Post Office Se callus RyA I, MR Regalace Ordinary of said County, certify that I am well who made the above affidavit and rue, and I know she is the individual she represents
I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903. Sworn to and subscribed before me, this	Post Office De Callus Res. In the County for the for the pension provided by law for the year ending the year
I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903. Sworn to and suberibed before me, this	Post-Office Se call us Ry. A. In the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the year end
I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903. Sworn to and suberibed before me, day of the particle of Georgia. State of Georgia. County acquainted with Mrs. Harries for the facts therein stated are treatment of the particle of the particle of the facts therein stated are treatments of the particle o	Post-Office Se call us Ry. A. In the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the year end
I have been paid a pension as a resident of year ending December 31, 1902, and now apply December 31, 1903. Sworn to and suberibed before me, this	Post-Office Se call us Ry. A. In the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the pension provided by law for the year ending the year end

NOTE.—All blank Spaces must be filled.

Youther and Affidavit must bear date after January 1st, 1903

POWER OF ATTORNEY.	
STATE OF GEORGIA, Nexalt County. Navnith Robertson hereby authorize S. F. Fativson of Bekalt County go to receive and receipt for the pension paid hereon, and request that he remit same to at IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13 day of January 1904. Harvitching Robertson [L. S.]	STATE OF GEORGIA, Dekall County. I. Hamielf Robertson, hereby auth Or Robertson of Dekall Co to receive and receipt for the pension paid hereon, and request that he remit say Havorit Robertson at Library In Witness Whereof, I have hereunto set my hand and seal, this day of Many 1905. Hamiel Robertson I
Januar R. Gurge	Executed in presence of Hamis Countries of Overham
WIDOW'S PENSION TO THOSE HERETOFORE PAID. No. [034. No. [034.	WIDOW'S PENSION, To Those Heretofore Paid. To Those Heretofore Paid. No. 182. No. 182. The Manuel Marketon. The Marketofore Paid. For year ending Dec. 31, 1905. The Marketofore of Pensions. WARRANT ISSUED 1905.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA	PERSONALLY COMES MRS.
County of Designation	Hassier Robertson
1 30 12 11	at she is a bona fide resident of said County of
	Georgia, and that she has RESIDED in said State
continuously eyer since. Clery	That she is the Widow of
J. G. Robertson	who was a soldier in Company
of the	63" Regiment of
Volunteers, that he enlisted in said regiment on or	
186 4 , and served in the Army up to	186 9 . That he lost his
life on the 22 day of Sy	1864 (State here
particulars of the husband's death, when, where and fr	
Disease Died of This	coughs at Home
Deponent swears that she was the wife of said dec	eased soldier, during his service in the Army as a
soldier, and that she has never married since his	s death aforesaid, and that she became his wife in
the year 18 48	Day 11
I have been paid a pension as a resident of	DESCALO County for the
year ending December 31, 1903, and now apply fo	r the pension provided by law for the year ending .
December 31, 1904.	
Sworn to and subscribed before me,	11 Jun 17
this 13 day of Jany 1904.	Harviett Robertson
James Regioner Ordinary	Post Office.
Orumary.	
State of Georgia,	James Pyrorg
Dellalo County	Ordinary of said County, certify that I am well
acquainted with Mrs. Nassiex Pool	
am satisfied that the facts therein stated are true	
herself to be, and that she has continuously reside	
day of Celly 18 7 5	n in this state since the
	his the 13 day of Jaury 1904.
Given under my official signature and seal, t	his the 13 day of Jacky 1904.
(Official)	and Theorge
	Ordinary of DE Halb County.

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

For Widows Heretofore Allowed Pensions.

	Harriet Probertson
1 19 11	h, that she is a bona fide resident of said County of of Georgia, and that she has RESIDED in said State
Jas. a. Proberts	. That she is the Widow of who was a soldier in Company
	Regiment of \$
Volunteers, that he enlisted in said regiment on o	or about the month of
	186 That he lost his
life on theday of	18 (State larg
particulars of the husband's death, when where and	from what cause.)
Died from Nisco	use, Sept, 1864
	and the state of t
The state of the s	
	•
the year 18	
year ending December 31, 1904, and now apply f	
	for the pension provided by law for the year ending
December 81, 1905.	for the pension provided by law for the year ending
Sworn to and subscribed before me,	
Sworn to and subscribed before me, this / day of Jany 1905.	Harriell Fin Polistson
Sworn to and subscribed before me, this 10 day of Jany 1905.	
Sworn to and subscribed before me, this of day of Jany 1905.	Harviell Fin Polistson
Sworn to and subscribed before me, this day of Jany 1905. Annua Ray Ordinary. State of Georgia,	Harviell Fin Pobertson
Sworn to and subscribed before me, this / day of Janua 1905. Lanua Raysag Ordinary. State of Georgia, County.	Post-Office Thansa Go 1, James P. Georg ardinary of said County, certify that I am well
Sworn to and subscribed before me, this / day of Janua 1905. Lanua Raysag Ordinary. State of Georgia, County.	Post-Office Thansa Go 1, James P. Georg ardinary of said County, certify that I am well
Sworn to and subscribed before me, this / day of Jaury 1905. State of Georgia, State of Georgia, County. County.	Post-Office Thansa Go 1, James P. Georg ardinary of said County, certify that I am well
Sworn to and subscribed before me, this / day of Jawy 1905. Jawws Rays Tordinary. State of Georgia, County. acquainted with Mrs. Navvel 191	Post-Office Thansa Go 1, Janus P. Jung Ordinary of said County, certify that I am well Justim, Who made the above affidavit and e, and I know she is the individual she represents
Sworn to and subscribed before me, this? O day of Jawy 1905. State of Georgia, acquainted with Mrs. Varuely am satisfied that the facts therein stated are true herself to be, and that she has continuously residual.	Post-Office Thansa Go 1, Janus P. Jung Ordinary of said County, certify that I am well Justim, Who made the above affidavit and e, and I know she is the individual she represents
Sworn to and subscribed before me, this day of day 1905. Additional partial of County. State of Georgia, acquainted with Mrs. Warneld are true herself to be, and that she has continuously resid	Post-Office Thomas Goldens of Country of said County, certify that I am well e, and I know she is the individual she represents aled in this State since the
Sworn to and subscribed before me, this? O day of January 1905. State of Georgia, acquainted with Mrs. January 2 am satisfied that the facts therein stated are true herself to be, and that she has continuously residue.	Post-Office Thomas Goldens of Country of said County, certify that I am well e, and I know she is the individual she represents aled in this State since the
Sworn to and subscribed before me, this day of day of day of 1905. State of Georgia, County. acquainted with Mrs. Navutty am satisfied that the facts therein stated are trucherself to be, and that she has continuously residual of 18 Given under my official signature and seal	Post-Office Thanks Government of Columbia Government of said County, certify that I am well on the above affidavit and e, and I know she is the individual she represents aled in this State since the

NOTE.—All blank spaces must be filled.

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

POWER OF ATTORNEY.	POWER OF ATTORNEY.
STATE OF GEORGIA. STATE OF GEORGIA. Rabition, hereby authorize to receive and receipt for the pension paid hereon, and request that he remit same to Coburtson at Saluminous Co	DeKALB. County. I. Samuel County. Low Boundary hereby authorize to receive and receipt for the pension, paid hereon, and request that he remit same to
In Wilness Whereof, I have hereunto set my hand and seal, this /7 day of Auway 1906. Hannett + Robintonia. s.]	In Witness Whereof, I have hereunto set my hand and seal, this 10 day of 1907.
Executed in presence of Shall Grange	Executed in presence of January Tolking L. s.
To Those Heretofore Paid. 1906. MIDOW'S PENSION For year ending Dec. 31, 1906. PAID TO THU HALLIND OFF CO. P. Regiment 63 M. JOHN W. LINDSEY, Commissioner of Pensions. WARRANT ISSUED AND HANDED TO CAMP. THE PROPERTY. 1906, AND HANDED TO CAMP.	WIDOW'S PENSION For Year ending Dec. 31, 1907. WIDOW'S PENSION For Year ending Dec. 31, 1907. PAID TO Widow of Jeaniet Rekentering. OPEKALB. County, Widow of Jeaniet Rekentering. OPEKALB. County, Widow of Jeaniet Rekentering. OPEKALB. County, OPEKALB. County, Widow of Jeaniet (23 1.4 Lan. OPEKALB. County, AND HANDED TO CANARANT ISSUED (A 1907, AND HANDED TO CANARANT ISSUED

ror widows nerecolore Allowed Pensions.

STATE OF GEORGIA,	13%	PERSONALLY COMES MRS.
County of Di Kall	Har	riet Kabertson
who, being sworn, says on oath	that she is a b	oona fide resident of said County of
201		that she has resided in said State
continuously ever since City 1 25	25	That she is the Widow of
fice it Robertson	V.	
of the 63 Georgia	Regim	ent of
Volunteers, that he enlisted in said regiment on or		8 1 1
186,3. and served in the Army up to Se h	1	186 64 That he lost his
	Sel	1864 (State here
particulars of the husband's death, when, where and		
Died from dise		
the state of the s		
		and the most of the second
		The same of the sa
and production of the second second second		
Domination of the state of the		The state of the s
Deponent swears that she was the wife of said dec		
soldier, and that she has never married since his d	ieatn aforesaid	a, and that she became his wife in
I have been paid a possion as a resident of	s De	Hall .
I have been paid a pension as a resident of		County, for the
year ending December 31, 1905, and now apply for December 31, 1906.	the pension p	provided by its for the year ending
	1	Tuch !
Sworn to and subscribed before me	Varn	et Flobertson
this / 7 day of Jarry 1906.		9 Maye
Gridinary.	Post Office	oblime oo ga
State of Georgia,		James R George
De Ralb County.	Ordinary	said County, certify that I am well
acquainted with Mrs. Harriet Pate		
am satisfied that the facts therein stated are true,		
herself to be, and that she has continuously resided		
day of18		1
Given under my official signature and seal, the	in the	7 day of Jann 1906.
	and	1 Regions
Official Seal	The state of the s	2 110

NOTE.—All blank spaces must be filled.

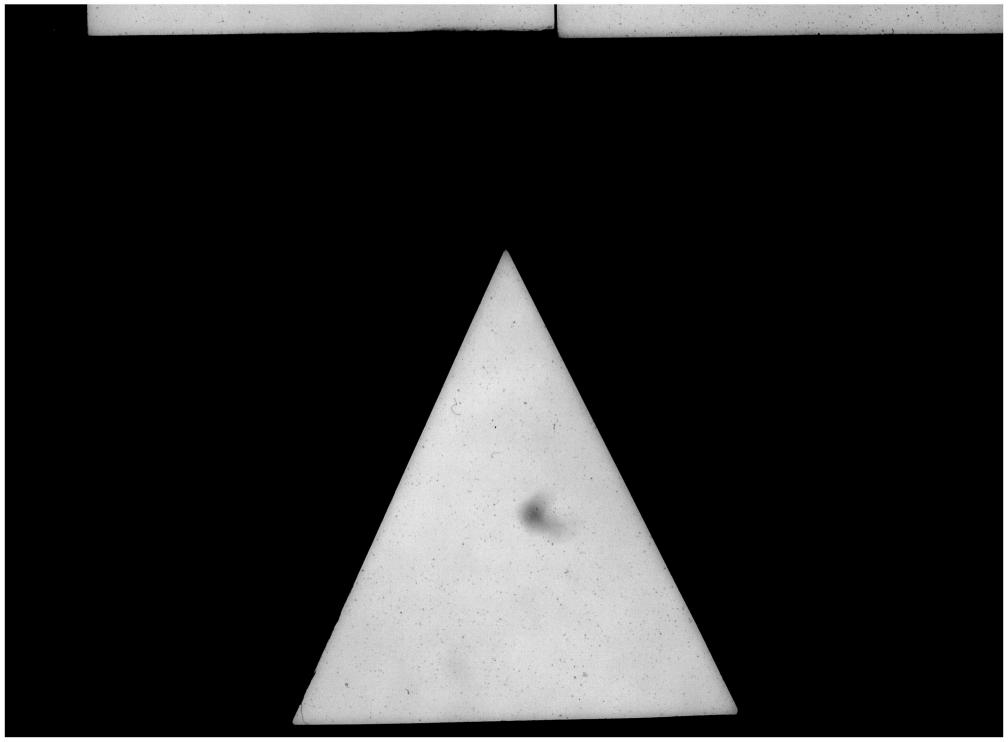
Voucher and Addaylts must bear date after January 1st, 1906.

I.AI HIMAHO TIMAMATATA UTTAHAM TAMBIAMO

County of DEKALB.	} dear	PHRHONALLY COME	8 Mrs.
	on oath, that she is a State of Georgia, and		
Jas. a. Rober		who was a soldie	the Widow of r in Company
6 of the 63rd S			
olounteers, that he collisted in said regim	ent on or about the mor	nth of VCT	· · · · · ·
86 3 , and served in the Army up to	**	186	hat he lost his
ife on the	day of	18	(State here
particulars of the hasband's death, when, when Died from Dis	ere and from what cause	1864	
		· · · · · · · · · · · · · · · · · · ·	6
			1
4 % 1			
soldier, and that she has never married the year 18	since his death aforest	id, and that she bec	ame his wife in
I have been paid a pension as a recent ending December 31, 1906, and now December 31, 1907. Sworn to and subscribed before	sident of Do apply for the pension me 907. Post Office.	KALB. provided by law for the state of the	County, for the
I have been paid a pension as a rever ending December 31, 1906, and now December 31, 1907. Sworn to and subscribed before this // day of Jarry State of Georgia, DeKALB	sident of Deaply for the pension me Post Office	KALB. provided by law for the Solin	County, for the he year ending
I have been paid a pension as a regen ending December 31, 1906, and now December 31, 1907. Sworn to and subscribed before this // day of Jarry 1 Output Jarry 1 State of Georgia, DeKALB. Countequainted with Mrs. Harriet of the stated of t	sident of Do apply for the pension me 907. Post Office nty. Ordinary or Post Office are true, and I know	ALB. provided by law for the standard	County, for the he year ending
I have been paid a pension as a regar ending December 31, 1906, and now December 81, 1907. Sworn to and subscribed before this / day of Jarry 1. State of Georgia, DeKALB. Country 1.	sident of Desident	ALB. provided by law for the standard	County, for the he year ending
Sworn to and subscribed before this / day of Jarry 1. Ordin	sident of Deaply for the pension me Host Office Post Office nty. Ordinary office of the pension are true, and I know sily resided in this Sta	ALB. provided by law for the state of the s	County, for the he year ending
I have been paid a pension as a rever ending December 31, 1906, and now December 31, 1907. Sworn to and subscribed before this // day of fary 1 State of Georgia, DeKALB. Counsequainted with Mrs. Harriet (In an satisfied that the facts therein stated therself to be, and that she has continuous day of 18	sident of Deaply for the pension me Host Office Post Office nty. Ordinary office of the pension are true, and I know sily resided in this Sta	ALB. provided by law for the state of the s	County, for the he year ending

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January ist, 1907.



ACT DEC. 16, 1901, Off 19 No. WIDOW'S PENSION, 1906 Mrs Laura Robinson

County of Director

Widow of U. G. Robinson Warrant issued and handed to J. W. LINDSEY, Commissioner of Pensions. Geo. W. Harrison, State Printer, Atlanta, Ga.

8/29/06.

POWER OF ATTORNEY.

OF

GEORGIA,

POWER OF ATTORNEY.

Cou	NTY.			
(I,				authoriz
to receive and receipt for the pension all	owed and request that he re	mit same to	**	
		by		7

Same Same	ENSION,	Colouda	7061	J. W. LINDSEY, Commissioner of Pensions. State Printer, Autorite, On.
Rolinson, Saura, Canhanga, Can Fred County, Act DEC. 16, 1901. Of pr 1903	WIDOW'S PENSION,	1900 O String Colombia Country of Willy Children	warrant issued and handed to	J. W. LINDSEY Commissioner of P. Goo. W. Hartson, State Printer, Annuals, Ga. 8/29/66.

· WIDOW'S AFFIDAVIT.

	1	61
STATE OF GEORGIA,	Personally came Mrs.	eura Cobinson
COUNTY OF DUCALL	Se. 1	who says on oath she is the
widow of W. 6 Robi	uson	to whom, in the County of
Dekall State	of Georgia	
Cant. V.	18535, that she remained	
day of Cocober	OR 1. 1/1	d that she has not since married.
At the time of his death he was a resident of	Dellalle	County, in said State of
Georgia, and was on the	pension roll of the State	of Georgia, having been allowed
a pension of 8 60 00 per annum o		
Regiment, 4a	Volunteers or State	
	. 0 4	2000
What affliction have you and how does it affe	oct you? My nearn	w very from
	wed make	The Junous
and paint m	most of the	ligue
What have you been doing to earn a support	since 1st of January, 1900?	ulhing
Jam not able	To worky	
What property or effects had you on 1st Janua	ry, 1900? Mulhing	<u> </u>
· · · · · · · · · · · · · · · · · · ·	0	1
What have you cquired since, and what incor	ne have you now? Mill	line
I have no	Lucome	
	· · · · · · · · · · · · · · · · · · ·	Water Carte Carte
What disposition have you made of any pr		d at what price and ir what
purpose? Made no di	spoulion !	rad no-
surfacely .		2 - 4 - 5 · · · · · · · · · · · · · · · · · ·
- C.,	0:11	
Deponent further says that she is now a residen	of Dekall-	County, and has contin-
uously resided in the State of Georgia since th	e // day of Moves	
She applies for the pension provided by Act of		
	0.	
Sworn to and subscribed before me, this	day of my	190 G
1	Laurage	Colinson
James Ry	Ordinary of D	Hallo .
Note.—An blank spaces must be filled before sign	ing.	County:

1, James R George Ordinary, STATE OF GEORGIA. COUNTY OF DUKALL State of Georgia, hereby certify that I am acquainted with Mrs. Lauva Robinson 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 conday of October of the State since that date A also certify that the witnesses, to-wit :.. whose testimony she present 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 day of May 1906 Lames R George Ordinary SEAL

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.

Affidavits must be made in presence of the Ordinary.

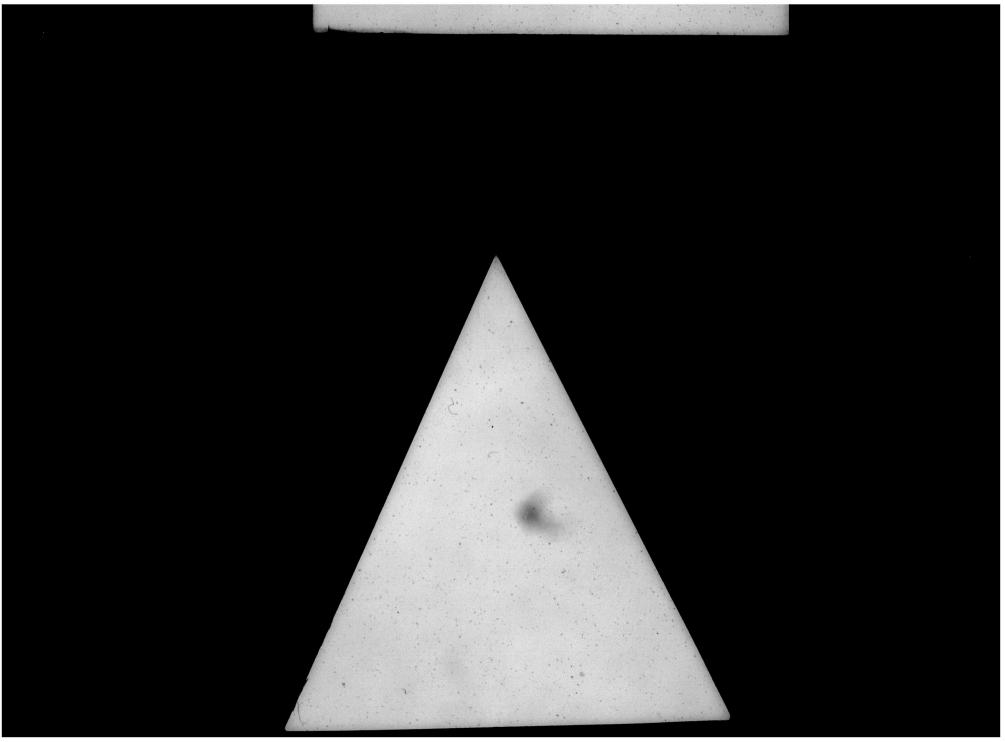
POWER OF ATTORNEY.

	In Winess	Soura. Stings eipt for the pe Robin	ve hereunto	Deka	west that he Mound d seal, this	71
Poliwson, Saura De Calf Gounts To Those Heretofore Paid.	2061	WIDOW'S PENSION.	inan de	Widow of M.C. Robinson.	JOHN W. LINDSEY, Commissioner of Prasima. WARRANT ISSUED	

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Da Kall	1 Jana Robinson
	h, that she is a bona fide resident of said County of of Georgia, and that she has RESIDED in said State
continuously ever since Oct. 5th, 183	That she is the Widow of who was a soldier in Company
	who was a soldier in CompanyRegiment of
Volounteers, that he enlisted in said regiment on	or about the month of
186, and served in the Army up to	186
theday of	18
Irefigurity and	poverty_
and the second s	and the second s
The state of the s	V and the second second
	secased soldier, during his service in the Army as a is death aforesaid, and that she became his wife in
I have been allowed an Indigent pension as	a resident of
	now apply for the pension provided by law for the
year ending December 31, 1907.	
Sworn to and subscribed before me	
this 7 day of Jan 1907.	Luro , Rabinson
Janus Ryiorge, Ordinary.	Post Office
State of Georgia, Do Kalk County	Granes 10. Vange
	who made the above affidavit, and
am satisfied that the facts therein stated are tru- herself to be, and that she has continuously resid	e, and I know she is the individual she represents
day of Be toler 183/	
Given under my official signature and seal	, this the flat day of free 1907.
(Official)	mus Ryenge
Ore	dinary of De Kulbe County.

NOTE.—All blanks must be filled. Youchers and Affidavits must bear date after January 1st, 1907.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

hereby authorize

Mogstog ae						
Canth 1196 498		PER I			1 4 A	to no
Robinson, W. Le					Witness	eive an
INDIGENT PENSION				1	ss my h	d receip
1898.	1.	1. July 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			and and	t for the
Name M.C. Robinson			· 화		seal this	pension all
County De Kalk						owed and r
Ground Age & Porerty					day of	equest th
April 8th guy, 1896		4 31.8				at he remit
RICHARD JOHNSON,	es de					same
Secretary Executive Department.					9:	8
WARRANT HANDED TO						
aft.					_1895.	
Geo. W. Harrison, State Printer, Atlanta.						

STATE OF GEORGIA,

County,

County,

of

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

at

by

Witness my hand and seal this

Executed in presence of

of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows: 1. What is your name and where do you reside? (give State, County and post office) Mobinson Hellall too Decatus Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Delat Conn't gel my life 3. When and where were you born? 4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate Arms When and where did you enlist? March 61" in Lawrens loo & 6. In what company and regiment did you enlist? Loo H. 14th Ha 7. How long did you remain in that company and regiment? Lies the Close of the war 8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? Hever transfered 9. For how long a period did you discharge regular military duty? Rearly four que es 10. When, where and under what circumstances were you discharged from service ? Al Surrender at Appointation 11. What is your present occupation? Taring 12. How much can you earn per annum by your own executions or labor? \$2300 13. What has been your occupation since 1865? Harming 14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? One bundred half ars - 12300 15. What is your present physical condition and how long have you been in such condition? Sin weak from old age hoor heen in this condition for 12 months 16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Infirmity viage 17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? Gor a near have not been dole to do amothing 18. What property, effects or meone do, you possess? I have except thomas.

11. What property, effects or income did you posses in 1893 and in 1894 and what disposition, if any, did you make of same? And about the do rie I now 2072111 20. In what County did you reside during those years and what property did you then return for taxation? 22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income: about one sundred Sollare, about 12500 23. What was your employment during 1893 and 1894? What pay did you receive in each year? Harming about made a support 24. Are you married and have you a family? If so, is your wife living and how many children have you? Give ago and sex of children and their means of support? Ges, Wife Giring Three boys and two girls, see work on form. Oldest age 39 and nounges 22 wer

Sworn to and subscribed before me this the	STATE OF GEORGIA,
day of the (1895.) Applicant.	DeKall County.
Milli ofelale. Ordinary	2711.01
of Reliable County.	Personally came before me Sille Strange here and
one of the state o	both known to me as reputable physicians
QUESTIONS FOR WITNESS.	of said county, who being severally sworu, say on oath that they have examined carefully
STATE OF GEORGIA,	such personal examination, say that his precise physical condition is as follows:
morgon County.	He is Suffering with general desable,
Por h, Dougloss , of said State and County, having been presented	Risulting from ald age & Kidning
as a witness in support of the application of Tr. Co. Nobine of for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the	orner &
following questions denoses and answers as follows:	
1. What is your name and where do you reside? O', Mr. Douglost Madisons, Injorgon leventy, Georgie -	
2. Are you acquainted with m, le , Robinson , the applicant, if so	We further say on oath that the physical condition of applicant renders him unable to labor at
how long have you known him? yes, Heave Known his 384000	any work or calling sufficient to carn a support for himself, and that we have no interest in said pension
3. Where does he reside, and how long has he been a resident of this State? Resides in	being allowed.
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you	
know this? I know be served in The low federate Corney -	the 8th day of April 1895. Of Hypop, M.S.
I was in the some Company Regiment	Mindogedale. Ordinaso,
5. When, where and in what company and regiment did he enlist? Eulistia in meh-	Ordinasn,
6. Were you a member of the same company and regiment?	
7. How long did he perform regular military duty, and what do you know of his service as a Confed-	ORDINARY'S CERTIFICATE.
erate soldier, and the time and circumstances of his discharge from the service? Until the Close	
of the wor. He was a faithful + efficient soldier -	STATE OF GEORGIA,
Surrendenta- al-approvention P. V. Jan	De Malt, County.
8. What property, effects or income has the applicant? (Give your means of knowledge.)	
Jewns no real estate & hos no income- I hove known	I, MMogalific , Ordinary in and for said County, hereby certify that
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition,	the applicant MC Novinson resides in said County, and was a bona
if any, did he make of same? How That I have any knowledge	fide resident of this State on the first day of January, 1894, and that the witnesses viz:
10. What is the applicant's occupation and physical condition? Tarmer - Suffering	Osmayherry Mid. + & H. Loss. Mid,
from the infirmity of all age - o Beneral Alsobitation.	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
Meas Rheumatism -	the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses
11. Is the applicant unable to support himself by labor of any sort, if so, why?	before same were signed.
16 -	I further certify that the tax digests of Helloll County show that applicant
12. How was he supported during the years 1893 and 1894? By farming and	of property, and in 1894, HHO dollars
13. What portion of his support for these two years was derived from his own labor or income?	of property, and in 1894,
about Twenty five sollows	210 Aliil
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 Color day of 1895.
under the Act of December 15th, 1894? answered in question	Ordinary Ordinary
10—	of De Roll County.
15. What interest have you in the recovery of a pension by this applicant?	
\mathcal{A}_{i}	
Sworn to and subscribed before me, this	NOTE.
of BI Pouldwing morgan levi En	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."
O 101 ouddown	
common that I work	the state of the s

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 [L. S.] Executed in presence of Soldier's Pension. For Those Aiready Enrolled.) INDIGENT No. 6/5 RICHARD

POWER OF ATTORNEY.

State c							
	of Georg	ŗia,)		C	- (7
		Cou	nty.				
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Enrolled.)		ENSION,	J. Good	SSUED	1898.	HNSON, nunissioner of Pensions.	рер то
ady Enrolled.)	EŅT	PENSION,	in woon	. L/s	L 1898.	JOHNSON, Commissioner of Pensions.	ANDED TO
Viready Enrolled.)	GEŅT	S PENSION,	denison.	TALS INT ISSUED	11/4 1898.	D JOHNSON, Commissioner of Pensions.	ит наурев, то Му ев
e Already Enrolled.)	DIGENT	R'S PENSION,	Chinasi	Malb RANT ISSUED	1/14 1898.	ARD JOHNSON, Commissioner of Pensions.	RANT HANDED TO
For Those Already Enrolled.)	INDIGENT	ER'S PENSION,	Melinger.	Le Malb	1/14 1898.	RICHARD JOHNSON, Commissioner of Pensions.	WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA,

County. Do Rallpersonally appears 1. C. Kobinson 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 County and State, and has resided in said State continously ever since 1827; that he is 70 years old and the 26 day of Jan ; that he enlisted in the military service of the Confedby occupation a erate States (or of the State of Ja) during the war between the States, and served for the term of the wel in Company # , of / th Regiment of that his physical condition is as how hidney disease is in able to support himsely that his property consists of the following items House Hoed and kitchen furniture of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Acokalh county been allowed a pension for the year 1896 Sworn to and subscribed before me, this, the Ordinary. STATE OF GEORGIA, H. e Kell County. 1/11. Reside

In the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be

Affix your seal here.

M.M.Regidales

Ordinary De Nall Coun

Note-The blanks spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.
Le Kalk County.
Personally appears A.C. Robinson of he Kall
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 26th day of 1827; that he is 7/ years old and
by occupation a farmer ; that he enlisted in the military service of the Confed-
erate States (ox of the State of) during the war between the States,
and served for the term of H. Make in Company H, of 14 th Regiment of
The state of the s
disease and old age much
No make a living for self and fair
that his property consists of the following items
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of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1898. I have heretofore as a resident of All Kalh
county been allowed a pension for the year 1897
Sworn to and subscribed before me, this, the
11th day of Lan 1898. The Coldinary
1111 Rayslace, Ordinary.
ordinary.
State of Georgia,
\(\h \) \(\h \)
And D
I, M. Magsolace, Ordinary of said County,
do certify that I am well acquainted with W.C. Nokiison the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 1898.
four land
Ordinary Sic Nach County.
Norm.—The blank spaces must be filled.

POWED OF ATTORNEY

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CODE SEC. 1254.	r Those Aiready Enrolled	1.6 .ON	INDIGENT	R C N	Ser.	WARRANT ISSUED	1	RICHARD JOHNSON,	WARRANT HANDED TO Office On Harrison State Printer, Albana

Name

	,		county.				hereby author
f 2 1				of			
recei	ve and rec	ceipt for the	pension	allowed, a	nd reque	st that he	remit same
			· · · · · · · · · · · · · · · · · · ·	at	- <u>- 1988 - 1</u>		
,							
V	Vitness my	hand and sea	al, this	day	of	****	1900.
						14 15	[L.
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	1	Z		ط	000	ms.	
_	1	9		501	1	Pensic	
ed.		ENT	•	Z/	WARRANT ISSUED	OHN. W. LINDSEY,	WARRANT HANDED TO
CODE SEC. 1254. Those Aiready Enrolled.)	0	R'S PE					

WARRANT ISSUED

County

JOHN. W. LINDSEY,

CODE SEC. 1254.
(For Those Already Enrolled.)

SOLDIER'S PENSI

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Settell County.
Personally appears M.C. Nobinson of De Kall
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 26 day of 1821; that he is 1 years old and by occupation and 1821; that he enlisted in the military service of the Confederate States (or of the State of 4) during the war between the States, and served for the term of 4 years in Company 11, of 14 th Regiment of ; that his physical condition is as follows: 1 fair hield ice 2 disease and the confederate Canada County 11 that his physical condition is as follows: 1 fair hield ice 2 disease and the confederate Canada County 11 that his physical condition is as follows: 1 fair hield ice 2 disease and the confederate Canada County 11 that his physical condition is as follows: 1 fair hield ice 2 disease and 1 the confederate Canada County 11 that his physical condition is as follows: 1 fair hield ice 2 disease and 1 the confederate Canada County 11 that his physical condition is as follows: 1 fair hield ice 2 disease and 1 the confederate Canada C
that his property consists of the following items Jone
Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of the year 1899. Sworn to and subscribed before me, this, the day of 1899. Ordinary.
State of Georgia, Ale kalt County.
I, MI Regselace Ordinary of said County,
do certify that I am well acquainted with MC Robinson the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 1899.
(Atta Jour Mill Rogsfell
Ordinary Le Neth County.

NOTE.-The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
Gounty,	
personally appears	of years and that have a hour of decision
County, State of Georgia, who being dul	y sworn, says on oath that he is a bona fide citizen and has resided in said State continuously ever
	1822; that he is 23 years old and
	t he enlisted in the military service of the Confed-
rate States (or of the State of	during the war between the States,
	in Company , of 14 th Regiment of
Sale (, ; ;	; that his physical condition is as
ollows:	and the state of t
hat his property consists of the following	ing items
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
f the value of	Dollars, that by reason of his physical
	pport himself by his own exertion or labor, and
hat he receives no pension but the one	
	the benefits of the Act, approved December 15th,
	and makes application for the pension to which he
	eretofore as a resident of 2 6 // 2 //
county been allowed a pension for the ye	ear 189 <u>4</u>
Sworn to and subscribed before me,	this, the 1 10 6 Briceson
day) of	
12111 12 12 (X CC)	
	. Ordinary.
St-1- > C G > :-	
State of Georgia,	
He Hall County	
I, 1, 11/4 (land	Ordinary of said County,
lo certify that I am well acquainted wit	the C. Colors the
	am well satisfied that the statements made by him
	he is the individual he represents himself to be
and that he resides in this County.	
Given under n	ny official signature and seal, this
day of	
your (
Cities of	Ald a by to Comment of
	Ordinary County
Norg.—The blank spaces must be filled,	new 1st 1920

STATE OF GEORGIA,

	County	(.)			
. I.,		hereby	authorize		
		of		gil.	
to receive and	receipt for the pe	nsion allowed a	and request	that he	remit same
by *	\mathcal{D} .				
Witness	my hand and seal, th	is day	y of		1901:
			678 1		[L. ;
Execu	ted in presence of				
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		×.7			•
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led .	8			r Perus	8108
. 5		100	<i>€</i> ⊕	JOHN W. LINDSEY	2 7. 3
\$ C	P EN	19	ISSU	IND	NDE.
Hose Already	INDIGENTIER'S PE	ام	WARRANT ISSUED	V. L	WARRANT HANDED TO
Se Se		83	200	N	BRAN L
F X		TK '	3	јон	- W.A
For Those Already Enrolled.	SOLDIER'S PENSIO	Name W.C. Robinson			ė.
	Sc	Name \			

POWER OF	OTTA 7	RNEY		
STATE OF GEORGIA,				Comme
I,	hereby	authorize		
· • • • • • • • • • • • • • • • • • • •				
o receive and receipt for the pension	1	request	that he i	remit same
			garahia ara	
by				
Witness my hand and seal, this	day of	f		1902.
		1.	11/5	[L, 8
Executed in presence of	1. 1.			
9: 1				
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	1 43	61	emetions.	
1 S . e	3 7		INDSEY,	2
		WARRANT ISSUED	VDS	WARRANT HANDED TO
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A D D T	3 3 4	RRAN	. W.	BANT
	五一	WA	OHN W. LINDSEY	WAR
INDIGENT OLDIER'S PENSIO 1902.	11		j	
	Name County			

for Applicants neretolore allowed rensions.

STATE OF GEORGIA,
Sahall County.
personally appears // C. Robinson of De Nach
County, State of Georgia, who being duly sworn, says on oath that he is a bona tide citizen
and resident of said County and State, and has resided in said State continuously ever
since the 26 day of firm 1827; that he is 73 years old and
by occupation a Harrice W that he collisted in the military service of the Con-
federate States (or of the State of Alecytica) during the war between the
States, and served for the term of H. Halls in Company H , of 14 th Regiment
of Sala Condition is as
ions. Aid my disease need fold age
he is medice to work
that his property consists of the following items (NVICC)
of the value of C.C. Dollars, that by reason of his physical
condition and poverty he is anable 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 Delcalh
county been allowed a pension for the year 1900.
Sworn, to and subscribed before me, this the Well Melingell
1/200
11.111. Regsdace Ordinary.
STATE OF GEORGIA,
De Mach County.
1. M. Ragsdide Ordinary of said County,
\mathcal{A}_{1} \mathcal{A}_{2} \mathcal{A}_{3} \mathcal{A}_{4} \mathcal{A}_{5}
do certify that I am well acquinted with M.C. Colin 22 Son the applicant in the foregoing affidavit, and am well satisfied that the statements in ide by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this 11th
day of \$211 1901.
Mis Miss Millings date
Ordinary De Hack County

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

4.7	
STATE OF GEORGIA,	
the Kalk , County,	1
Personally appears M.C. Robinson of De nath	
county, State of Geoogia, who being duly sworn, says on oath that he is a bona find	
nd resident of said County and State, and has resided in said State continuou	isly ever
ince the 26 day of Jan 1827; that he is 75 years	
y occupation a Farmer that he enlisted in the military service of	the Con-
ederate States (or of the State of Ja) during the war bet	
States, and served for the term of A Leaw in Company # , of 14 th R	egiment
f La Va (; that his physical condit	ion is as
follows: Kidney lise are and and	age
mable to work.	
9	
hat his property consists of the following items 1 12726	
The state of the s	
Dollars, that by reason of his condition and poverty he is unable to support himself by his own exertion or leads to be not be hat he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved Decem 1894, and the Acts amendatory thereof, and makes application for the pension to sentitled for the year 1902. I have heretofore as a resident of Dec. Roll county been allowed a pension for the year 1904. Sworn to and subscribed before me, this the day of Land 1902.	ber 15th, which he
Millagaldic Ordinary.	
STATE OF GEORGIA,	
Le Kalk County.	
I, Mhagadale g Ordinary of said	County,
do certify that I am well acquainted with W.C. Kobinson	
the applicant in the foregoing affidavit, and am well satisfied that the statements	
him in his said affidavit are true, and I know he is the individual he represents h	imself to
be and that he resides in this County.	i shi
Given under my official signature and seal, this /3	
day of 1411 1902.	
Ama your Mille and chelle	
Ordinary De Kalh	County.
Nore.—The blank spaces must be filled. Nore.—Affidavit should not be attested before January 1st, 1902.	1. 4.

I		County		y authorize			
		elekari oleh elekarian	of.				
receive an	d receipt for th	e pension	allowed	and reque	st that	he re	mit same
			at				
· Col	J			C			1903,
Witness n	ny hand and seal,	this	day	01			[L. S.
Executed	in presence of		**************************************				
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		200					
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ED.		. , ,	2		1903	Pensions.	
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E / /	EN.	00	a//a	WARRANT ISSUED	7	JOHN W. LINDSEY,	WARRANT HANDED, TO
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VASA	00					3	E J B
No. CHV	DIER'S PENS	0	इश्र '	RR/		Z	E E

POWER OF ATTORNEY

1 ,	EORGIA,	Count	he	reby aut		t that	t he ren	nit same t
· · · · · · · · · · · · · · · · · · ·			at					
Witness m	y hand and seal,	this .	. d	ay of	•			1904
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ED.)	NOI		hos	8		190	Pensions	
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LIREADY E	IER'S PE	7	200	Regiment	WARRANT ISSUED	18	JOHN W. LINDSEY.	WARRANT HANDED TO
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COR THOSE ALREADY ENROLLED. No. Of	OLDIER'S PENSI	3	25		WAI		HOF	H. H.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
Re Cail County.	-
1200	
Personally appears / C. No bins of Me Malh	don
County, State of Georgia, who, being duly sworn, says on eath that he is a bona fide citi	200
and resident of said County and State, and has resided in said State continuously esince the 26 day of 1821; that he is 75 years old a	
by occupation a MASICS, that he enlisted in the military service of the C	
federate States (or of the State of) during the war between	the
States, and served for the term of 4 Geass in Company H, of 14 th Regim	ent
of that his physical condition is	s as
follows: Dupoching with Mich my Arolas	-
States, and served for the term of 40 1113 in Company 17, or 4 th Regim of 15 that his physical condition is follows: Supplied that his physical condition is follows: Supplied that his physical condition is follows:	
that his property consists of the following items:	
of the value of Dollars, that by reason of his phys	sical
condition and poverty he is unable to support himself by his own exertion or labor,	and
condition and poverty he is unable to support inmost by	
that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 1	5th
1894, and the Acts amendatory thereof, and makes application for the pension to which	h he
is entitled for the year 1903. I have heretofore as a resident of Re Nath	7 "
is entitled for the year 1905. I have detection as a resident of	
Sworn to and subsection for the year 1/02,	
day of 1911 1903.	
Will Ragsdoc Ordinary.	
STATE OF GEORGIA,	
Le Wall County.	
I, WM. Ragsdoccy Ordinary of said Cou	
do certify that I am well acquainted with M. C. Nobrisson	inty
do certify that I am well acquainted with 100 -000 that the statements mad	le b
the applicant in the foregoing affidavit, and am well satisfied that the statements mad	olf to
him in his said affidavit are true, and I know he is the individual he represents himse	
be and that he resides in this County.	
Given under my official signature and seal, this 10	
day of 11 11211/10 1903.	
(TAUX) your ment of the think agod & Co	
Ordinary & Clerk Con	inti
, Oldmary , v = Late	uncy

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

STATE OF GEORGIA. DEKall County Personally appears W. C. Robinson of DESTack 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 20 day of January 1878; that he is 76 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of____ ___) during the war between the States, and served for the term of 4 Years in Company W, of 14 th Regiment of -4 A ; that his physical condition is as Sufirmity Caused by heart disease. that his property consists of the following items: Hone of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of DERall County been allowed a pension for the year 1903 Sworn to and subscribed before me, this the STATE OF GEORGIA. 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_____

County.

Norg.-The blank spaces must be filled Nors .- Affidavit should not be attested before January 1st, 1904.

STATE	OF GEOR	GIA,)				
		I,					ereby author
		t for the p	ension all	owed, as	nd request	that he	remit same
		nd and seal,			day of		1905,
Exe	cuted in the	presence of	-		(1 € +) (1 • • • • • • • • • • • • • • • • • • •		
				(4)			
. Y . A							
æ	` ·		4	1.2	1905.		
CODE SECTION 1254. FOR THOSE ALREADY ENROLLED.		SNSIO	in,	761		W. LINDSEY, Commissioner of Pensions	WARRANT HANDED TO
CODE SECTION 1254.	No. 602	S.S.S.S.S.S.S.S.S.S.S.S.S.S.S.S.S.S.S.	Mail	Regiment	WARRANT ISSUED	JOHN W. LINDSEY, Commissioner of	WARRANT HANDED TO WHAT WHITE WHITE
CODE 1	No. o	图 图	26		WARR	NHOI	WARRAN
(FOR)		TOS	Name	Co. J			GEO. W. H

no deta

STATE OF GEORGIA. Millall County. Personally appears W. C. Hi bin sous De 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 resided in said State continuously ever since the day of 18; that he is 7 years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of during the war between the States, and served for the term of in Company /, of // th Regiment of stat his physical condition is as follows: Surfirmity, proceed, rage that his property consists of the following items: of the value of.... Dollars. I am now earning, Dollars per month. That by reason of his by my labor,... 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 well all County been allowed a pension for the year 1904. Sworn to and subscribed before me, this the day of Jair 1 1905. STATE OF GEORGIA, I. Consus of Dury Ordinary of said County, do certify that I am well acquainted with UU, Italinson the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this...

Note.—The blank spaces must be filled.

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

WHEN AND WHERE BORN? January 26th. 1826.

ENLISTED WHEN AND WHERE? March 1861 Laurens County Georgia.

RANK .

COMPANY AND REGISENT?

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WILEAE?

RELEASED.

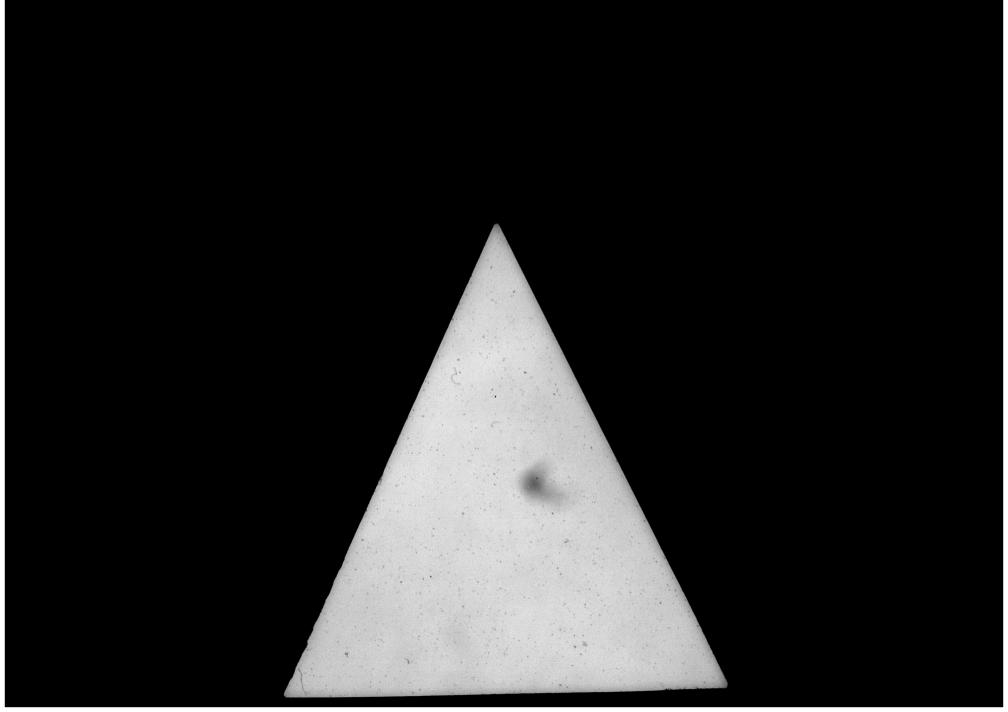
WHEN AND WHERE SURRENDERED? Appointtox, Va. at surrender.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

P. W. Douglas. No data. WITNESSES.



Rodgers a. F. (mg) Offold Canty 6
WIDOW'S APPLICATION
To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll of Georgia
Name Mis JA L Rodgers Wild of James W Rodgers
Regiment Date of Husband's Death May 7 th 1974
Approved FEB. 5, 1925
Japant this person. Jeach, Jun 6, 1925. There Jeb. 6, 1925.
S.E. Harris C.E. Matheway. Commissioner of Pensions.
10-28-1974

Ordinary's Certificate

(SEAL OF ORDINARY.)	Sworn under my hand and official seal	marriage, and that both the foregoing we	sents himself to be, and that he has been January 1st, 1920; that I also know	The a. F. Rodgers	STATE OF GEORGIA, COUN
of Dellack Country	Sworn under my hand and official seal of office this 2 2 day of Qek 1924	marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits,	sents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also knowthe witness as to	M. G. F. Rodges, the applicant for pension; that he is the person he repre-	

Instructions:

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

 (You do selennly 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.)

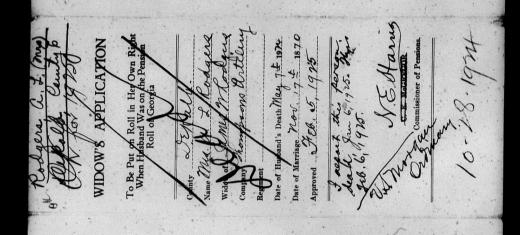
 2. Additional affoliavits may be attached if blank spaces are sufficient.

 3. All affoliavits must be made before the Ordinary of the County of revidence.

 4. Only videous who are married prior to first January, 1881, are entitled.

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

 6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service ant were not required to do so.



Ordinary's Certificate

STATE OF GEORGIA,	
DEKall COUNTY.	
I. V. D. Morgan, Ordinary of said County, certify that I known Q. L. Rodgers the applicant for pension; that he is the person he representations.	w
Ms. 4.1. Rodgets the applicant for pension; that he is the person he repre	e-
sents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since	
January 1st, 1920; that I also know, the witness as a	0
marriage, and that both the foregoing were duly sworn by me before signing the respective affidavit	s,
and that they are truthful and trustworthy and their statements are entitled to full faith and credit.	
Sworn under my hand and official seal of office this 27 day of Qeh 1923	4
V. D. morgan Ordinar	v
(SEAL OF ORDINARY.) of DEKalh Count	

.Instructions:

[.] Histructions:

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. All antidartifidavits may be attached it blank spaces are sufficient.

3. All antidartifications are proposed to the Ordinary of the County of residence.

4. Only wildows who are may be prior to first January, 1881, are entitled.

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

reputation.

6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—hecause Disabled Pensioners made no proof of service ant were not required to do so.

State of Georgia,)

DeKalb County.)

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

You are hereby authorized and permitted to join in the Honorable State of Matrimony, James Rodgers and amanda Payton 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 17th day of November 1870.

J. L. Wilson, Ordinary.

I hereby certify that James W. Rodgers and Amanda Payton were joined in the Holy Bans of Matrimony on the 17th day of November, 1870, by me.

P. A. Hughes, M. G.

Georgia, DeKalb County.

I, E. H. Mason, Glerk of the Court of Ordinary in and for said county, do hereby certify that the above and foregoing is a true, correct and complete copy of the marriage license and certificate of marriage of James W.

Rodgers and Amanda Payton, as appears of record in Book "B" Record on Marriages,
Page 329.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of said Court of Ordinary at Decatur, Georgia, this the 27th day of October, 1924.

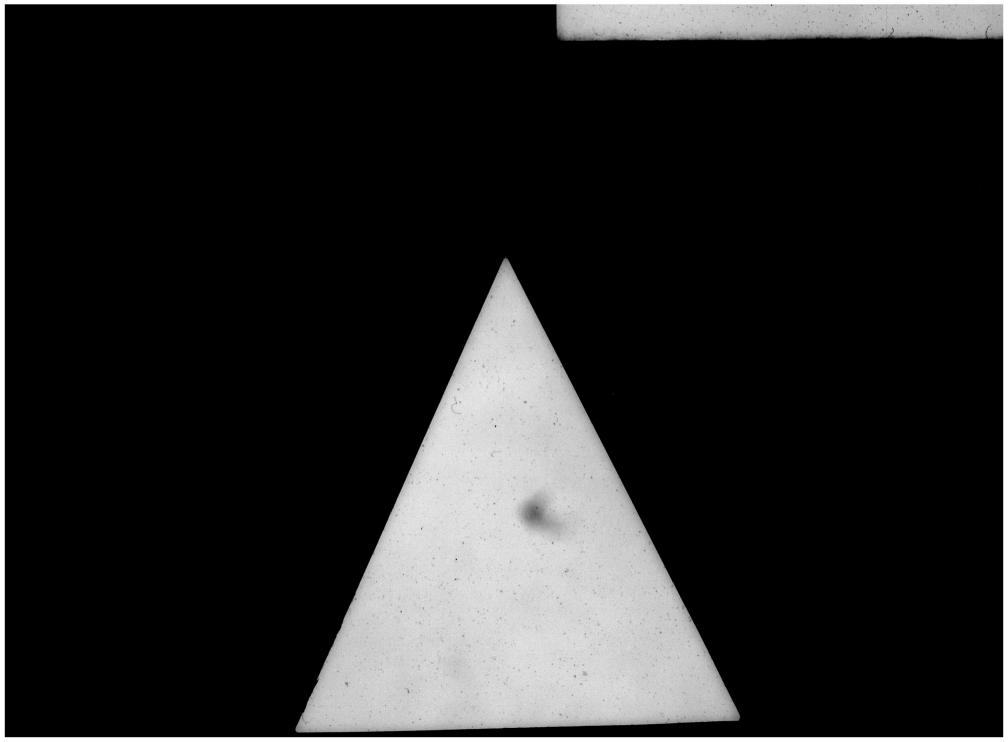
Clerk Court ordinary, Dekalb County, Georgia.

APPLICATION FOR PENSION BY A WIDOW

Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be Used by the Widow of a Disabled Soldier Pensioner.)

DEKalh COUNTY.	
Personally before me comes Mis amaulas Rodgers of said County,	
who, after having been duly sworn, says that she is the widow of James M. Rog CM	0.
o whom, in the County of Dy Call State of La she was married on	7
he 17 day of Nor 187 and that she remained his wife, and resided with him to the	73.460
late of his death in May 7.4. 19.24 and that she has not since his death remarried; at the time of	
is death he was a resident of Discall. County, in said State of	1
death he was a resident of County, in said State of Pension Roll of the State and paid a pension of	
for in Dualh County for 1923 (per annum), on account of being a soldier	
The transfer of the state of th	
That she is now a bona fide resident citizen of said State of Georgia, and she has, continuously, re	
inter there since	
Sworn to and subscribed before me, this the 27 day of Och , 1924. } MR A. L. Rodlews, Applicant.	
1) day of Applicant. 1) Applicant.	-
/ New And I	
(SEAL OF ORDINARY.)	_
Affidavit of Witness to Prove Marriage and Date of Death of Husband	
	ļ.
Affidavit of Witness to Prove Marriage and Date of Death of Husband STATE OF GEORGIA,	
STATE OF GEORGIA,COUNTY.	
STATE OF GEORGIA, COUNTY. Personally before me comesknown to be	a
Personally before me comesknown to be responsible and truthful person, residing in said County, who after having been duly sworn, says that	a
Personally before me comesknown to be responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs, who made the foregoin	a
Personally before me comes known to be responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. , who made the foregoin who died in who died in	a t
Personally before me comes	a t d
Personally before me comes	a t g

(SEAL OF ORDINARY.)



POWER OF ATTORNEY. STATE OF GEORGIA.

_COUNTY.

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

_ by_

| of |

Rogers, N. L. Longer Lach Co No. 3809	
INDIGENT PENSION	Winess my hand. Executed in preset
1898.	oc of seal
Name D.L. Rogers County De Kalk	
County DeKall	
Approved 572 1899	day of
RICHARD JOHNSON, Commissioner of Pensions.	
WARRANT HANDED TO	
MES. W. HARE BON. STATE PRINTER, ATLANTA.	(F. s.)

STATE OF GEORGIA STATE OF GEORGIA. County. COUNTY. of said State and County, desiring hereby authorize to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows: 1. What is your name and where do you reside? (give State, County and post office.)to receive and receipt for the pension allowed, and request that he remit same to... State of Learn in Delath Court, Post office Likonia 2. How long and since when have you been a resident of this State ?about 76 years old Witness my hand and seal this..... day of 3. When and where were you born? in lasher Counts When and where and in what company and beginnen did you enlist or serve? Executed in presence of How long did you remain in such company and regiment?.. an Junch 15 or 16 862 to Summerder Three long wil 565-6. For how long a period did you shoharge regular military duty? 3 seas 1 10-2 months 7. When, where and under what circumstances were you discharged from service? It the Juneader of to huson or any of venn 8. What is your present occupation? 9. How much can you earn (gross) per annum by your own exertions or labor? withing 10. What has been your occupation since 1865 ? Larry 1999 11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? 12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?____ 13. What property, effects or income do you possess, and its gross value? I have 14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897, and what disposition, if any, did you make of same? 184th bassessed is rived two roses both died had a Leer trudsed tollais loosed same out it cannot collect any fittemory la 15. In what County did you reside during those years, and what property did you then return for taxation? Depath Ca. La in 1994 returned Jame personal property and do not 16. How were you supported during the years 1896 and 1897? by Muslow in Chief 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? No account made, Idid not contribute drafting 18. What was your employment during 1896 and 1897? What pay did you receive in each year? I had no employment, President not whole to my thing

INDICENT PENSION

INDICENT PENSION

ISSO

Approved J/2 1889

SICHARD JOHNSON,

Ominimum of Presion

WARRANT HANDED TO

Applicated

Applicated

INDICENT PENSION

SOUTH TO STATE MANDED TO

Applicated

INDICENTED AND TO STATE MANDED TO

Applicated

INDICENT PENSION

OMINIMUM AND TO STATE MANDED

INDICENTED AND TO STATE

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? MacCount made. I did not contribute traffic.

18. What was your employment during 1896 and 1897? What pay did you receive in each year?

19. Have you a family? If so, who somposes such family? Give their means of support? Have they a homestead? No famuly

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

Sworn to and subscribed before me this the day of the family of

SI	CATE OF GEORGIA,
	Seral 6 COUNTY.
)	11/1 1/1/ - All -
7	, of said State and County, having been presented
	witness in support of the application of
	er the Act approved December 15th, 1894, and after being duly sworn true answer to make to the swing questions, deposes and answers as follows:
	What is your name and where do you reside? 2 M Meier Reside
	- Dekalt County Genria
	Are you acquainted with DL loqued , the applicant; if so
how	long have you known him? Line of 3 day of March 1862
3.	Where does he reside, and how long and since when has he been a resident of this State?
2	my knowledge a Resident of Dehall " a Linea 1862
4.	
	work 1862 at Coverigen to Company 6. 42 La I was a member of to
	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
sold	ier, and the time and circumstances of his discharge from the service?
-	over I years, I know him to
-	Trave made a good Sollier
7.	What property, effects or income has the applicant? (Give your means of knowledge.)
-	Time whalever that I know or
any,	did he make of same? None That I know of
9.	Has he conveyed away any of his property in the last three years, if so, what was it, and to whom?
10.	What is the applicant's occupation and physical condition? My Opinias is
141	at hes is, Physically Andble to do ceny
La	for whatevel has occupation
11.	Is the applicant unable to support himself by labor of any sort, if so, why?
	the infirmity
12.	How was he supported during the years 1896 and 1897? Ito not know
13.	What portion of his support for these two years was derived from his own labor or income?
14.	Give a full and complete statement of the applicant's physical condition that entitles him to a pension
	er the Act of December 15th, 1894? Poverty Uge Tinfin
+	
15.	What interest have you in the recovery of a pension by this applicant? More
10.	
	Sworn to and subscribed before me this)
the	Sworn to and subscribed before me, this day of let 1898. Witness.

STATE OF GEORGIA,
Dellalle COUNTY.
D Personally same before me for M Tribble My and
D. N. le New // , both known to me as reputable physicians
said County, who, being severally sworn, say on oath that they have examined carefully
applicant for pension under the Act of 1894, and after
nch personal examination say that his precise physical condition is as follows:
Totaly disabled from old age and
Misugues Prostration also has Nalela weaks
of right Ventrical of host
the transfer of the state of th
We further say on oath that the physical condition of applicant renders him unable to labor at any
ork or calling sufficient to earn a support for himself, and that we have no interest in said pension being lowed.
V- 1111/2 111 11/2
Sword to and subscribe the this the
Mark Of
WWW. Ordinary.
ODDINADVIC CERTIFICATE
ORDINARY'S CERTIFICATE.
TATE OF GEORGIA,
Descale COUNTY.
12 []
I Mary Care, Ordinary in and for said County, hereby certify
at the applicant N. D. Condy Congressides in said County, and has
en a bona fide resident of this State since the day of 1803
d that the witnesses, viz: MI Mercer In Isin 1811
and & Klosuppo M.D.
e 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
e oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness
fore same was signed.
I further certify that the tax digests of Achael County show that applicant
turned for taxation in his name in 1896 Dollars
property, and in 1897 Dollars of property.
In my opinion the foregoing claim ismade in good faith.
Witness my hand and seal of office, this 30 day of Land 1898.
- Maria V
a well
of Belalle County.
NOTE. 1. Refore any questions are answered the Ordinary shall awar applicant and the witnesses in the following words: "WY".
 Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You all true answer make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help u 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. POWER OF ATTORNEY. STATE OF GEORGIA, De Hall County. S I. D. Rolgers J. H. Leuch in STATE OF GEORGIA, County. 1, D. Wodgers hereby authorize of I funkting hereby authorize to receive and receipt for the pension allowed, and request that he remit same to to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this gay of king 1901. 1901. 1901. [L. S.] Witness my hand and seal, this le day of far 1900. De Rolley [L. S.] Executed in presence of Executed in presence of J. J. Rodgers Thos my very 1millingada q SOLDIER'S PENSION SOLDIER'S PENSION For Those Aiready Enrolled. JOHN. W. LINDSEY, JOHN W. LINDSEY, WARRANT ISSUED MARRANT ISSUED INDIGENT WARRANT HANDED TO 1900. INDIGENT

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
Do Hall Com	nty.
~ ^ 1	
personally appears 2	Modgers of Die Kall
County, State of Georgia, who being	duly sworn, says on oath that he is a bona fide citizen
and resident of said County and Si	tate, and has resided in said State continuously ever
day of Alin	1823; that he is 27 years old and
	that he enlisted in the military service of the Confed-
erate States (or of the State of	during the war between the States,
and served for the term of J	ears in Company , of #2 th Regiment of
-Ta Voc	; that his physical condition is as
follows: Ildage a	A definite from
diolette min	alice to work for
Cluning.	
that his property consists of the fol	lowing items (1000)
of the value of	Dollars, that by reason of his physical
	o support himself by his own exertion or labor, and
that he receives no pension but the	
	e in the benefits of the Act, approved December 15th,
2년이 보통 10년 10년 17일 18일 18일 18일 18일 18일 18일 18일 18일 18일 18	eof, and makes application for the pension to which he
45 MINUTES AND PROPERTY AND AND THE PROPERTY AND	e heretofore as a resident of Della Ch
county been allowed a pension for th	
Sworn to and subscribed before	
Sworn to and subscribed before	me, this, the 2 L. X longers
19 day of Aun	1900.) Dirath
1.1.1.1. agonace	Ordinary.
1 6 A. 1 . 2 . 2	
State of Georgia,	
Ac Hall Cou	
I, W. M. Ragar	Pace Ordinary of said County,
do certify that I am well acquainted	1 with Ai & Modgero the
applicant in the foregoing affidavit, a	and am well satisfied that the statements made by him
n 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 unde	er my official signature and seal, this 16
(Amx) day of	1900,
your } eal bere.	Think and in
	De The Contract of the Contrac
	Ordinary De Calle County

Note.—The blank spaces must be filled. Note.—Affidavit should not be attested before January 1st, 1930.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
De Kalk County.
Dersonally appears D. G. Rodgers) of De Kalh
County, State of Georgia, who being duty 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 29 day of Xeece 1823; that he is 7/ years old and
by occupation a let Liver that he enlisted in the military service of the Con-
federate States (or of the State of Ga) during the war between the
States and served for the term of 3 (LAW) in Company £, of \$2, th Regiment of A (Law) in that his physical condition is as
follows: Debilitated from act age and
infirmity
that his property consists of the following items C /// C
of the value of CO Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1901. I have heretofore as a resident of Al Kalh
county been allowed a pension for the year 1900
Sworn to and subscribed before me, this the
The day of 1211 1901. Nide 1000 1000
Millardace. Ordinary.
STATE OF GEORGIA,
De Kalk, County.
I, Milli Ragidale Ordinary of said County,
do certify that I am well acquinted with D. L. Rodgers the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
and the second of the second o
day of MM 1901.
Antix July Marshace
Ordinary D. Nach County.
N оте. — The blank spaces must be filled. Noте. — Affidavit should not be attested before January 1st, 1901.

I,		hereby a	uthoriz		
1,					
		of_			
receive and receipt for					
		at	*		ih.
<u>, </u>					
Witness my hand and	l seal, this	day of		. >-1:	1902
			*1		
Executed in presence of	f				
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		+ 1. " 1. "			
	· · ·				
		1 1 1			" (
ıê 8	5			1902.	1 0
	NOTO			1902.	1 4
WOLLED.)	IINDIUM P	424		7, Y Penai	2. 1
Y ENFOLLED.) INT DRIVEIN	S. S	424.		7, Y Penai	DED TO
- 4 -	32.	alb giment#22		7, Y Penai	HANDED TO
- 4 -	10 1 Embrun 102.	Kalb Regiment #72		7, Y Penai	A SALL
. 2 -	902.	agers D.L. e Kalb Regiment 47-8		7, Y Penai	RRANT HANDED TO
R THOSE ALREADY ENROLLED.) No. (6) INDIGENT	1902.	De Halb Regiment 47	WARRANT ISSUED	OHN W. LINDSEY, Commissions of Position.	WAREANT HANDED TO

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, De Kalk County.
Personally appears D. Ro dgess of Al Nach
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 29" day of June 1823; that he is 79 years old and
by occupation a Harner 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 Leas in Company E, of #2th Regiment
of da Vol ; that his physical condition is as follows: weld age and Infirmity
and the contract of the contra
that his property consists of the following items Voul
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 De Kalk
county been allowed a pension for the year 1 901.
Sworn to and subscribed before me, this the
15 day of an 1902.
11111
Till Nogadece Ordinary.
STATE OF GEORGIA,
De Kath County.
1. 11. M. Ragado Ce Ordinary of said County,
do certify that I am well acquainted with 2. D. Rodgers
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 lan 1902.
[Mill Regodace
0 1
Ordinary Le Nach County.

Note.—The blank spaces must be filled.

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

YEAR 1899 COUNTY DeKelb

NAME Rogers, D L

WHEN AND WHERE BORN? Jesper County, Georgia

ENLISTED WHEN AND WHIRE? March 15th or 16th, 1862

RAIK

COMPANY AND REGIMENT? Co E 42nd Georgia Regt.

NAME OF CAPTAIN AND COLONEL?

WC'HITED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHIN AND WHERE SURRENDERED? April, 1865 - Tennessee

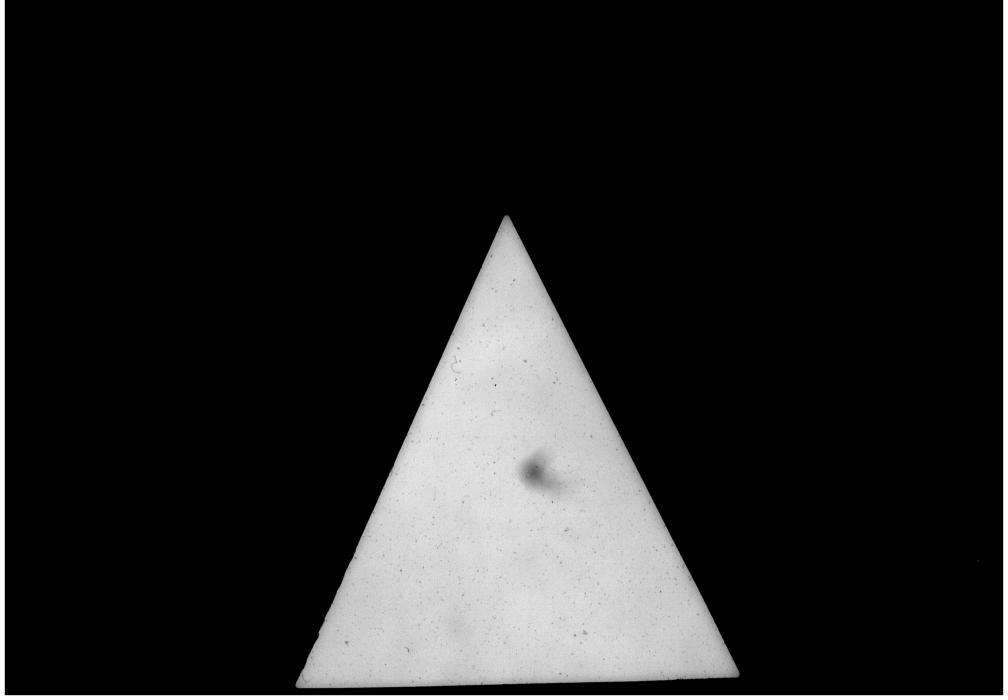
IF NOT PRESENT AT SURRENDAR, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. J M Mercer - same command -

No data



Pagers, Thathe Causing

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

NO. 557

INDIGENT
SOLDIER'S PENSION,

	1900.	
Name _	J.T. Rodgers Dekalo.	CALCUSCOON.
County	Dettal b.	SALTH INTERNATIONS
	WARRANT ISSUED	SAC CASS CASS
	Jon 1) 190	(
	JOHN. W. LINDSEY, Commissioner of Pensions	
	WARRANT HANDED TO	

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

STATE OF GEORGIA, County. hereby authorize to receive and receipt for the pension allowed, and request that he remit same to 1900. Witness my hand and seal, this.... [L. S.] Executed in presence of SOLDIER'S PENSION CODE SEC. 1264.
(For Those Aiready Enrolled.) JOHN. W. LINDSEY, WARRANT ISSUED INDIGENT WARRANT HANDED TO 1900. NO. STY

POWER OF ATTORNEY.

Ι, "		hereby authorize	
		of .	
	* * · · · · · · · · · · · · · · · · · ·	7	
receive and	receipt for the pens	sion allowed and reque	st that he remit
o receive and	receipt for the pens	sion allowed and reque	st that he remit

Executed in presence of

SOLDIER'S PENSION INDIGENT

No bely

WARRANT ISSUED

OHN W. LINDSEY,

For Applicants Heretofore Allowed Pensions.

De Malla County	
Dersonally appears L. C.	odgers of De Hall
County, State of Georgia, who being di	uly sworn, says on oath that he is a bona fide citizen
and resident of said County and Stat	e, and has resided in said State continuously ever
since the 2 day of D.C.	1843; that he is 5 2 years old and
	at he enlisted in the military service of the Confed-
) during the war between the States,
erate States (or or the State of	in Company B, of 35 th Regiment of
and served for the term of	in Company 14, of Jack Regiment of
da of file.	; that his physical condition is as
follows: 42 M gener	; that his physical condition is as and Eresipelas which with work,
in de vice que	w mave a nous
receiling was	nava wax,
that his property consists of the follow	wing items Nune
of the value of	Dollars, that by reason of his physical
condition and poverty he is unable to s	support himself by his own exertion or labor, and
that he receives no pension but the one	
that he receives no pension but the one	
Deponent desires to participate i	n the benefits of the Act, approved December 15th,
Deponent desires to participate i 1894, and the Acts amendatory thereof	n the benefits of the Act, approved December 15th, , and makes application for the pension to which he
Deponent desires to participate i 1894, and the Acts amendatory thereof	n the benefits of the Act, approved December 15th, , and makes application for the pension to which he
Deponent desires to participate i 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the	n the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate i 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before m	the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate i 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before m	the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate i 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before m	the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate is 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before median of the day of Act Maguelace.	n the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate is 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before median of the day of Act.	n the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate is 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before median of the day of Act.	n the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate i 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before many day of the Magazda County State of Georgia,	n the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate is 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before me day of day of the State of Georgia,	n the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate is 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before me day of day of State of Georgia, State of Georgia, Count I, May and Count I, May and Count I am well acquainted we	n the benefits of the Act, approved December 15th, f, and makes application for the pension to which he heretofore as a resident of year 189 ie, this, the 1900. Ordinary. Ordinary of said County, with Ordinary of said County,
Deponent desires to participate is 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before many day of Acra County State of Georgia, Count I, County do certify that I am well acquainted was applicant in the foregoing affidavit, and	n the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate is 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before many day of Act County Co	n the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate is 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before many day of Act County Co	ordinary. Ordinary of said County, with Act am well satisfied that the statements made by him ow he is the individual he represents himself to be
Deponent desires to participate is 1894, and the Acts amendatory thereof is entitled for the year 1900. I have county been allowed a pension for the Sworn to and subscribed before many day of Act County Many and County County Lawrence County County Lawrence County Lawre	n the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189
Deponent desires to participate in 1894, and the Acts amendatory thereof is entitled for the year 1900. I have country been allowed a pension for the Sworn to and subscribed before make the day of the Sworn to and subscribed before make the sworn that I am well acquainted was applicant in the foregoing affidavit, and in his said affidavit are true, and I known that he resides in this Country. Given under day of the sworn the sworn that	ordinary of said County, with well satisfied that the statements made by him ow he is the individual he represents himself to be my official signature and seal, this
Deponent desires to participate in 1894, and the Acts amendatory thereof is entitled for the year 1900. I have country been allowed a pension for the Sworn to and subscribed before make the day of the Sworn to and subscribed before make the sworn that I am well acquainted was applicant in the foregoing affidavit, and in his said affidavit are true, and I known that he resides in this Country. Given under day of the sworn the sworn that	ordinary. Ordinary of said County, the dam well satisfied that the statements made by him ow he is the individual he represents himself to be my official signature and seal, this
Deponent desires to participate it 894, and the Acts amendatory thereof is entitled for the year 1900. I have ounty been allowed a pension for the Sworn to and subscribed before in day of Act County. State of Georgia, Count County of the Acts amendatory that I am well acquainted with the policiant in the foregoing affidavit, and in his said affidavit are true, and I known that he resides in this County. Given under day of	on the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of year 189

Norg.—The blank spaces must be filled.

For Applicants Heretolore Allowed Pensions.

STATE OF GEORGIA,
De Kalh County.
Dersonally appears II. Rodgers 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 21 day of Dee 1843; that he is 57 years old and
by occupation a day recepthat he enlisted in the military service of the Con-
federate States (or of the State of Jy) during the war between the
States and served for the term of 3 Leass in Company B, of 35 th Regiment
of Lallo (; that his physical condition is as
follows: Had fever in the war followd by
eresipelas now chronic and left
that his property consists of the following items Noue
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1901. I have heretofore as a resident of De Mall
Sworn to and subscribed before me, this the
U.V
My day of & (1) 1901.)
Ill Rageda Ce Ordinary.
STATE OF GEORGIA, County, Co J Rodge?
I, With Ragadacon Ordinary of said County,
do certify that I am well acquinted with hel. Codgers the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this The
day of kill 1901.
AMIX M. Ragsduce
Ordinary De Hall County.
Nore - The blank spaces must be filled.

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

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

at

Witness my hand and seal, this day of 1902.

[L. S.]

SOLDIER'S PENSION

1902.

Name Rodgers County De Rallo

INDIGENT

FOR THOSE ALREADY ENROLLED.

No. 6ff

Rodgen G. D.	CODE SECTION 1254.	(FOR THOSE ALREADY ENROLLED.)
3		FOF

JOHN W. LINDSEY,

WARRANT ISSUED

WARRANT HANDED TO

SOLDIER'S PENSION 1903. Name Rodgers. 57. County Se Rall

JOHN W. LINDSEY,

WARRANT HANDED TO

123

WARRANT ISSUED

POWER OF ATTORNEY

County	
	of
receive and receipt for the pension	allowed and request that he remit sai
Y	
	day of
	and the state of t
Executed in presence of	

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kall County.
Personally appears
and resident of said County and State, and has resided in said State continuously ever
since the 2 day of Dee 1843; that he is 59 years old and
by occupation a flassuer 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 Leave in Company B, of 35 th Regiment
that his physical condition is as
follows: Suffering from tresupelar
1 cats of lever inable
to Trong his
W Color Color Color State Color State Color Colo
that his property consists of the following items Soul
of the value of OD Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1902. I have heretofore as a resident of De Rall
county been allowed a pension for the year 1901,
Sworn to and subscribed before me, this the
15. day oftan 1902.
112. A. K.
STATE OF GEORGIA,
De Kall County.
I, Ordinary of said County,
do certify that I am well acquainted with boll to less
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this 15
day of 1902.
(ANIX) All Roy sha ce
(fiere)
Ordinary Sellaw County.
Nory — The blank spaces must be filled.

fuk applicanto heketuruke allumbu pendiund.

STATE OF GEORGIA,
De Kall County.
Personally appears fill Rodgers of Selath
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 Ase 1843; that he is 60 years old and
by occupation a farmer, 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 Law in Company B, of 35 th Regiment
of Ja Val ; that his physical condition is as
follows: Disease and Percenty Infirmity
from Eresupelas molice le with
A. Comment of the second of th
that his property consists of the following items: Aug.
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 Kall
county been allowed a pension for the year 1402 , J. Roy 13, 13
Sworn to and subspribed before me, this the
9 day of ferry 1903.
MM Cassoace Ordinary.
STATE OF GEORGIA,
De / Call County.
21. 1
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
CARTE July day of June 1903.
Seal here \
Ordinary Die Kalk County.

Note. The blank spaces must be filled.

I,			
·,	_hereby authoriz	:e	· · · · · ·
	of		
eceive and receipt for the pension	allowed and requ	est that he remi	t same to
	at		<u> </u>
And the second s			
Witness my hand and seal, this	day of		1904.
		1.	[L. S.]
Executed in presence of		* 12 m	
			•
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	4 5	LINDSEY.	· · · · · · · · · · · · · · · · · · ·
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	Issi	ND6	A CHANDED
OR THOSE ALREADY ENROLLED. SOLDIER'S PENSION 1904.	Regiment J	JOHN W. LINDSEY	WARRANTHANDED TO
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POWER OF ATTORNEY.

to r	eceive	and r	I,eceipt for	the pen	osion allo	fwed, and	- l requ	est tl	*	<u> </u>	*
by	Wit	'NESS II	ny hand and	l seal, tl				•			1905. [1. s.]
		cinca i				7		4	\ \		
Jekall County	(FOR THOSE ALREADY ENROLLED.)	NoVZ	SOLDIER'S PENSIO	1905.	Name Jalla rues	Co. 13 Regiment 25	WARRANT ISSUED	123 180	JOHN AW. LINDSEY, Commissioner of Persegua	WARRANT HANDED TO	CEO, W. HARRISON, MANAGEP, FORGSFATE PRINTER. ATLANTA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS. STATE OF GEORGIA. Ackall County. Personally appears J. J. Rodgers 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 day of Lac 1849; that he is 4 vears old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 years in Company 13, of 35 th Regiment of Slorges The ; that his physical condition is as follows: Never and Enzyleus Officting Urain and years hields. that his property consists of the following items: none of the value of th condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of DEKULO County been allowed a pension for the year 1903 of Radges Sworn to and subsoriped before me, this the 13 day of Jany 1904. STATE OF GEORGIA, 12/Call 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

Note.—The blank spaces must be filled.

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

County

day of famulays

Ruffall County.)
Personally appears J. J. Rogues of Cultach
County, State of Georgia, who, being duly sworn, says on oath that he is a bonu fide citizen
and resident of said County and State, and has resided in said State continuously ever
since theday of18 ; 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 13, of J. th Regiment
of Ja Vole ; that his physical condition is as
follows:
that his property consists of the following items:
man and the second seco
of the value of Dollars. I am now earning,
by my labor, Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1905. I have heretofore as a resident of
County been allowed a pension for the year 1904.
Sworn to and subscribed before me, this the
10 day of June 1905. July 160ger
Canus Released Ordinary.
STATE OF GEORGIA, County.
County.
1, Munica If Very grdinary of said County,
do certiff that I am well acquainted with find trajects
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
1 1.1 .1 .11
Given under my official signature and seal, this
day of Jany 1905.
Janus Reflecte
(Amx)
Soul Soul County. Ordinary Author County.
** mi 11-1

STATE OF GEORGIA.

Norg.—The blank spaces must be filled.

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

STATE OF GI	1	1					
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4	ongers	at_	Lu	100	ua.	Ca	
(by				2			
WITNESS	my hand and seal,	this	th day	of fa	w	1906.	
		1.7	Rod	2029		[L.	s.]
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Janua!	Plyone	-				V.	
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SE BE	500	2881	Reg	7	E Com	7	
Cook Section 100		2/2	Regiment WARRANT ISSUED		JOHN W. LINDSEY Commissioner of ERAFF HADED 1	7	
COOR SECTION TEXT. HOSE ALREADY ENROLLED. No. 760		100	# 3		JOH	6	
	CONTRACTOR OF A STATE	10	MA		P	V	

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POWER OF ATTORNEY.

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to by	J.U.	and r	eccipt for		at	wed, an	d regard	est that	he ren	it sam	e to
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3	Cons Secrior 1254.	1	R'S P	000	3/2	Regiment	WARRANT IS	JOHN W. LINDSEY	Commissioner of	S. S. S.	
let.	Col THOSE	No.	DIE	16	20	0	WA	THOF	WARR	S J S	

State of Georgia,
County.
1 . (40.
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 eve
since the 5 day of Nov 1837; 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 of in Company , of 35 th Regimen it that his physical condition is a
follows: there ity
that his property consists of the following items:
of the value of Dollars. I am now earning
by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th 1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1906. I have heretofore, as a resident of Rald
Sworn to and subscribed before me, this the day of familiary 1906.
James Lywrys Ordinary.
State of Georgia,
County.
do certify that I am well acquainted with 110 yers
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himsel
to be, and that he resides in this County.
Given under my official signature and seal, this
day of fancary 1908.
Ans June Theory
your ordinary Rall County.

Note.—The blank spaces must be filled.

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

LOW WLLTGWILD HERELOLOKE AFFORED LEUZIOUS

State of Georgia,
A 11 11
County.
Personally appears & Cogent of Dekall
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 farmony 1843; that he is 6 4 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 3, of 31 th Regiment
of that his physical condition is as
follows: Infinitely and Poperty
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 J. Practiques
A 8 day of January 1907.
James R. Gentrale Ordinary.
54-4
State of Georgia,
DEKall County.
I, Janus Range Ordinary of said County,
do certify that I am well acquainted with & Rosen
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal this
day of January 1907.
James P. George
Ordinary De Kall County.
bere County.

3. W. Lindsep. Commissioner of Densions. Hilanta, Ga:

Dec. 22, 1899.

HON. ORDINARY,

. Dear Sir :

Claims stated below have been approved and will be paid with others of like class in 1900 if the appropriation to be made by this General Assembly so warrants. Each claimant must make the same affidavit in your presence as those heretofore paid, and you will forward with other claims of same class. Rejected claims have been mailed to you. Blanks will be mailed about 26th Dec.

Respectfully, Mark take J. W. LINDSEY,

Indigniti added or 1900 Krapno des.

levery en En Jung 47 Since dem pension was qualit mr & Royers has removed to and is many a Resident of Destall loving Minsteling Decrain Se will lounty, 3 INVI Captaa, citizan in and for said County do pureby certify they Me 1. Rodgers is the identical The rein referred to in about Withers new hand and real of the Jan 17th 1990. Illesidace, Ordinan,

NAME Rodgers, J.T.

YEAR 1900 COUNTY DOKALD

WHEN AND WHERE BORN? December 2nd. 1843- he is 57 years old.

ENLISTED WHEN AND MERE?

RANK

COMPANY AND REGIMENT? Co. B, 35th. Regt. Ga. Vols.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Contracted fever and erysipelas- affecting brain.

CAPTURED, WHEN AND WHERE?

RELEASED.

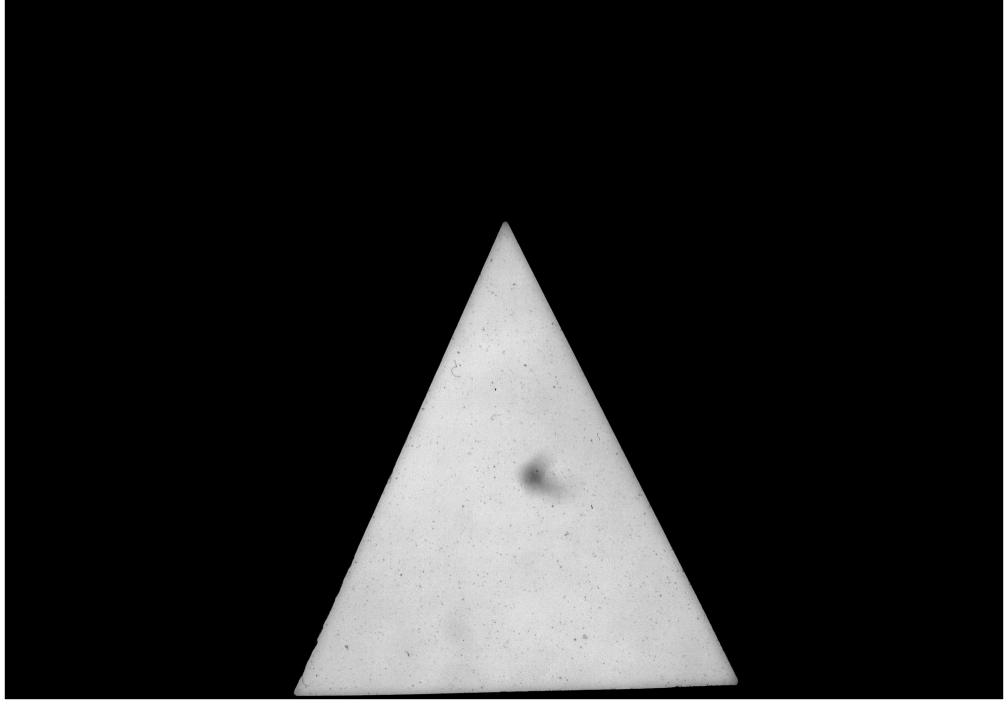
WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES.



Polaine James W.						
Rosgers James W.						
276x xx 1919	•	10 m			5 7	9
				Executed	Witness	1, 1
INDIGENT PENSION.		0 H	4.	P	. y	5
1907		00000		presence or	for the	SORGI
		1/07			pension at al, this	9
Name James W. Rodgers		on the			allowed	Cot
County Destall-		· · · · · · · · · · · · · · · · · · ·			and re	County.
Co. Thompsens all Regt.		i i i i i i i i i i i i i i i i i i i		1	request that	
Approved190					ay he	
JOHN W. LINDSEY, Commissioner of Pensions.					of b	
Commentative by Tolerone.					e to	
WARRANT HANDED TO		Had and the second				
		inie inie				
Ordinary will write name of Applicant, Company and Regiment on back as indicated above.		Toy			190	ereby au
Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr., Atlanta, Georgia.			1		[F. 8.]	ıthorize

FUWER OF ALLORINE I 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 [L. S.] Executed in presence of DIGENT PENSIO name of Applicant, LINDSEY, HANDED ×. WARRANT JOHN

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:

What to your name only where do you reside? (Give, State, County and Postoffice)

Author Waller, Near State, County and Postoffice When and where and in what company and regiment did you enlist or serve? Jany, 186 Caluden S. C. where Twasouche isldet al duty the Battery was detached from iment and served on the Coast the lie in salustins army Were you present with your company and regiment when it was surrendered? No / Si . 8. If not present, state specifically and plearly where you were, when you left your command, for what cause and by whose authority? This feft ou pressell with measles, There been on special detail duty to guard ammunition trains How much can you earn (gross) per annum be your own exertions or labor? Terhof & 1500 10. What has been your occupation since 1865? Domey, and bailing 11. Upon which of the following grounds do you base your application for pension, viz: first, "tyd 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 12. If upon the first ground, state how long you have been in such condition at that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I would fellow the work of the property of the most of able to do any attitude laborary to most of able to do any attitude laborary to most of able to do any attitude laborary to most of able to do any attitude laborary to most of able to do any attitude laborary to most of able to do any attitude laborary to most of able to do any attitude laborary to most of able to do any attitude laborary to most of all and any attitude laborary to most of all and any attitude laborary to most of a laborary to any attitude labora 13. What property, real and personal or iscome, do you possess, and its gross vive? Note at all and mo me me at all only a little bailiffs fee occasionally 14. What property, real or personal, did you possess in 1901 1902, 1903, 1904 and 1905 and what disposition if any, by sale or gift, have you made of same? and so did not dishove of any. 15. In what gounty different reside during these years and what property did you then return for taxation? 16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? Affilt to the support of the control of the support of the suppo stead, or other property? Their ages and how employed? Hes, our wife of the stands of 20. Kie you receiving any pension? If to, 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? Jone at January 71 Ro- Go S Sworn to and subscribed before me this the

OFFICIAL LAK VIT FICULA

	Odomanico(V)
	William D (Ode)
6	Nullican P. Colly of sal State and County, having been presented as a witness in support of the application of James of the application of for pension under section 1254, Code, and after being duly soon true answers to make to the following questions, deposes and conserver we follow:
1	
1	1. What is your name and where dy you reside? William & Colle Stepides & P.O. It Wo Pherson R. H. D. No. 8—
	2. Are you occurred with demice W. Rodello the applicant: if so how
	long have you known him? Yes, Dhow I'mo window since formy, 1864,
) ' '	(Vegri Docatus ya) all timble, we seemed
	When where and in what company and regiment did be entist and how do you know?
	5. Were you a member of the same company and regiment?
	6. How long in he percorn regular minare during surgering 8 64 to Surgetting in trains
	6. How long it he perform regular military days of the Sungfiley is trained. 7. When and there was his command surrendered at the surface of
•	8. Were you present when it surrendered? No. I was pursuadared at Coundered
	9. Was applicant present? No. Ne was swittendered at Camden &C.
	When did he leave his command wood detailed For what cause? Special duty and the
	By what authority he left the was detailed ouglecided from do you know all of his?
	be cause I tremember the circumstances
•	11. What property, effects or income has the applicant? (Give your means of knowledge.)
	What property, effects or income did the applicant possess in 1901, 1992, 1903, 1904 and 1905, any what
	disposition, if any, did he make of same? I W not frow of any,
	13. Has be conveyed away my of his property in the last four years; if so, what was it, and to whom?
	14. What is the applicant's occupation and Obsical conditions He is truck farmer
)	14. What is the applicant's occupation and posicial condition. He is truck farmer.
	15. Is the applicant unable to support himself by labor of any sort; if so, why? If I he tays he work, because 3
	he is ald and meak
	16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? WW MO
	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 specific 1254, Code 2 do not find the physical condition that entitles him to a pension under specific 1254, Code 2 do not find the physical condition that entitles him to a pension under the
	be when the an feeble, and seys he is weak,
~	19. What composes family? What property have they Children's ages and their earning capacity?
	20. What interest have you in the revery of a pension by this applicant? None at all, only
•	Sworn to and subscribed before me, this the Milliam P. Cole
	Tr. S. Ul Foreig Ordinary.
rg	tia, Campbell county.

character, and that his statements are entitled to full faith a credit. Witness my hand a seal of office, this Sep 24 1907. M.S. U. Joyuu Ord'y.

DEKalh COUNTY. Personally came before me Wl Houston both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully , applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: general freak down of mole systems all of which and that we have no interest in said pension being allowed. Sworn to and subscribed before me, this the) ORDINARY'S CERTIFICATE. STATE OF GEORGIA, County, hereby certify 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 County shows that applicant I further certify that the tax digest of Dollars of returned for taxation in his name in 190 property, and in 1902. Dollars of property; in 1903 Dollars of property; in 1904 Dollars of property; in 1905 Dollars of property In my opinion the foregoing claim is Witness my hand and seal of office, thr Before any questions are answered, the Ordinary shall swear applicant and the witnesse in the following with the property of the property of the property of the property of the whole truth, so help you God."
 Additional affidavits may be attached if blank spaces are insufficient.
 In every case the ordinary must certify to the character of the witness, and as to the execution of the proof.

STATE OF GEORGIA,

QUESTIONS FOR WITNESS.

		of said State and County, having been presented
	witness in support of the application of	for penaion
ade	er section 1254, Code, and after being duly sworn true	answers to make to the following questions, deposes and
	vers as follows: What is your name and where do you reside?	
2.	Are you acquainted with	, the applicant; if so, how
	have you known him?	, the applicant, if so, now
3.	Where does he reside, and how long and since then	has he been a resident of this State?
	X	
	When, where and in what company and regiment di	he enlist, and how do you know?
	Were you a member of the same company and re-	giment
	How long did he perform regular military duty?	
	When and where was his command surrendered?	
	Were you present when it surrendered?	
	Was applicant present?	
	If he was not present, where was he?	44
	n did he leave his command ?	For what cause ?
. *	hat authority he left ?	How do you know all of this?

7	WL	
1	What property, effects or income has the applicant?	
//		(Give your means of knowledge.)
Lh	Shoul no incom = 11	So and his Meigh lines
•	What property, effects or income did the applicant p	SE anches Mighbors 98800 in 1,896, 1897, 1898, 4899, 1900, 1901 and 1902,
•	What property, effects or income did the applicant p what disposition, if any, did he make of same?	SE an- his Meghbons 900 in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, It aid Not own Profes
d w	What property, effects or income did the applicant p what disposition, if any, did he make of same? The	SE are fix Meighborn 1896, 1897, 1888, 4899, 1900, 1901 and 1902, 2 aid Mor own nofer
d w	What property, effects or income did the applicant p what disposition, if any, did he make of same of the same of	SE an his Megh bond 000000 in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did have been been been been been been been be
d w	What property, effects or income did the applicant p what disposition, if any, did he make of same? That the conveyed away any of his property in the last	SE an- his Meghbon 900000 in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, I aid Not Dun Profest but to distribute the most of the stand to whom? 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
d w	What is the application and physical control of the applicant per than the control of the applicant per than the control of th	SE an his Megh bond oschoo in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did How own I note to tour years, if so, what was it and to whom? Linday of the own of the own of the own ondition? The The own of the o
d w	What is the applicant is occupation and physical companies to the applicant of the applicant points of the second of the applicant points of the second of t	SE an- his Mighborn opens in 1896, 1897, 1898, 1899, 1900, 1901 and 1902. It did My Oron P nofer tour, years, if so, what was it and to whom? Apply he oron Modern P ondition? Jael Tyddlife a open of his Physical
d w	What is the application and physical column is the application of the application of the application is the application of the application and physical column is the application and physical column in the application and physical column is the application and physical column in the applicat	SE an his Megh bond orders in 1896, 1897, 1888, 4899, 1900, 1901 and 1902, re did Holl own Inofer to tour years, it so, what was it and to whom? I was you have a profession of the property of the profession
d w	What is the applicant upable to support lime if by labor	SE an his Metalborn objects in 1896, 1897, 1888, 4899, 1900, 1901 and 1902, red and the own nofer toury years, if so, what was it and to whom? I want to the own
d w	What property, effects or income did the applicant p what disposition, if any, did he make of same of the same of	SE an his Megh bond objects in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did How own nofer tour years, if so, what was it and to whom? I have been to be to make a of any sort, if so, why? he is your to make a of any sort, if so, why? he is your to make a page of any sort, if so, why? he is your to make a of any sort, if so, why? he is your to make a page of any sort, if so, why? he is your to make a page of any sort, if so, why? he is your to make a page of any sort, if so, why? he is your to make a page of any sort, if so, why? he is your to make a page of any sort, if so, why? he is your to make a page of any sort, if so, why? he is your to make a page of the control of the c
d w	What is the applicant upable to support lime if by labor	SE an his Megh bond oschool 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did Holl own I note to tour years, if so, what was it and to whom? Let May be the own of the ow
of the same of the	What is the applicant upable to support limits by labor	SE an his Migh bond oscies in 1896, 1897, 1898, 4899, 1900, 1901 and 1902. If all March of the property of the four years, if so, what was it and to whom? In out the property of the prope
of the same of the	What is the applicant unable to support limit by labor	SE an his Megh bond orders in 1896, 1897, 1898, 1899, 1900, 1901 and 1902. It four years, if so, what was in and to whom? I will be the four years of the second of any sort, if so, why? I will be the second of
of the same of the	What is the applicant unable to support limit by labor	SE an his Megh bond orders in 1896, 1897, 1898, 1899, 1900, 1901 and 1902. It four years, if so, what was in and to whom? I will be the four years of the second of any sort, if so, why? I will be the second of
The Day	What is property, effects or income did the applicant p what disposition, if any, did he make of same? Has he conveyed away any of his property in the last the applicant of the countries occupation and physical countries the applicant unable to support himself by tabor the was he supported during the years 1898, 1896. How was he supported during the years 1898, 1896. What portion of its support for these four years was	SE an his Megh bond orders in 1896, 1897, 1898, 1899, 1900, 1901 and 1902. It four years, if so, what was it and to whom? I will be the fourth of the second of any sort, if so, why? I will be the second of any
of the party of th	What is property, effects or income did the applicant p what disposition, if any, did he make of same a land that the same of	of the property of the propert
of the party of th	What is the applicant unable to support himself by tabor to be applicant unable to support himself by tabor What of the applicant is occupation and physical control of the applicant unable to support himself by tabor What is the applicant unable to support himself by tabor What portion of his support for these four years was all and open plete statement of the applicant in 1254, Code?	Se an his Meigh born of see in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. It down to what was it and to whom? I will be the own to whom to whom? I will be the own to whom t
P	What is property, effects or income did the applicant p what disposition, if any, did he make of same grant and the applicant is the applicant is occupation and physical control of the applicant unable to support himself by labor the applicant unable to support himself by labor the applicant unable to support himself by labor the applicant unable to support of the applicant of the applicant of the applicant of the applicant unable to support for these four years was the applicant of the applicant of the applicant unable to support of the applicant of the applic	SE an his Migh bond of sees in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did his own I note to what to whom? Let by the own of the o
P	What is the applicant unable to support himself by labor to the applicant unable to support himself by labor What of supported during the years 1898, 1898 What of all and of support for these four years was I was the applicant unable to support himself by labor What is the applicant unable to support himself by labor What portion of its support for these four years was I was the supported during the years 1898, 1898 What portion of its support for these four years was I was the supported during the years to the applicant of the applicant of the applicant of the applicant of the portion of the policant of the applicant of the applicant of the applicant of the policant of the applicant o	Se an his Migh bondows in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did his own nofine to the toury ears, if so, what was it had to whom? I will be the toury the toury the toury ears, if so, what was it had to whom? I will have the toury the toury the toury ears, if so, why? he is not to the toury and to the toury and to the toury and the toury and the toury the t
Par Die	What is the applicant unable to support himself by labor to the applicant unable to support himself by labor What of supported during the years 1898, 1898 What of all and of support for these four years was I was the applicant unable to support himself by labor What is the applicant unable to support himself by labor What portion of its support for these four years was I was the supported during the years 1898, 1898 What portion of its support for these four years was I was the supported during the years to the applicant of the applica	SE an his Meigh bond of see in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did his own notes to what was it and to whom? I will be a supply to the own of the see of th
Par De Continue	What is the applicant upable to support himself by labor the applicant upable to support himself by labor What properly away any of his properly in the last What is the applicant is occupation and physical composed to the applicant upable to support himself by labor What portion of its support for these four years was applicant of the appli	SE are his Meighborn objects in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did his own rope to the four years, if so, what was it and to whom? I will his Physical a of any sort, if so, why? he is not
Par De Continue	What is the applicant unable to support himself by labor to the applicant unable to support himself by labor What is the applicant unable to support himself by labor What is the applicant unable to support himself by labor What is the applicant unable to support himself by labor What portion of his support for these four years was I was the supported during the years 1898, 1898 What portion of his support for these four years was I was all and of piplete statement of the applicant, as 1254, Code; what properly have they? Who composes family? What properly have they? Who composes family? What properly have they?	SE are his Meighborn objects in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did his own rope to the four years, if so, what was it and to whom? I will his Physical a of any sort, if so, why? he is not
De Contraction de la contracti	What is the applicant upable to support himself by labor the applicant upable to support himself by labor What properly away any of his properly in the last What is the applicant is occupation and physical composed to the applicant upable to support himself by labor What portion of its support for these four years was applicant of the appli	SE are his Metal born- object in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. It down was it and to whom? It was it so, what was it and to whom? It was the Drawth Mo I would be a provided to the provided and
12 Carlo	What is the applicant unable to support himself by labor to the applicant unable to support himself by labor What is the applicant unable to support himself by labor What is the applicant unable to support himself by labor What is the applicant unable to support himself by labor What portion of his support for these four years was I was the supported during the years 1898, 1898 What portion of his support for these four years was I was all and of piplete statement of the applicant, as 1254, Code; what properly have they? Who composes family? What properly have they? Who composes family? What properly have they?	SE are his Meighborn objects in 1896, 1897, 1888, 4899, 1900, 1901 and 1902. Let did his own rope to the four years, if so, what was it and to whom? I will his Physical a of any sort, if so, why? he is not

CERTIFICATE OF ORDINARY

—	Georgia.
i, V. D. morgan	Ordinary of said County, do certify
that I personally know ms fw	Rudgus , the applicant, and that she
is the lawful widow of the Asedria	dates, and was on
	Westall County, and was paid
a Pension from DERalh	County for 19 3, and at the time
of his death on theday of	, there was due to
him and unpaid his Pension of	Dollars from the State
	, the within
witness, and he is of a truthful and trustworth	character and entitled to full credit.
Given under my hand and seal this. 3	of accuracy, 1924.
(Seal of Ordinary)	S/ x) minage.
	V.D. morgan, Ordinary
	*X*Kall County
Sounty Due	Le a de a de a de 20 2 O
1924 ication for Pension Du Deceased Soldier (UNDER ACT 1891) paid to his Widow or Dependen Children) BY	How 17, 187 4 ordered paid. FEB 14 missioner of Pensi above in full and an in Department for your the money, your the money, your the money, your bay-rolls for Pension Departmen
or 1	harriage Mor 17, 18 beath May 7 19, 18 pproved and ordered paid. FIB 1 Commissioner of Penson Commissioner of Penson Compassion Department for one you pay out the money, in it with your pay-rolls for high in the Pension Department in in the Pension Department for the pension Department
A Sold in the state of the stat	Bered Breed Line of the truth o
1924 1924 tion for Pen ceased Sold UNDER ACT 1891 to his Widow or Children) BY	The Land ordered part and ordered part and ordered part and and ordered part and a part of the n h your pay-roll te Pension Department
O D D D D D D D D D D D D D D D D D D D	riage of which in the in the
Z ati	rriage or resident of the resi
S Sild a s	of f Maary: Dead ary: Illing filling
Apr. (76 b	Widow of Date of Marr Date of Deatt Appro
	L Da W W
and the second s	and the same of th
GEORGIA,	County
	of said County, my
lawful attorney to collect, and receipt for me in	my name for the Bandan
through my deceased husband,	my name, for the Pension due me for 192,
Pension Roll and paid from	, who was
Attested before me:	, 192
Attended before me:	\ <u></u>

Rodgen, g. w.

(To Be Paid to His Widow or Dependent Children)

(UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA, DEKall County.
Personally before me, the Ordinary of said County, comes Mrs. J. Codque
of said County, who after being duly sworn, on oath says that she is the widow of
Rodaes
and that said Pensioner was on the Pension Roll of well all County
and was paid a Pension of Oue Mundel (8/00 -) Dollars
from DEKall County for 10.74, and that the said Pensioner
died in DeKalk, County on
the 7 day of Way, 1924, and at the time of his death a Pension of \$ 25
was due him from DeKall County and unpaid for 1924.
Applican further swears that she married the said of whole give on
the 17 day of 200 , 18.24, in Declarate County and
State of, and resided with him from the date of marriage to his death as his
lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be
paid to her.
Sworn to and subscribed before me this 3 day of January 1924
V.D. Morgan, Ordinary Mrs J. W. Rodyns, S.
County
(Seal of Ordinary)
AFFIDAVIT OF WITNESS
STATE OF GEORGIA,County.
Personally before me comes, who
on oath says that he knewwhile in life
and that he knows Mrs, the
above applicant; and knows that the said
andwere in due form of law married in the County
ofin the State of on
the day of law and that they were residing
together as husband and wife at the time of his death on theday of
Sworn to and subscribed before me this
, Ordinary
(Seal of Ordinary)
INSTRUCTIONS:

LICENSE MARRIAGE



of Georgia

State

GEORGIA

were joined in Matrimony by Certify that

RELEMBED.

RANK.

The Battery was detached from the Regiment and served on the coast in Johnston's army, from Jan. 1864 until April; 25rd; 1865, when applicant surrendered at Camden S. C. where applicant was on special detail duty. IF NOT

CAPTURED, MIEN AND MURRE?

NAME Rodgers James W.

DIED, WHET AND WOTER

BIRTED.

William P. Cole - Same Command.

duty to guard ammunition trains.

No data.

YEAR 1909 COUNTY Dekalb

November 8th 1845, DeKalb County, Georgia.

38th Georgia Regiment, Joe Thompson Artillery.

Captain C. R. Hableiter.

Sick with measles in service, then went on special detail

ENLIGIED ATEN AND WHIRE? January; 1864, witness states; Savannah, Ga.

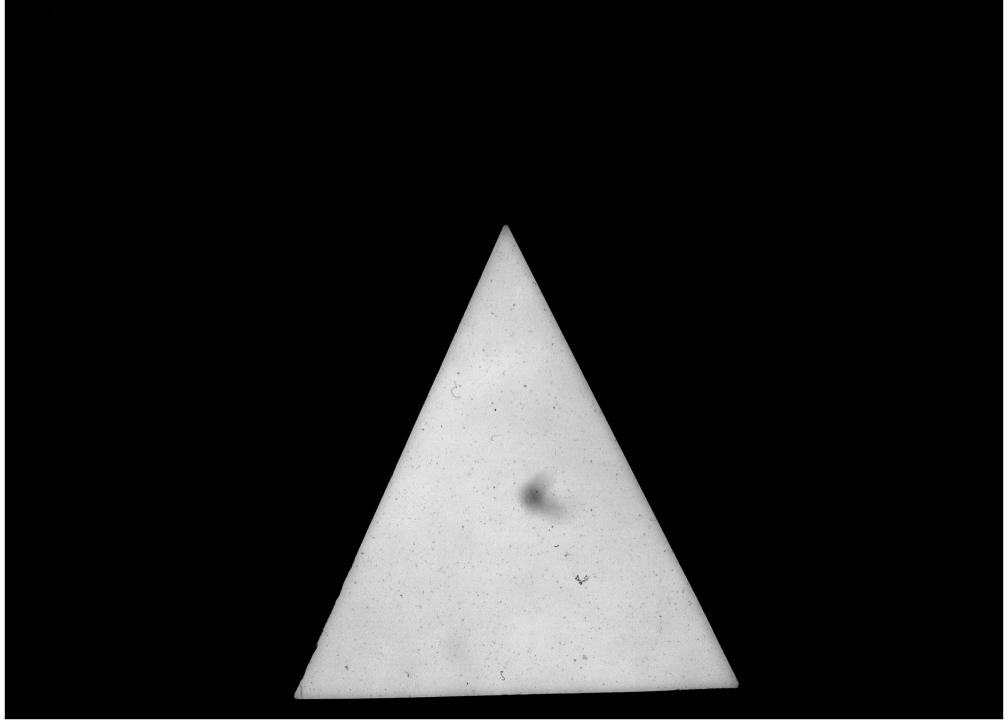
488

County of DeKalb

CERTIFICATE

COUNT

DeKALB



WIDOW'S INDIGENT PENSION 1904. Namellary Jane Roger County Detall Approved . .1904. JOHN W. LINDSEY, Commissioner of Pensions. WARRANT HANDED TO 1904.

ATTORNEY.

County. avail herself of the Pension growed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed

1900, hereby submits her proofs, and after being duly sworn true answers to make to the of said State and County, desiring to hereby authorize following questions, deposes and answers as follows: County, to receive and receipt for the pension allowed and that he What is your name and where do you reside? (Give State, County and Post-Office Jan Rogers Decatur Dilalles by his check or registered mail. remit the same to me at Witness my hand this. Executed in presence of 4. When and where was your husband born—state his full name, and when were you and he married? Orditary. County SEAL. 6. How long did your husband server said Company and Regiment? 6 Mount ad Company and Regiment surrender and was discharged? your tueband present at the jime and place when his Company and Regiment surrendered? was discharge If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? 85. 6 751 10. When and where did your husband die? Savannah 11. Which of the following grounds do you base your application for Pension, vizy: First-Age and Poverty; Second-Infirmity and Poverty, or Third-Blindness and Potty ? Ofe Fuginary 12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight? 214 tion is very fastell do ary works A bat he been your occupation since your husband's death? . I have the work of the been good by your own exertion or labor? ? you have or possess, and its gross value 16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1893, 1900, 1901, 1902, 1983, 1904, and what disposition and you by all or part, have you made of the same? 17. In what calindes did you reside in 1899, 1909, 3001, 1902, 1903 aur 1904, and what property did you return for taxation?

18. How have you been supported since death of husband, and especially for 1899, 1900, 1901, 1902, 1903 ot benurous. Ton hat L. V. · postupper do ou uso dottuopquie and record of more of touch reliened too to attracting one, a theretway 19. How much did your support cost for each of those years, and how much did you contribute by your bear of incents?

20. What was our employment runing 1899, 1900, 1901, 1902 and 1903—how much did you receive 1904. 1904 had us Employment TO GENT PENS Have you a family? If so who composes such family? Give their means of support? Have they LINDSEY WIDOW'S HANDED 22. Have you ever made application for pension before ? 1104 × WARRANT JOHN

STATE OF GEORGIA.	2 3 2 4
Fulton County.	27. How was she supported for 1899, 1900, 1901, 1902 and 1903?
1. 1. 0	of Larring life of the kustana y hem -
Corner Weat, of said State and County, having	28. How much did applicant contribute to her support for last two years?
been presented as a witness in support of the application of Mrs. Many Jane Mogun	29. Give a full and complete statement of applicant's physical condition?
for a Pension under the Act of 1900, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:	They ar old lady in fight health
1. What is your name and where do you reside?	81113
County of fulling State of Georges	30. What interest have you in the recovery of this pension by the applicant? House
2, Are you acquainted with the applicant Mrs. Maky few flyger, Jair,	30. What interest have you in the recovery of this pension by the applicant?
If so, how long have you known her? Da Ving Ther life !	6013
3. Where does she reside and how long and since when has she been a resider of this State?	Sworn to and syberibed before me this 19 - McCovnuct Near
Residen May Decour Defathly 40	day of July 1903
4. When and where was she born?	John & Wilkinson Ordinary,
5. Were you ever acquainted with her bashand? L Was - 0,8600 This	Bill Jullon County. Witnesses.
6. Where did she reside in 1861? The Corruptus fruiting & Ca.	5139
7. When and to whom was he married warf, Hauss Stokes	AFFIDAVITS OF PHYSICIANS.
8. When and where was he born? It Wywroz C. Ca	STATE OF GEORGIA,
9. How long have you known him? Tw Fifty year & Mine	and Discouli
10. When and where did Ottom 7. 12 enly in the war between	1000
the States, and in what Coppany and Regiment did he enlist, and how do you know this? The States	Personally before me comes Joseph Hyreun (102) and
County Georgia in 1863. Co B. 10 Ruy /a state	W. J. Orr (n. 2) , both known to me to be reputable
11. Were you a member of the same Company and Regiment? Lives 4 9uss	physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs.
71. West your memory of the came company and regiment.	
12 How long did be perform regular military duty? Sex muells	such personal examination say that the physical condition is this a general break
12 How long did be perform regular military duty? 5 Cx Marth	exercise brings on symptom of belake
13. When and where was his Company and Regimers surrendered and discharged from service?	as that she is mable to make a cultita
At you go in Try 1864	huself at any these of work
14. Were you with the Commonwhale it surrendered?	and we have to interest in said pension if allowed.
15. Was I think he was of from the husband of applicant present?	
19. The fusional of approant present:	Sweet to ful subscribed before me this 31 Joseph H Green & D
16. It not present, where was he?	James Reverse Ordinary, W.S. Gir. M. S.
17. When and where did he leave his command? Rome Ga	
For what cause? June d' Servi e assirina	Owney County
By whose authority he left? Wilishut Kilima	ORDINARY'S CERTIFICATE.
How do you know all this? (State fully and clearly.)	
Command and Term of Service	STATE OF GEORGIA,
	County
efficient TO.	I, James Ordinary, in and for said County, hereby certify
180 When and where did Offpur Tlogay die?	that the applicant, Mrs. Many & Pogus of resides in said County,
19. Where did he regide at his death and low long had he been a regident of Georgia at his death?	and has been a bona fide resident of this transince all, John life
	and that the witnesses, Mr. 6 M Candler and
State Georgia ell they life sure a fur year of (2.	are of trustworthy character, and that their statements
20. Do you of your own knowledge know that applicant is the law I widow of	are entitled to full faith and codic. I do further certify that before answering the foregoing questions, the applicant and said witnesses took the
21. Has she remained unmarried since her soldier husband's death, and is now his widow?	oath herein prescribed, and the full text of the amdavits was read to the applicant and witnesses before the same
The is still his widow here Marridaine	was signed and subscribed. 1 turther certify that the tax digest of
22. What property, effects or income has the applicant, if any, an how do you know this of your own	returned for taxation in her own name in 1899
knowledge! No firstfurty save a little crokimus.	of property, and in 1900
	in 1901 dollars worth of property,
23. What property, effects or income did applicant possess in 1699, 1990, 1991, 1902 and 1903 and what disposition did she make of it?	in 1902 dollars worth of property, and
disposition did she make of it?	if 1903/1/400 Jellars worth of property.
OI U.A. Line and any anada in last two areas as also day areas is not at the	Witness my hand and official seal this 130 day of July 195
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to	in touris blings with minimum
Show as about the land about to leave it as	SEAL.
25. What is applicant's physical condition and her chances and ability to sarn a support	County. County. County. County. County. County. County.
Shell an exclude latt about letter deren of all	words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole fruth; So help you God."
Author the the the state of the	Additional affidavits may be attached, if blank spaces are insufficient All affidavits must be made before Ordinary.
and a second second	 Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since the 9th April, 1865, not entitled.
To make her leving of is leving with her	County Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will frue answers make to each of the questions asked of you, and the evidence you shall give will be the whole fruith; Eo. help you God." Additional affiliarity may be attached, if blank spaces are insufficient Attachman affiliarity may be attached, if blank spaces are insufficient Only will be the standard of the standard while they were soldiers need apply—and are now wildows. Those married since the but, April selfs, no ontitled Willnesses and two Physicians are necessary to make out claims. Attach certified copy marriage license in every case, or show why it cannot be obtained.
d'un chan	

POWER OF ATTORNEY.

ST /	DeKAL I, Many		COUNTY.	} ~	<i>@</i> 47	, her	eby authorize
to re	eceive and receip	ot for the per	at		·		emit same to
day	of Jann 7 Executed	in presence	1907.	Vinas		Roge	1. S.]
Ja	mu RG	rding	en				
in a							
in Jane numbro	2.	ENSION,	131, 1907. Rozers	County,	Regiment.	Peu	TO TER, ATLANTA.
ew, Muny Survey or Those Heretofore Pai	1907 No. 25	DOW'S PENS	For year ending Dec. 31, 1907. PAID TO PAID TO THE THE ROYES.	DeKALB.	Co. B. Kato Greened R. Indsey	Commissiones WARRANT ISSUED	AND HANDED TO LOS NO. W. HARRISON, STATE PRINTER, ATLAN
Poder 200		MIDO	For ye	Widow of Ostare	Co. 8 Kat		W 030

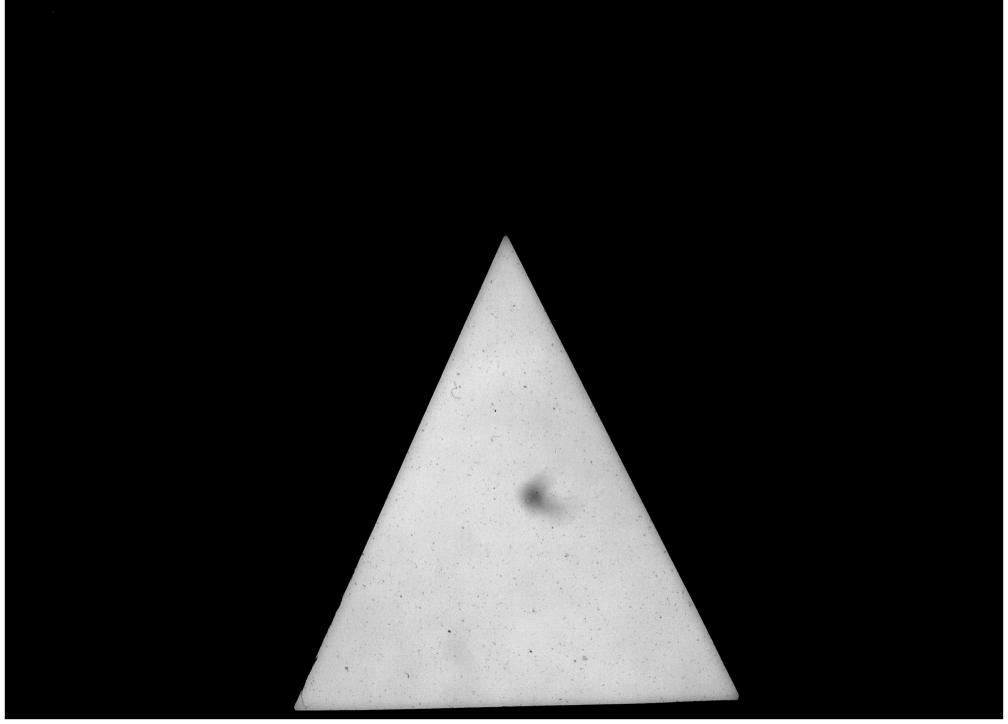
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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 resident of said State continuously ever since. That she is the Widow of Who was a soldier in Company who was a soldier in Company Regiment of Regiment of Regiment of Soldier, that he collisted in said regiment on or about the month of the day of the day of the Juffice Type and that she has never married since his death aforesaid, and that she became his wife in the year 18. I have been allowed an Indigent pension as a resident of DeKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of Janey 1907. Sworn to and subscribed before me and the state of Georgia, Post Office Decature State of Georgia, Ordinary Post Office Decature State of Georgia, Ordinary of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County, certify that I am well or the county of said County of said County of said County or said County.		GEORGIA, DeKALB.	PERSONALLY COMES Mrs. Mary Jane Rogers	
DeKALB. State of Georgia, and that she has resident in said State continuously ever since. That she is the Widow of Who was a soldier in Company Who was a soldier in Company B. of the State Guard. Regiment of Wolconfeers, that he enlisted in said regiment on or about the month of the and served in the Army up to the day of the Grand State of Georgia, and that she has never married since his death aforesaid, and that she became his wife in the year 18. I have been allowed an Indigent pension as a resident of DeKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me this Georgia, County. Post Office Decature Grand State of Georgia, County. Ordinary Post Office State County, certify that I am well-			1/1	
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 hecame his wife in he year 18. I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of January 1907. Camara County. Co	A STATE OF THE PARTY OF THE PAR	MAID		
Color Roy ALB. Ordinary of said County, Contact State State State State State of Georgia, County, Ordinary of said County, County, Ordinary of said County, Certify that I am well- County, County, County, County, Ordinary of said County, Certify that I am well- County, Ordinary of said County, Certify that I am well-				
Regiment of Volounfeers, that he collisted in said regiment on or about the month of 186	continuously ever sin			
Colounteers, that he enlisted in said regiment on or about the month of	a		The state of the s	iny
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 I have been allowed an Indigent pension as a resident of Dokal B. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of Janey 1907. Jane Post Office December 4. Jane 1906, and 1907. State of Georgia, Ordinary of said County, certify that I am well				
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 he year 18 I have been allowed an Indigent pension as a resident of Dokal B. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of Farry 1907. January Post Office December 35 County, Ordinary Dost Office December 45 Ordinary of said County, certify that I am well	Volounfeers, that he	enlisted in said regiment on	or about the month 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, and that she became his wife in the year 18 I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the ear ending December 31, 1907. Sworn to and subscribed before me day of Janey 1907. Also day of Janey 1907. Post Office December 4. State of Georgia, Ordinary of said County, certify that I am well	186, and served	I in the Army up to	186 That he died	on :
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the ear ending December 31, 1907. Sworn to and subscribed before me day of Janey 1907. Lis County, Ordinary Post Office December 31, Janes R. Storge Ordinary of said County, certify that I am well	the	day of	made and the same	
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the ear ending December 31, 1907. Sworn to and subscribed before me day of Janey 1907. Lis County, Ordinary Post Office December 31, Janes R. Storge Ordinary of said County, certify that I am well	, ,	age and of	efericity.	
I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of January. January 1907. State of Georgia, County. Ordinary of said County, certify that I am well		<u></u>		
I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of January. January 1907. State of Georgia, County. Ordinary of said County, certify that I am well	*			
I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of January. January 1907. State of Georgia, County. Ordinary of said County, certify that I am well				
I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of January. January 1907. State of Georgia, County. Ordinary of said County, certify that I am well				
I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of January. January 1907. State of Georgia, County. Ordinary of said County, certify that I am well				
I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of January. January 1907. State of Georgia, County. Ordinary of said County, certify that I am well	• • • • • • • • • • • • • • • • • • • •		and the state of t	
I have been allowed an Indigent pension as a resident of DOKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the car ending December 31, 1907. Sworn to and subscribed before me day of Jacques 1907. August Post Office December 31 Ordinary Ordinary of said County, certify that I am well	Deponent swears tha	t she was the wife of said d	leceased soldier, during his service in the Army a	s a
I have been allowed an Indigent pension as a resident of DoKALB. County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the ear ending December 31, 1907. Sworn to and subscribed before me day of January 1907. Discribed December 31, 1907. Post Office December 31, January State of Georgia, Ordinary of said County, certify that I am well	soldier, and that she	has never married since l	his death aforesaid, and that she became his wife	• in [∉]
Sworn to and subscribed before me day of Jacques 1907. Sworn to and subscribed before me day of Jacques 1907. Post Office Decarded States of Georgia, Ordinary of said County, certify that I am well	the year 18			
Sworn to and subscribed before me day of January 1907. Sworn to and subscribed before me day of January 1907. Discuss Post Office Deadling Grate of Georgia, Ordinary of said County, certify that I am well	I have been all	owed an Indigent pension a	as a resident of DOKALB.	
Sworn to and subscribed before me day of Jane 1907. Sworn to and subscribed before me day of Jane 1907. Jane Post Office Deadling Grate of Georgia, Ordinary of said County, certify that I am well	County, under Act 19	900, for the year 1906, and	now apply for the pension provided by law for	the
Sworn to and subscribed before me day of Jany 1907. Amus R. Grange Ordinary. Dost Office Dearling Grange State of Georgia, Ordinary of said County, certify that I am well			11.0	
State of Georgia, Ordinary of said County, certify that I am well				-4
State of Georgia, Dok ALB. County. Ordinary of said County, certify that I am well	/4		Place laine Borne	
State of Georgia, Ordinary of said County, certify that I am well	(1	11 1		
DoKALB. County. Ordinary of said County, certify that I am well	runus/23	Mary Ordinary	Post Office. Dicalur.	-
DoKALB. County. Ordinary of said County, certify that I am well		And the second s	and the second s	9
Ordinary of said County, certify that I am well	State of Comm	1-	James R. Hearns	8
equainted with Mrs. Mary Jane Rogers , who made the above affidavit, and	DoKALI	B. County.	Ordinary of said County, certify that I am w	rell-
m satisfied that the facts therein stated are true, and I know she is the individual she represents	acquainted with Mrs.	Mary Jane Ro	Ordinary of said County, certify that I am w	rell-
erself to be, and that she has continuously resided in this State since the	acquainted with Mrs.	Mary Jane Ro	Ordinary of said County, certify that I am w	rell-
	acquainted with Mrs.	B. County. Than Jane Ro	Ordinary of said County, certify that I am w , who made the above affidavit, a ne, and I know she is the individual she represent	rell-
Given under my official signature and sent this the day of 17.	acquainted with Mrs. am satisfied that the thereoff to be, and that day of	B. County. Mary Jame Rogards therein stated are true t she has continuously resi	Ordinary of said County, certify that I am ways affidavit, and I know she is the individual she represented in this State since the	rell-
Man Ali	acquainted with Mrs. am satisfied that the therself to be, and that day of	B. County. Mary Jame Rogards therein stated are true t she has continuously resi	Ordinary of said County, certify that I am ways affidavit, and I know she is the individual she represented in this State since the	relland its
Seal \	acquainted with Mrs. am satisfied that the herself to be, and tha day of	B. County. Mary Jame Rogards therein stated are true t she has continuously resi	Ordinary of said County, certify that I am ways affidavit, and I know she is the individual she represented in this State since the	relland its
NOTE - All blanks must be filled.	acquainted with Mrs. am satisfied that the herself to be, and that day of	B. County. Mary Jane Rogards therein stated are true t she has continuously resi 18 y official signature and sea	Ordinary of said County, certify that I am ways and I know she is the individual she represented in this State since the day of July 19	vell- and ats

DECATUR. GA.

194

Georgia Dekall County This is to certify that (I Knew Osborn Progens of the County of newton and State as Grove in the Confedrate dervis in august 1864 In Company 13 10 Regiment, Georgia State Eguarde tool John & Fland was Col'as said Regiment also said Osborn Rogens was Adduling of Laia Regiment Ne inlisted for 6 months his Company & Regiment was distigned at Rossing Georgia repor the expiration of his time of entistiment Hely 1864 I was Captin of Company & in said Regiment and I Knist a this of My own Knowledge Sworn to and Subscribes before me Left 28#7905 Telettent Gandle Caso Co A Janus Ryword to gh. St. Ec. d



Ordinary's Certificate

De Nallace E.		
No. 1. 14. Jac 1920	service; that light and they credit. Sworp under my had they credit be self be they also be to be self be they also be the they also be they also	
Confederate	that that the the that the the the the the the the the the th	
Soldier's Application Under Act 1910—As Amended by Act of 1919.	All field , a F	CE CORGIA
County Delalle Name & W Rose Rose	CASE TO SECULATE TO SECULATE TO	E
Company Olsh	of said county a seal of office the Seal of office the County. County were the Ordinary you will true away so help you God. Witcheld if blank sporoe the Ordinary you will true hank any force the Ordinary store the Ordinary wary.	
Regiment 3 4 5 Ga 3.7 Va Res	e chis.	NTY.
Approved	were duly sworn and their staten 26 - day of 16 - Ratt Ill swear applicant make to each of the same the county in which the	on is the
	the struck of said county and were duly sworn by me before signing the foregreen fruithful and trustworthy and their statements are entitled to full faith an trustworthy and their statements are entitled to full faith an entitle seal of office this 16 day of 50 day	
	the with a pine before since the continues are entitled to the continues of the continues o	Count
J. W. LINDSEY,	before signing the f before signing the f e entitled to full fait C O A C O A D D D D D D D D D D D D	County, certify that represents himself to
Commissioner of Pensions. Byrd Printing Co., State Printers, Atlanta.	faith an faith and faith world he evidence an resides an	

10-20-1919

Amended by Act 1919

Questions For Applicants to Answer

4	EwRose of said State and County, hereby applies
for the pe	ension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits
	statement, with his testimony to make out the same, and after being duly sworn true answers to
	ne questions propounded, answers as follows, to-wit:
	t is your pame and where do you reside! (Give County and Rost office)
2. How	long and since when have you been a continuous resident citizen of this State!
3. Did	you callst in the Army of the Confederate States or in the organized militia of this State from
4. Whe	n and where and in what Company and Regiment did you enlist? (Give the arm and class of Warch 1864 Upon County Ga Company of 1 5 4
5. How	long did you emain in the actual military service with said Company and Regiment! (Give ischarge)
	n and where was your company and Regiment specialized of discharged from the Services
7 War	you actually present with your command when it was surrendered or discharged to was
	bu were not actually present, state specifically and clearly where you were
	re was your command when you left it? And Mad least
	what cause did you leave?
	what cause did you leave!
	how long was your leave granted? In what way?
	did you not return to your command after leave expired! ** ** ** ** ** ** ** ** ** ** ** ** **
	t effort did you make to return?
	you captured during the warf was not
	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 1 212
	e you ever applied for the Georgia Pension and had it refused? and for what cause it was
	have not
	cm
Name of the Owner, when	to and subscribed before me, this the
Sworn t	
Sworn t	2 day of 19/9

	STATE OF GEORGIA,
	Usan COUNTY.
	Anthem Marsey of said State and County is hereby presented
	as a witness in support of the application of
	by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to
	make to the questions propounded, answers as follows:
	1. What is your name and where do you wide! Author W Keing
	2. How long and since when have you known C
	3. Where does he now reside, and since when has he been a bone fide, continuing resident in this State, and how do you know! In attauture Resident all the life of the hour hum have been a year.
	4. When, where and in what Company and Regiment did Enfloys enlist during
	war from 1861 to 1865? (Give date and place.) Feb 1864 32 Ga Resear Co. K
	5. How did you obtain your information of this Service Entrated same Quant
	6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment! (Give date) French 1864 The
	7. When and where was his command surrendered or discharged (give date and place) africks to
	8. Were you personally present at the surrender 1 - AR2
otton on this gan W. at	10. Was the applicant personally present with his command at surrender
which and first warp, input with 'g	11. If not where was he and how came him there?
the part of the first and the	12. When did he leave his command the leave his command where was his command
Services synchrotic Suppliers special services for the pro-	when he left it For what cause did he leave? Row Rusur By whose authority did he leave Row and how
etten opens over and tolk at y	long was he granted leave? And Kurn X How do you know
territorio del destrucción de la companyo de destrucción de la companyo del companyo de la companyo de la companyo de la companyo de la companyo del companyo de la company	all that you have stated to be true! If of your own knowledge, tell clearly and specifically of my
A M se, when and whose I have a prison acte who held and when were will returned a	That 13, In what way was he prevented from returning to his command? There left Comment How do you know?
each bound also suggested may make the second the second and the second	
to Make concerns applied for the Georgia Pension and had it retused and for what are a way	14. What effort did he make to return to his command and how do you know!
Threadle for	15. Was applicant captured as a prisoner. If so, when and where?
Swern to min subscribed before one, time to the	In what prison was he held!and
Company of the second s	Sworn to and subscribed before me, this the
(Visibit)	Sworn to and subscribed before me, this the Lothing W × Koracy Lothing W × Koracy Lothing W × Koracy
Country 1 Country 1	6 & Better Uning
The second of th	of upon County.
	CEVE.

October 16th, 1919.

Georgia, Upson County:-

I, C. E. Bethel, Clerk of the Superior Court in and for said county, do hereby certify that owing to the disability on account of the sickness of the Ordinary of said county of Upson, I have read over to the witness A. W. Kereey *** the questions and answers in the foregoing application of E. W. Rose and that the Oath was administered by me before signing.

Gifen under my hand and Official seal of office Oct 16th, 1919.

Clerk Superior Court, Upson County.

COUNTY Dekalb

NAME Rose, E.W.

THEN AND MERE BORN? A resident of Georgia since birth, 1847.

ENLISTED WHEN AND WHERE? March 1864, Upson County, Ga.

RANK.

COMPANY AND REGIMENT? Co. K. 3rd Ga. Reserves Feb. 1865 transferred to Co. K. 5th Ga. Reserves.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

· CAPTURED, MEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? April 1865, Greensboro, N.O.

IF NOT PRESENT AT SURRENDER, WHERE "THE YOU?

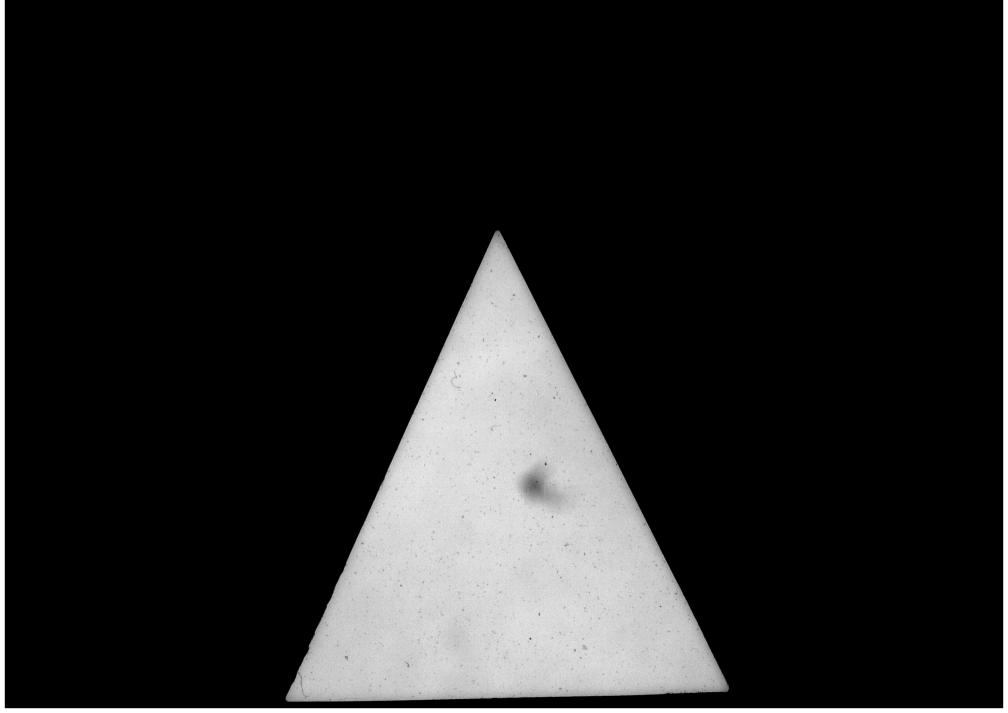
DIED, WHEN AND WHERE?

BURLED.

WITNESSES. A. N. Kersey

Same command

No data,



Rose, M. H. (Mus)
Dikalic In. A.
G. K. Jon 1911
Widow's Application UNDER ACT 1910.
Who Lost a Husband During War as a Soldier, Remarried and is Now a Widow.
Name My M. A. Roso
Soldier Husband's Name My Miller A. J. F. Ross
Companye Y Regiment Name of Last Husband
Approved

J. W. LINDSEY,

Widow's Application

UNDER ACT 1910.

Who Lost a Husband During War as a Soldier, Remarried and is Now a Widow.

County D. H. A. R. A. Soldier Husband's Name Widow.

Regiment

Name of Last Husband

L. W. LINDSEY.

Companye J. W. LINDSEY.

Company

Personally before me comes 1944 M.A. Poss of said county who after being sworn on out asys that she became the lawful wife of D.A. Miller on the day of S.A. 1867 and the did on the	d
as that she became the lawful wife of DAMILLO, on the day of Art 1867 and the did on the day of State time and was on the day of State time at which are the day of State time at the result of an injury received will line of duty on the day of State time at the result of an injury received will have on the day of State time at the stat	d
day of State into the	nt .
nat on the 13 day of Jamy 1880 she was married to J. W. Hold of Defall County, and that on the 15 day of May 1886 in the count	
nat on the 13 day of Jamy 1880 she was married to J. W. Hold of Defall County, and that on the 15 day of May 1886 in the count	
nat on the 13 day of Jamy 1880 she was married to J. W. Hold of Olikall County, and that on the 15 day of May 1886 in the count	V
Defalt County, and that on the 15 day of May 1856 in the count	íf
	у .
State of the said to the died and the	at
That she was on the 4th day of November, 1908 or at the death of her last husband left in the us	90
ossession and control of the property. Stated in schedule (A)	
acres of land cash value of	
Horses or mules North The	
Hogs and cows and other stock O and Frank	
The work of the state of	0
actual income and savings	
Total Man	
SCHEDULE B.	
That since the 4 of November, 1908 or the death of her husband, she has sold or given away the	ne
lowing property of the cash value as follows. Ho working	44.
9	-
m i l i	
Total value	
d that the proceeds were disposed or	74
SCĤEDULE C.	
That she is now in the use, possession and control of the following preparty at the cash value attach	
acres of land of the eash value	
Horses and cows of the cash value.	
Hogs and other stock	
	_
Total value of all property	
d that the valuation of all of said property, is stated at its true cash value.	1.
Sworn to and subscribed to by me this	*
WILL TR GUTGe Ordinary.	
Wellaly County Ili III. Il. Boss	
Mes Me (M. Valor)	TA
Affidavit of the Witness to the Service and Death of Soldier	
Husband and Her Marriage.	
TATE OF GEORGIA,	
Diraco County.	
Personally before me come Johns Bay who after being duly sworn on oath says that	ha
Personally before no come with the enlisted in Company 1 = 35 Regiment of GA	
terans on the day of Suff 1861	
nd that on theday of Sant186.2.he was killed or died as a result of the injury received	
while in line of duty as a soldier, in the Confederate army, and that he knows Ma	

W SY.T	on the day of Joseph S&D to one of Mark and the sharp sharp and speak and speak and speak and speak and speak and speak applicant is now a widow. The production of the state of the sharp shar
Swor	nd subscribed before me this /8 day of August /710
anus	July Cordinary. John Barter
A	ekalle County
Af	fidavit of the Witness to the Property and its Value.
TATEO	OF GEORGIA,
the	Rall County. & If Lawhorn
Person	Hally before me John Box Lip who after being sworn on oath says that they are of said County of Delical and that they know Mrs MIN HOM and
ec Holders	of said County of Dellack and that they know Mrs. M. W. Mandand
at she was o	n the 4th day of November or at the death of her last husband, on the/3day
mas	1846 and that he left her in the use, possession and control of property at its true cash
lue, a Tolle	
1	
	SCHEDULE A.
	Lands whose cash value Work
	Horses mules
	- Cows hogs and other stock
	the same of the sa
	Money, notes and accounts
	All other property
	Total cash value of all property.
	SCHEDULE B.
We kno	by that since the 4th November, 1908 or since the death of her last husband she has sold or operty of the cash value of to-wit:
ren away pe	land worth You
	Horses and mules
	Cows, hogs and stock of all kind.
	any and all other property
	Total cash value
d we know	that the proceeds of this property wereits full cash value and was disposed of
tate fully.)	CIABAAI
	7,000
	SCHEDULE C.
sh value as	follows, to-wit:
sh value as	follows, to-wit: Land of the cash value of Mone
sh value as	follows, to-wit: Land of the cash value of 20000 Horses and mules, cash value of
sh value as	follows, to-wit: Land of the cash value of Covice Horses and mules, cash value of Cows hogs, and other stock
sh value as	follows, to-wit: Land of the cash value of Covice Horses and mules, cash value of Cows hogs, and other stock Wagon and Buggy
sh value as	follows, to-wit: Land of the cash value of Cows hogs, and other stock Wagon and Buggy Other personal property
sh value as	follows, to-wit: Land of the cash value of Cows hogs, and other stock Wagon and Buggy Other personal property Money notes and accounts.
sh value as	follows, to-wit: Land of the cash value of Hörses and mules, cash value of Cows hogs, and other stock Wagon and Buggy Other personal property Money notes and accounts. Actual income and savings.
sh value as	follows, to-wit: Land of the cash value of Cows hogs, and other stock Wagon and Buggy Other personal property Money notes and accounts.
sh value as	Land of the cash value of Horses and mules, cash value of Cows hogs, and other stock Wagon and Buggy Other personal property Money notes and accounts Actual income and savings

STATE OF GEORGIA. whom I know to be resident and free-holder of said county, that all of said persons were duly sworn by me before signing their respective affidavits and that they are truthful and trustworthy persons and their statements are entitled to full faith and credit.

That the Tax Books of Della County, shows M. I. Rosa returned property to for 1909 none for 190 man for 1918 none Given under my hand and official seal of affix, this the A day of Augst 190 .County Read this note.

1. Before any quostions 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 sliddavits must be nade before the ordinary of the County of the residence of the person to be sworn.

3. All affidavits must be made before the ordinary of the County of the residence of the person to be sworn. The standard of the county of the residence of the person to be sworn.

3. All affidavits must be made before the ordinary of the County of the residence of the person to be sworn.

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3. All affidavits must be made before the ordinary of the County of the residence of the person to be sworn.

3. All affidavits must be made before the ordinary of the County of the residence of the person to be sworn.

4. All affidavits must be made before the ordinary of the County of the residence of the person to be sworn.

5. Attach copies of marriage license of both marriages or prove marriage, by some who know it, or by general. gg Lawhon

POWER OF ATTORNEY.

STATE OF GEORGIA,

_COUNTY.

so, P. Kalb County	Kin		bу	
CODE SECTION 1254. FOR THOSE ALREADY ENROLLED.)		Exe		to receive
No. 195		Executed in the presence of	Witness my hand and seal,	and
INDIGENT		the p	y hand	receipt for
OLDIER'S PENSION		геѕепсе	and s	
1905.		of .	eal, this	the pension
me Plans unty Cotach			is	ofof ion allowed, at
State woofs WARRANT ISSUED		•	day of	and
1/2 1905.				request
JOHN W. LINDSEY,				that he
Commissioner of Pensions. WARRANT HANDED TO				e remit
· · · · · · · · · · · · · · · · · · ·			1905	it. same
GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.			Ö1	a d

POWER OF ATTORNEY.

STATE O	OF GEORGIA		}				
		C				h	ereby authorize
to receive	and receipt for		ision allow			at he	remit same to
byWiti	NESS my hand		· / · · · · · · · · · · · · · · · · · ·				1905.
Exec	uted in the pre	sence of			* * * * * * * * * * * * * * * * * * *		[L. S.
OR THOSE ALREADY ENROLLED.)		1905.	ne Phis	Let Corner 7 ga. WARRANT ISSUED	123 1905.	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO

POWER OF ATTORNEY

· · · · · · · · · · · · · · · · · · ·	ATTON	MEIN	· (1)
STATE OF GEORGIA, COUNTY	}		
1. PRasi	/		hereby authorize
In nash		wints	
to receive and receipt for the pension	at A	quest that he	
by	at	youn,	Ja
WITNESS my hand and seal, this_	10 ch day	of Jan	1906.
		of Ri	190 [L.s.]
Executed in the presence of			· p
On Ning			
Cilli-	(•
		1.12	
1 1 8		906	
ENSIGNED STATE OF THE PROPERTY	18	Pensions	0 11, 7
THE ONLY	Hall ment 7	//2 -	DED 1
ALREADY E. STREET E. STREE	- So -	W. LIN	HAN
No. No.	Re Re	JOHN W	CALL
	X 2	- 15	~: E X

TAN ULL DIAULTA HENDLAND AND MEDATED LENGTAND!
STATE OF GEORGIA,
La Wall County.
2 7 7
Personally appears Plans of Gulface
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 ofin Company, of th Regiment
of Livingia; that his physical condition is as follows: Sufirmity & Porcity
that his property consists of the following items:
of the value of Dollars. I am now earning,
by my labor, Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1905. I have heretofore as a resident of
County been allowed a pension for the year 1904.
Sworn to and subscribed before me, this the
1/2 day of [(111 1905.)
Jamush Gerale Ordinary.
STATE OF GEORGIA,)
I, James 19 Juny 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.
Given under my official signature and seal, this
day of facing 1905.
Samue Received
Afix your County Westall County.
Seal Seal County.

Note.—The blank spaces must be filled.

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

State of Georgia,
De Yall County.
PRace of Malle
Personally appears of County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
County, State of Georgia, who, being outly sworth, says of the said State continuously ever and resident of said County and State, and has resided in said State continuously ever and resident of said County and State, and has resided in said State continuously ever and resident of said County and State, and has resided in said State continuously ever and resident of said County and State, and has resided in said State continuously ever
18 · that he is vears old and
by occupation a, that he enlisted in the military service of the Con-
by occupation a, that he emisted in the war between the federate States (or of the State of) during the war between the
federate States (or of the State ofin Company, ofth Regiment States, and served for the term ofin Company, ofthe regiment, ofthe regiment, of
States, and served for the term of the company; that his physical condition is as
of Deorgia da Do
follows:
C.1. Classing itoms:
that his property consists of the following items:
Dollars. I am now earning
of the value of
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 physical condition and poverty he is unable to support himself by his own exertion or
is entitled for the year 1906. I have heretotore, as a resident of
County, been allowed a pension for the year 1865.
Sworn to and subscribed before me, this the
10 day of days 1906.
James Ryarge Ordinary.
State of Georgia,
De Halb County.)
I fames R George Ordinary of said County,
and acquainted with hase
foregoing affidavit, and am well satisfied that the statements much
the applicant in the foregoing amounts, and I know he is the individual he represents himself by him in his said affidavit are true, and I know 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 farin any 1808.

Affix your seal here

Note.—The blank spaces must be filled.

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

Ordinary

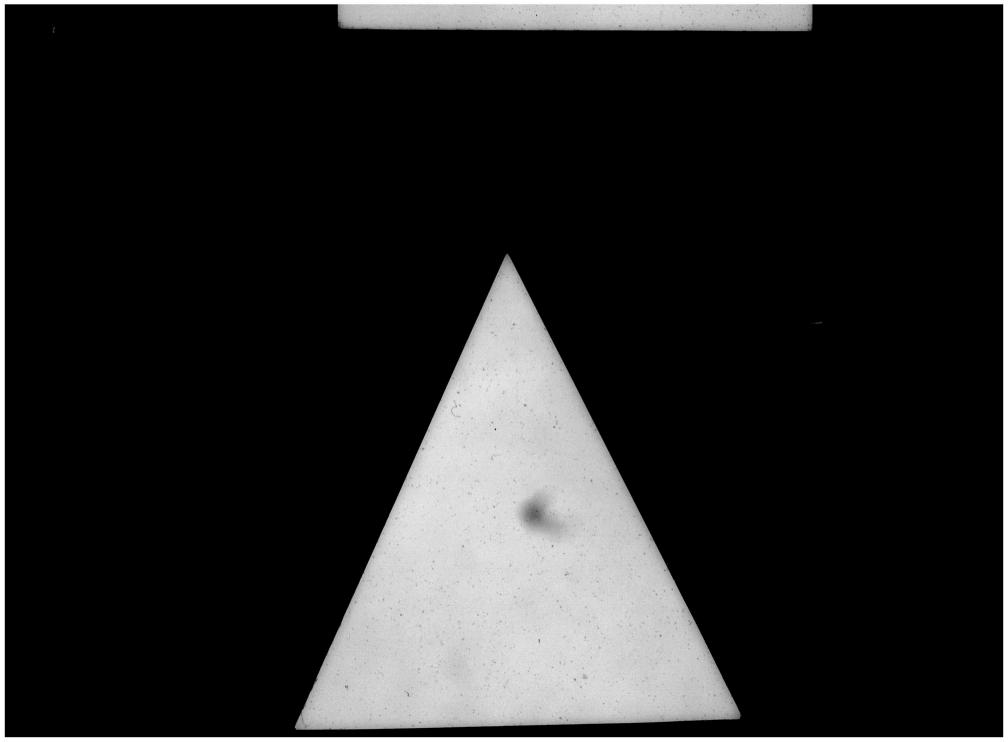
POWER OF ATTORNEY.

	STATEI,	OF GEO	PRGIA,		COUNTY of_	r. }			· · · · · · · · · · · · · · · · · · ·	her	eby autho
	to receiv	e and re	eceipt for	the p	ension a		and r	equest	that	he re	mit same
	byW	ITNESS my	hand an	d seal, t	his		da	ıy of			190′
•		Executed								· · · · · · · · · · · · · · · · · · ·	[L
	****							V			
	to of the second		•								
11	L		- 3 ·		•						
+ 6	LLED CA		SION			1. Ela		/ 1907.	Pensions.	1	MA.
1	T STEEL TO THE STE	0	E	N	Sol	Regiment 70	Skued	12	LINDSEY, Commissioner of Pensions	WARRANT HANDED TO	J. J. WATER, ATLAN
2	CODE SECTION 1254.	No. 7	DIER'S PE	06	3	Regin	WARRANT ISBUED		JOHN W. LINDSEY, Commissioner	SANT HA	LA C
3	COOR SECTION 1264. (FOR THOSE ALREADY ENROLLED)) Ye		7	3	.ty 8	12 N		JOH	WARE	Gro. W. Han
5	3	3	S		Маше	County Co.	*				

State of Georgia. County. Personally appears. 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 20 day of Frely 1844; that he is 63 years old and by occupation a , that he enlisted in the military service of the Confederate States (or of the State of during the war between the States, and served for the term of in Company ... of 7 th Regiment of Su State Troops ____; that his physical condition is as 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. 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_ Ordinary

MINIOUR I ARTHORNY OVER THE VERY NEW TOTAL

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



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 DeKael Name Me She Ross Midow of P. Ross Approved J. W. LINDSEY, 10/27-1915

Widow's Application
To Be Put on Roll in Her Own Right When Hashand Was on the Indigent Roll or Put on Under Act of July 11, 1910.

County O Roll

Widow of Shall

Company J W. LINDSEY.

Commissioner of Pressure

CHAS P. PITD. State Printer, Admin.

CHAS P. PITD. State Printer, Admin.

	-11 4 11 11
	Personally before me comes of said County,
	who, after being duly sworn, on oath says, that she is the widow of the whom
	in the County of Academic State of State of the answeried on the 200
	day of
	in Cful 2 19/4 and that she has not since his death remarried. At the time of his death
	he was a resident of Selfach County, in Mone Mental State of Georgia, and he
	was on the Outlygen Pension Roll of the State and paid a pension of \$ 60
	in Dellach County for 19 / per annum, on account of being a soldier in Company
	Regiment 7th (Volunteers of State Militia.)
	At the death of Assam he was in the use and possession of the following
	property
ι,	of the cash value of \$
a	What property of any kind and of any value have you in your use, control and possession now, and
. 4	the cash value, (State fully.)
	100 Acres land in Carata 22 Show his Del & 1200, 10
	Horses and Mules
	/ Hogg, Cows, etc. day \$ 15.00
	Total Cash value of all property
	That she is now a bona fide resident citizen of said County of
	has so continuously resided since 1836 these
	Sworn to and subscribed before me, this the Mx Ross
	2 1/ donat Colat 10015 Min DMX Noss
	Saula A Somes online
	Saula A Somes online
(day of John 199
(Saula A Somes of Continue
•	of Research County.
•	of Research County.
•	of Research County.
(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 WhomDate of Death of Husband. STATE OF GEORGIA, County.
•	Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Was Lo Kitquarles known to be responsible
(Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Was La Kitaguarlet known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their
(Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Work Personally before me come Work County, who after having duly, sworn on oath, say: that of their
(Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Work County who after having duly sworn on oath, say: that of their own personal knowledge Months of Marriage and to WhomDate of Death of Husband.
•	Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Was County who after having duly sworn on oath, say: that of their own personal knowledge was a who made the foregoing affidavit, is the lawful widow of Province County in the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Province County who are contained to the lawful widow of Provin
	Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come Was County who after having duly sworn on oath, say: that of their own personal knowledge Most who died in Marriage and that she said State of on I day of Africa 1944, and that she
	Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Work County who after having duly sworn on oath, say: that of their own personal knowledge work who made the foregoing affidavit, is the lawful widow of who died in Arthur County in said State of on the day of Affirm 19/4, and that she has not since remarried. That she became the wife of the county on the day of Affirm 19/4, and that she has not since remarried. That she became the wife of the county on the day of Affirm 19/4, and that she has not since remarried. That she became the wife of the county on the day of Affirm 19/4, and that she
	Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Was Le Vistquaria known to be responsible and truthful persons, residing in said County who after having duly sworn on oath, say: that of their own personal knowledge Marriage who died in who made the foregoing affidavit, is the lawful widow of who died in who died in the Saura Sounty in said State of on I day of Harriage and that she has not since remarried. That she became the wife of the saura and wife continuously since and that she and he had resided together as man and wife continuously since. Again that the lawful was the saura and the saura and that the saura and the saura and that the saura and
	Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Word County who after having duly sworn on oath, say: that of their own personal knowledge was an and truthful persons, residing in said County who after having duly sworn on oath, say: that of their own personal knowledge was an an and who died in Additional County in said State of the sai
1	Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. County. Personally before me come Most County who after having duly sworn on oath, say: that of their own personal knowledge Most who died in who made the foregoing affidavit, is the lawful widow of the county who died in the county in said State of the county in said State of the county who died in the county in said State of the county in said State of the county in the same that she became the wife of the continuously since the county of the continuously since the county of the continuously since the county in the continuously since the county of the county of the continuously since the county of the continuously since the county of the county of the continuously since the county of the county
1 Mos	Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Was Le Historia known to be responsible and truthful persons, residing in said County who after having duly sworn on oath, say: that of their own personal knowledge Marriage who made the foregoing affidavit, is the lawful widow of who died in Was Sounty in said State of on day of first 19/4 and that she has not since remarried. That she became the wife of lawful widow on the lawful widow of the said that she day of 1868 and that she and he had resided together as man and wife continuously since. day of First 1868 and that the lawful was the same man who was on the pension roll of said State. Sound who was on the pension roll of said State. Sound who was on the pension roll of said State. Sound was the county when he died.
l mor	Affidavit of Witnesses to Prove Marriage and to WhomDate of Death of Husband. STATE OF GEORGIA, County. Personally before me come Most County who after having duly sworn on oath, say: that of their own personal knowledge Most County who after having duly sworn on oath, say: that of their own personal knowledge Most County who after having duly sworn on oath, say: that of their own personal knowledge Most County who after having duly sworn on oath, say: that of their own personal knowledge Most County who died in County in said State of on County in said State of County County in the same many wife continuously since County Cou
tum	Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come Mos County who after having duly sworn on eath, say: that of their own personal knowledge Most who made the foregoing affidavit, is the lawful widow of who died in Marriage affidavit, is the lawful widow of who died in Marriage affidavit, is the lawful widow of the said State of the said that she has not since remarried. That she became the wife of the said State of the said Stat
tun	Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. STATE OF GEORGIA, County. Personally before me come Mos County who after having duly sworn on oath, say: that of their own personal knowledge Most who made the foregoing affidavit, is the lawful widow of who died in Marriage and that she has not since remarried. That she became the wife of the say of 1868 and that she and he had resided together as man and wife continuously since and day of Marriage Marriage and that the say of 1868 and that she and he had resided together as man and wife continuously since and day of Marriage Marriage and that the say was the same man who was on the pension roll of said State. STATE OF GEORGIA, County. County.

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness) (Under Act Approved August 15, 1904) GEORGIA 4. huetund , clon Personally before me, the Ordinary of said County, comes Fully, who, after being sworn, on oath says that he knew Mus Garah M Ross of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in. County, in this State, on the. and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 7000 per sworn statements fully and completely ITEMIZED hereto attached. Sworn to and subscribed before me. (Seal of Ordinary) CERTIFICATE OF ORDINARY LEKALL 1. V. L. moradi .. Ordinary of said County, do certify that I personally know & Muthudillou citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew My Jarah M Rax 1 while in life and that this was the same person whose name appears on the Pension Roll of LEKall County, and in said County for 192. 7 ..., and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto. Given under my hand and official seal, this (Seal of Ordinary) INSTRUCTIONS: 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid," etc.) "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may

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.

who died without owning sufficient property to pay this bill.

Wekaek County.	2 15 15 15
Personally before me comes Mulvarta & Juil Jan who after being	OR SWOTE OF
oath says, that they are freeholders of said County, and that they know. La S. M. Ro	
said County and knew her said husband	201
day of Jul 1914 that she and he were in the use, possession and control of	
property at his death to wit: 100 acres of land in Frent Lat 2	2
The Mountain destrict	•
of the value of \$ 2.0.0.000. That she is now in the use, possession and control of	the following
property to wit: 100 a ann of land in Land Lut 22 Stone	Mountain
Destant	<u></u>
of the value of \$ 1200	
Sworn to and subscribed before me, this the	1
a day of Oct 1915	age
Ames Regently Ordinary fourt	Jones
W. M. M.	
of County.	F
ORDINARY'S CERTIFICATE.	
STATE OF GEORGIA,	
de chael County.	
I, Jean or Second Ordinary of said County, do cer	eifer falses T
know Mrs. Usa J. M. Ross. 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 ar	
101	w was on the
That I also knowwitness as to marriage an	d I also know
M. Mailes & John M. Jones who I know to be a resident free holder to	
that all of the foregoing were duly sworn by me before signing the respective affidavits and truthful and trustworthy and their statements are entitled to full faith and credit.	that they are
That the tax Books of Action County shows that	
amount of 1908 tor 1908 tor 1908 for 1909 to 585 for 1919 Sworn under my hand and official seal of office this 1955 16 day of Oct	1015
(SEAL.) FORMULA RYLLING TO Ordinary	
Discontinue	County.
NOTES 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the "You do solomnly swear that you will true answers make to each of the questions asked you a	ollowing words

STATE OF GEORGIA,

67

you shall give will be the truth. So help you God.

Additional affidavits may be attached if blank spaces are insufficient.

All affidavits must be made before the Ordinary.

Only widows who married prior to first January 1870, are entitled.

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

Ross, SARALM. (MRS) **Application for Pension Due Deceased Pensioner** (UNDER ACT 1919) (To pay expenses of last illness and funeral) V. D. morgan Ordinary For Mis daril In. Ross Date of Death OLB 1 7 192 9 Amount \$ 100,00 Approved and ordered paid of July N. C. Land.
18 1349 2 9 JOHN W. CLARK, Commissioner of Pensions. Received of & Maryon ord, Syreal Expense June Crumary wil out above in tun 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.

ATLANTA GA Jan. 26 1929

For Funeral Expenses of Mrs. Sarah M. Ross

J. AUSTIN DILLON COMPANY

FUNERAL DIRECTORS

PHONES MAIN 4680

-8

PRIVATE AMBULANCE

Sept. 17 1928.

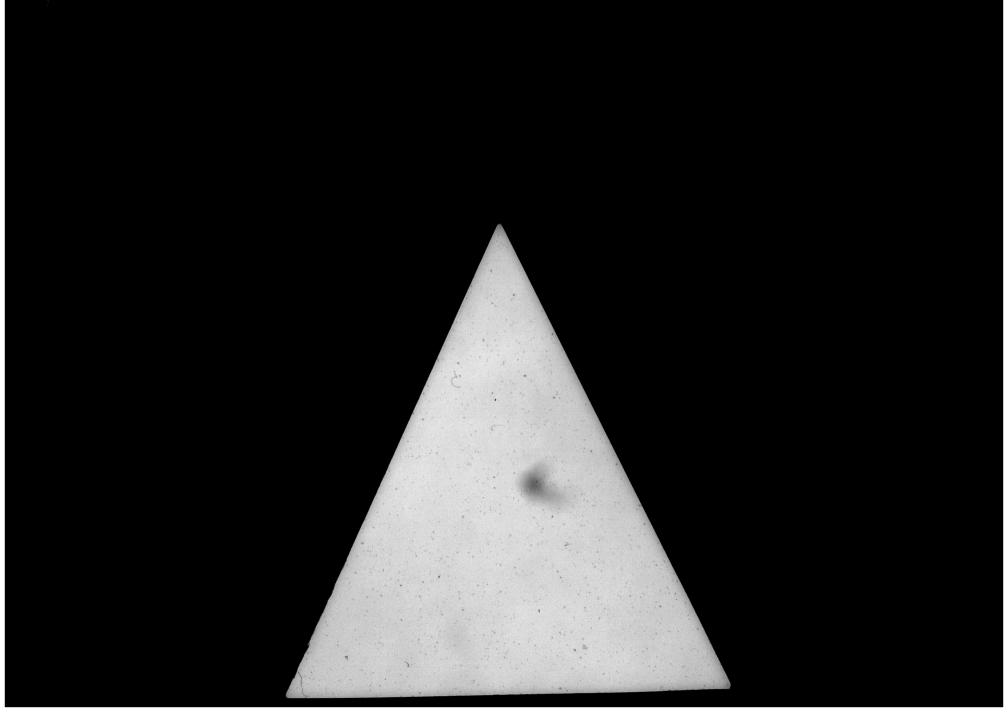
Casket & Box.
Embalming & Services.
Dress
Pallbearers Gloves.
Funeral Notices.
Box to cemetery.
Hearse

\$ 175.00

Georgea Fulton County.

Personally appeared before me, J. Austin Dilan
who after being sworn, says the above and foregoing
account is rendered for funeral expenses of Mrs. Sarah M
Ross, who died without owning sufficient property
to pay this. Bill.

a. T. Kinneal



POWER OF ATTORNEY.

STATE OF GEORGIA,

_County.

Roughton, ev. C. ilekalla Co. no. 3810	Pursin office 5/13/697 applicant appears & han a grown cause but the law
NDIGENT PENSION 1899.	minusus be certified to be trust morty + this has not
ame Mc. Roughton DeKalb.	Pension Office \$16 1898
pproved 5-72 1827	actuation is again cache to the fact that his mitmoses have not been cutified as the
WARRANT HANDED TO	Can requires - Rich of shear Com francis
SON W. MARIBO S, STATE PRINTER, ATLANTA.	

12/21,1897/10 97 2/2399

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_ *,	atby	to receive and receipt for the pension allowed and request that he remit same to	
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1897.		-4	
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STATE OF GEORGIA, County.	Bulloch County. M. A. Mortin of said State and County having been presented
County. County	The state of the s
Personally came before me. and	as a witness in support of the application of Millis Rungflan for pension
A Mayson both known to me as reputable physicians	under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
of said county, who being severally sworn, say on oath that they have examined carefully W.C.	following questions, deposes and answers as follows: 1. What is your name and where do you reside? 1. What is your name and where do you reside?
0	Minion Springs, Ala
, applicant for pension under the Act of 1894, and after	2. Are you acquainted with Willis & Rungfland, the applicant, is of
such personal examination say that his precise physical condition is as follows:	
General	how long have you known him? yes, ever since he musa
infirmity from age.	3. Where does he reside, and how long has he been a resident of this State? He mure
	4. Do you know of his having served in the Confederate army or the Georgia militia? How do you
The state of the s	know this? He served in The confesorate
We further say on oath that the physical condition of applicant renders him unable to labor at any	army in same Co, with me
	5. When, where and in what company and regiment did he enlist? 1862- L. Co.
work or calling sufficient to earn a support for himself, and that we have no interest in said pension being	Union Spings Ha- Co S. 30 Ha R. X
allowed.	6. Were you a member of the same company and regiment? 310!
Sworn to and subscribed before me, this	7. How long did he perform regular military duty, and what do you know of his service as a Confed-
sworn to and subscribed before me, this the late day of see 1897.	erate soldier, and the time and circumstances of his discharge from the service? He wood
MILLENS dece, Ordinary.	a good solvier fram 1862 to clase
	may tame I sourced a my fairle to m
ORDINARY'S CERTIFICATE.	8. What property, effects or income has the applicant? (Give your means of knowledge.)
STATE OF GEORGIA,	9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if
Le County.	0 0 6
1. 1. 4/	any did he make of same? Sant 12 11 and
I, Ordinary in and for said County, hereby certify that	a Q h
the applicant A Cocquiton resides in said County, and was a bona	10. What is the applicant's occupation and physicial condition? Dan't River
fide resident of this State on the first day of January, 1894, and that the witnesses, viz:	

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	Dant Krian
the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses	0 9
before same was signed.	12. How was he supported during the years 1895 and 1896? Dan't Phrane
I further certify that the tax digests of Le Mall County show that applicant	19 What reading 6this way 6 of the state of
returned for taxation in his name in 1895, Novel dollars	13. What portion of his support for these two years was derived from his own labor or income?
of property, and in 1896, Vone 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 clain is made in good faith.	under the Act of December 15th, 1894? Dant hrum as I
Witness my hand and seal of office, this 16 th day of la 22 1897.	faul, heer separates fram him for
Manal C	mon than twenty years
Willi agsacy Ordinary	
of Acta County.	15. What interest have you in the recovery of a pension by this applicant?
NOTE.	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 answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." Additional affidavits may be attached if blank spaces are insufficient.	the 12 day of Jan. 1897. Witness.
Additional affidavits may be attached if blank spaces are insufficient.	S.T. Firarer Ordinary.
k S Viene	Judge of Probate

STATE OF GEORGIA,	
De Stall 1 County.)	
to avail himself of the Pension Act approved December 1501, 1894, hereby submits his proofs, and after	
being duly sworn true answers to make to the following questions, deposes and answers are	
1. What is your name and where do you regide? (give State, County and post office)	1.1
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?	
3. When and where were you born? In alshama	
4. When and where and in what company and regiment did you enlist or serve	egy!
0 5. How long did you remain in such company and regiment?	
How long did you remain in such company and the Classe of liver	1, 1
6. For how long a period did you discharge regular military duty? ulant 3 years.	
6. For how long a period did you discharge regular military duty? when, where and under what circumstances where you discharged from service? When, where and under what circumstances where you discharged from service?	
8. What is your present occupation? I have place looning heard to	100
9. How much can you carn (gross) per annum by your own exertions or labor? Melitary 110	.es
10 What has been your occupation since 1800 [
H 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"?	
	/
totally blind and when and where you lost your sight?	
	e
A in the war, age renders me tweeting to repi	
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 and 1896 and what disposition, if any, did you make of same? 2 success restling - Cancel not leave	f
15. In what County did you reside during those years and what property did you then return for taxation?	(me)
H 16. How were you supported during the years 1830 and 1830.	udo
by your own labor or income? Alexander 1860 - Lived Nerry Chear 9 Mac	Se milian
18. What was your employment during 1895 and 1896? What pay did you receive in each year?	
19. Have you a family? If so, who composes such family? Give their means of support? Have they	
or income , She is an pivalis,	
20. Are you receiving any pension, if so what amount and for what disability?	
Sworn to and subscribed before me this the , We Roccefite Applicant.	
Mild and ace Ordinary.	
10 11:10	

	F ATTORN	IEY.	
ATE OF GEORGIA,	}		
County.)		
Ι,		hereby authorize	
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eceive and receipt for the pension		nest that he remit same to	
	atv		
	day of	1900.	
Witness my hand and seal, this	uay or		
	*	[L. S.]	
Executed in presence of			
		1900.	
		NDSEY, missioner of Pensions DED TO	
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E E E	ins:	LINDSEY, Commissioner of HANDED TO per Petiter, Atlanta.	
O. 31/NDIGEN	3 Si 1	LIN CONTRACTOR	
No Signature Sig	CH S. NA	7 8 2 7	
NO. 31/ INDIGENT ER'S PEN	K.C. R. aght.	JOHN. W. LINDSE Commissioner Commissioner WARRANT HANDED TO WHAT HANDED TO THE TO THE	
(For Those Aiready Enrolled.) NO. 3// INDIGENT. SOLDIER'S PENSIO! 1900.		Joi P	
F	Name County		
3	Zou		

POWER OF ATTORNEY.

STATE OF GEORGIA,

	County. J	haro	hy ant	horize	. V .3 '		
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to receive and re	eccipt for the pension		and	request	that.	he remit	same t
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	SO	Name				:: : ·	1

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
<u> </u>	C. Mous leton of De Kall-
personally appears	
County, State of Georgia, who be	ing duly sworn, says on oath that he is a bona fide citizen
nd resident of said County and	State, and has resided in said State continuously ever
ince the day of 12	1827; that he is 23 years old and
	; that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of 3.	20212 in Company , of 36th Regiment of
- ela 2.00 "	; that his physical condition is as
ollows: 2 2071 Cici	; that his physical condition is as
olows: I lisease	
that his property consists of the	e following items
hat his property consists of the	s tollowing teems 2
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	Dollars, that by reason of his physical
of the value of	le to support himself by his own exertion or labor, and
condition and poverty he is unab	le to support himself by his own exertion or labor, and
that he receives no pension but t	he one herein applied for.
hat he receives no pension but t Deponent desires to partici	he one herein applied for. pate in the benefits of the Act, approved December 15th,
that he receives no pension but t Deponent desires to partici 1894, and the Acts amendatory the	he one herein applied for. pate in the benefits of the Act, approved December 15th, hereof, and makes application for the pension to which he
that he receives no pension but t Deponent desires to partici 1894, and the Acts amendatory the icontitled for the year 1900. I	he one herein applied for. pate in the benefits of the Act, approved December 15th, hereof, and makes application for the pension to which he have heretofore as a resident of
that he receives no pension but t Deponent desires to partici 1894, and the Acts amendatory the icontitled for the year 1900. I	he one herein applied for. pate in the benefits of the Act, approved December 15th, hereof, and makes application for the pension to which he have heretofore as a resident of
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Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1920.

For Applicants Heretolore Allowed Pensions.

STATE OF CEODEIA
STATE OF GEORGIA, De Kalk County
personally appears M.C. Roughlon of De Nath.
County, State of Georgia, who being duly sworn, says on oath that he is a hona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the 16" day of few 1827; that he is 73 years old and
by occupation affectance, that he enlisted in the military service of the Con-
federate States (or of the State of d) during the war between the
States, and served for the term of 3 Leans in Company L, of 3 de Regiment.
of May la C ; that his physical condition is as
follows: Auffering from acid age and
Infirmity.
that his property consists of the following items Arcice
of the value of 00 Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1901. I have heretofore as a resident of De Math
county been allowed a pension for the year 1900.
Sworn to and subscribed before me, this the Syfe C. Rought.
11th day of from 1901.)
MMRegodace Ordinary.
STATE OF GEORGIA,
Le Kalk County.
I, WM Magadace Ordinary of said County.
do certify that I am well acquinted with 1126 Cocylitary the
applicant in the foregoing affidavit, and am well satisfied that the statements in the by him
in his said affidavit are true, and I know 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 \$221 . 1901.
(Milliagedice
{ nate }
Ordinary De state County

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rate of Georgia,		
I,	hereby author	orize
receive and receipt for the pens	ofofof and requ	nest that he remit same
Witness my hand and seal, this	sday of	1902.
Executed in presence of		[
	2	1902.
INDIGENT 1902.	W.C	EY, we of Pm
CODE SECTION 134. SOST ALREADY ENROL TO. CAT S.	oughton Volument Busher issued	JOHN W. LINDSEY, Commissioner of WARRANT HANDED TO
A LE ALREADY A J L' TDIGEN BR'S PI BOS	M. Lon Kall Regiment	N. LI
SE A SE A	LE VARRI	HN V
No. No.	MI	JOI »
	Name County	

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Y ENROLLED.)	ENSION 3.	S W C	at 32d Ald.	1/22 1903.	SEEY, seioner of Pensions.	
ADY ENROLLED.)	PENSION PENSION	on W.C.	iment 324 Ald.	-/26 1903.	INDSEY,	
LIREADY ENROLLED.)	l'S PENSION	Man W.C.	Regiment 324 Alla,	/22 1903.	V. LINDSEY, Commissioner of Pensions.	
E ALREADY ENROLLED.)	JR'S PENSION	Walb W.C.	Regiment 324 Ala,	- /22 1903.	N W. LINDSEY, Commissioner of Pensions.	
HOSE ALREADY ENROLLED.) No. (779	INDIGENT IER'S PENSION	oughten W.C.	Regiment 374 (Ala, waspeant issued	-/22 1903.	OHN W. LINDSEY, Commissioner of Pensions.	
(FOR THOSE ALREADY ENROLLED.) No. (79	LDIER'S PENSION	Name Roughton W.C.	L Regiment 374 Ald.	-/26 1903.	JOHN W. LINDSEY, Commissioner by Pensions.	WARRANT HANDED TO.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Le Kalh County.
Personally appears AC Roughton of
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 16 day of fan 1822; that he is 25 years old and
by occupation a Mississer that he enlisted in the military service of the Con-
states, and served for the term of I Least in Company L, of Ireth Regiment
of Il Tal ; that his physical condition is as follows: Tisabled by ackage and Infirm
follows: I isabled by old age and inform
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 1902. I have heretofore as a resident of Re Kall
Sworn to and subscribed before me, this the
10 day of fan 1902.)
1/1/1 Lagodace Ordinary.
STATE OF GEORGIA,
Se Kall County.
I, Will. Nagsdale Ordinary of said County,
do certify that I am well acquainted with M.C. Noughton
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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.
Ann Jour Magsdece
Ordinary De Kalk County.
Nore,—The blank spaces must be filled.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
De Kall Com	nty.)
In a A	ughton of De Kall
	sworn, says on oath that he is a bona fide citizen
	nd has resided in said State continuously ever
since the 16 day of Jan	1827; that he is 73 years old and
by occupation a Mic chance, t	hat 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 326) during the war between the assistin Company L, of 3 th Regiment
of Ila Vol	; that his physical condition is as
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that his property consists of the following	items: June
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	port himself by his own exertion or labor, and
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	d makes application for the pension to which he
is entitled for the year 1903. I have her	
county been allowed a pension for the year	
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10 dev of 21	1903. { Polly & Co
man gadace	Ordinary.
STATE OF GEORGIA,	
I, MM. Regad	
do certify that I am well acquainted wit	
	d am well satisfied that the statements made by low he is the individual he represents himself to
be and that he resides in this County.	ion ne is the individual he represents minsen to
	al signature and seal this 10
day of	al signature and seal, this /O
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POWER OF ATTORNEY.

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to receive and receipt for the pe		equest tha	t he ren	nit same to
	at			
Witness my hand and seal, this	day of			1904.
				[L, S.[
Executed in presence of				
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EADY ENROLLED.)	GENT	S PENSION OS.	Toughton 1800	egiment Oll 1.	in land	. LINDSEX, minissioner of Pensions.	HANDED TO
ALREADY ENROLLED.) (a LL.	DIGENT	R'S PENSION BOOK.	Thughton 17 18 18 18 18 18 18 18 18 18 18 18 18 18	Regiment OU 4	in land	IN W. LINDSEX, Commissioner of Pensions.	CANT HANDED TO
(FOR THOSE ALREADY ENROLLED.) No. (o 44.	INDIGENT	LEK'S PENSION 1905.	C. Baughton	3 Regiment Oll (2	WARRANT ISSUED	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO WARROW, MANAGER, FOR STATE PRINTER, ALLANTA.

no data

FOR APPLICANTS HERETOFORE ALI STATE OF GEORGIA. Dellall County. Personally appears W. C. (Loughton of DEHall 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 16 day of June 1827; that he is 76 years old and by occupation a Micklan , that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 years in Company L, of 30kh Regiment of (MA. Cith); that his physical condition is as follows: all age and Infirmity that his property consists of the following items: Horu of the value of ______Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of County been allowed a pension for the year 1903 Sworn to and subscribed before me, this the anus It george STATE OF GEORGIA. ames & Storge Ordinary of said County. do certify that I am well acquainted with

Personally appears W. C. Houghton of Listall 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____ , 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 _____ in Company for the Regiment of Cig (ala, V sle); that his physical condition is as follows: bufirmily + ala age that his property consists of the following items: Dollars. I am now earning. of the value of. Dollars per month. That by reason of his by my labor,.... 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 Adt 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 Il & Koughton County been allowed a pension for the year 1904. Sworn to and subscribed before me, this the 1/9 day of Jacey 1905. STATE OF GEORGIA, Stassalle Country James of Lury, Ordinary of said County, do certify that I am well acquainted with Wal I Toughton the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this 19 day of.... Nore.-The blank spaces must be filled Note.—Affidavit should not be attested before January 1st, 1905

STATE OF GEORGIA.

County.

Willall

County.

Norg.—The blank spaces must be filled.

Given under my official signature and seal, this

to be, and that he resides in this County.

day of January

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

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

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

POWER OF ATTORNEY.

to receive and receipt for the p	UNTY.	_of			_hereby a	
	cusion a	_ at	u requesi	- that h	e Teilit	same
WITNESS my hand and seal,	this	- - - - -	_day of			1906,
Executed in the presence of			·			[L. s
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NSIO 67	the !	13	<u>8</u>	Pensions.	2	See Assess
FOR THOSE ALREADY ENFOLLER. FOR THOSE ALREADY ENFOLLER. F. J. North Lines INDIGENT INDIGENT 1906.	061	Regiment 2	ISSUED 1/22	JOHN W. LINDSEY.	WARRANT HANDED TO	Co Gro. W. H.
COOR SECTION 1334. COOR S	22	Regi	WARRANT ISSUED	OHN W. I	RANT H.	NI AND PUBLISING
S E Z Z	10	PL	¥	J.	VARI	N PRINTIN

Roughton, O.C.

TOR ALL DIVARIO HEREIUTURE ALLUMEU State of Georgia. De Kall County. Personally appears ING. Roughton of Malh 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 18 ; that he is. years old and by occupation a___ that he enlisted in the military service of the Confederate States (or of the State of_) during the war between the States, and served for the term of in Company , of th Regiment of Clabama Dolo ; that his physical condition is as *that his property consists of the following items: of the value of, Dollars. I am now earning by my labor. Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Lalb County, been allowed a pension for the year 1905. We Rought on Sworn to and subscribed before me, this the Ordinary. State of Georgia. County. Ordinary of said County, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this.

Note.—The blank spaces must be filled.

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

State of Georgia. De Kall Caunty. Atlanta, Sa, December 30, 15,4 Tersandley appears Oth Suider, who being if ely surrer, an eath days That he is a resident ergia, , het re me, the undersigned, is of Fullan County State of Georgia - and That he Mullou (o.) the Stimery & Butter Comity, "a, toto human Willis & Kenglilan who makes in person consest if I Murnock, versin application for pension during the past a resident cile and mutou overly a, un brown twenty years and That he (Said applicant) has i. I nown to me as a reputable interistantly dis no property effects of value, nor income, and and Muxician, and ou being worn, he says in that he had no property effects or income outh that he is personally aconainted with living either of the years 1894- 95. 95. during Caft. W. A. Marlin, at Uniou Spring, labama, who is a wilners on they dication It. C. Long itou which Time The applicant recided in Dekalle for Consion from otale of conque, is confederal sol County - Leargia - except The year or part of the blev, and le says that the said Cath the flastin year 1896 during which Tour or period, he resided is a good citizen where he resites in flaborne is a in Fullan County - Verges gentleman of honor and integrity, and is regarded Witness further says That applicant is unable to work, Caused by infirmity and weakness, ai a man of good Charleter, of vericity, and in Int To old age. That applicant has been make every way reliable and rustworthy, and & iant has Inown him well ever since the sicht. His time to support himself during The past foun (4) years. having been dufferted during Those years by the aid from freed and relatives in this gany 16 7877 was whoy, or over forly years, in the is considered a reliable and trustworting man. Affiant says that he Africant, has no interest in the claims IN. (. Buy home. Sworm to and subscribed J. J. Hainoux, Millagsdace Dikelledo. O Naturder 11 To Tenery Coming Fulter boly

Union Springs, Alexand 26 1899, State of alabama Bulliot County (Cersonally appears before Who The Probate Judge of Bullech County M.a. Martin who is well known to me for truth and reprighters, and states under outh that he Know Willis le Koughton for many years, and that Thee Said Konghton did what with term self (Wa martin) in Company R-3d alabama Regt in 1862 o that he (Monghton) made a good faithful Souldier to the Close of the War. Daid Martin also affirms that he hunself was Ordely Surger and was in a prestine to Kin That Said Roughton was faith ful in the discharge of his duties, Said N. a. Martin now leves in Monon springs Paullock (s ala and has been shrown by me for therely years Seven to and Subscribed WA Mustin before mer fun 26th 1899. X.4. M. audrew Probate Judge Bullion (Co)

NAME Roughton, W C

YEAR 1899 COUNTY Dans

. WHEN AND WHENE BORN? Alabama

ENLISTED WHEN AND MIRE? 1862 - Union Springs, Ala.

RAUK

COMPANY AND REGIMENT? Co L 3rd Alabama Regt.

NAME OF CAPTAIN AND COLONEL?

WCLUTED? Applicant says he has never been a well man since so much exposure in the service during the war.

CAPTURED, WHEN AND MARKE?

RELUGED.

WHEN AND WHERE SURRENDERED? 1865

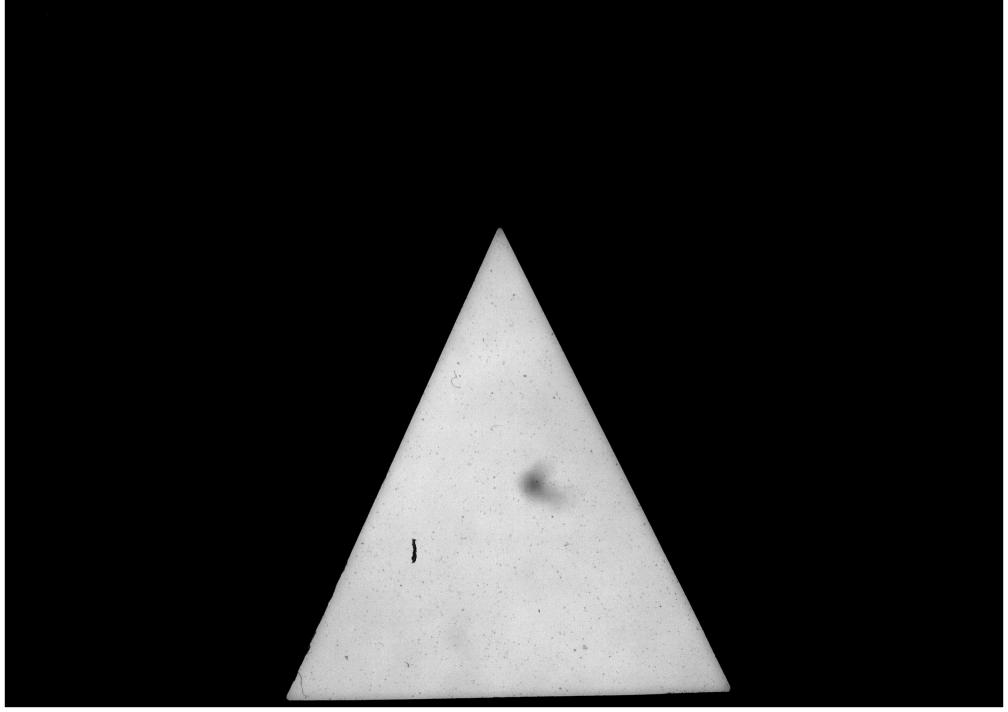
IF NOT PARSENT AT JURRENDER, WHERE YOU?

DIMD, WHEN AND WHERE!?

BURIED.

WITNESSES. W A Mertin - some commend -

No data



Ordinary's Certificate

Rowdon, Martha = a ?					
Se kala fri 122 8	NOTES	. S	the wer	that I is the and w	ST
Widow's Pension ader Act 1910—as Amended by Act of 1919.	1. Before "You c' you shall 2. Additio 3. Only wi 4. All aff such Or 5. Attach reputati	Sworn under m. (SEAL)	witness who sv e duly sworn t thy, and their	I know M he person she was on the 4	DAR OF TAKE
Mattalb	any questions are lo solemnly swear. In give will be the nal affdavits may dows who marries dows who marries davits must be m dinary. certified copies of on.	Sworn under my hand and official seal of of (SEAL)	the witness who swears to the service of husband; that both of t were duly sworn by me before signing the foregoing affidavits worthy, and their statements are entitled to full faith and credi	that I know Men. Heave and she is a and was on the 4th November 1908; that I also know	ORGIA,
idow of W. M. Rowden	answered the Ore that you will true truth. So help you to be attached if bia d prior to January ade before the Ore marriage license it	ficial seal of o	rvice of husbar igning the for entitled to fu	yeary Weary self to be and 908; that I al	\$
giment 42 Ga Ryd	linary shall answers ma fool. " nk spaces a lat, 1881, 1881, for the linary of the lin	this		COUNTY.	
	ear applicant to each of to each of insufficient, entitled, esidence of not, prove	20000000000000000000000000000000000000	of them are noits and that edit.	Quete.	
9,1958	d the witness questions ask person to be rriage, by son	Service A	the witness who swears to the service of husband; that both of them are now residents of said County are were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trus worthy, and their statements are entitled to full faith and credit.	That I know Henry herself to be and she is a born fide continuing resident citizen of said County, do certified was on the 4th November 1908; that I also know herself to be and she is a born fide continuing resident citizen of said County was on the 4th November 1908; that I also know herself to the analysis that I also kn	
J. W. LINDSEY, Commissioner of Pensions.	nd the following words ad you and the evident sworn and certified b	191 Count	said Conn truthful,	County, do co	
Byrd Printing Co., State Printers, Atlanta.	g words evident tified b	1	ty an	oun s erti	

10-30-1919

_Ordinary of said County, do certify that I know MIM Meath A Naw denthe applicant for pension. She is the person she represents herself to be and she is a bone fide continuing resident citizen of said County and was on the 4th November 1908; that I also knowthe 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 _235_day of_ (SEAL) NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:

"You do solemnly awar that you will frue 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 attacked if blank spaces are insufficient.

3. Only willows who married prior to January 1st, 1881, are entitled.

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

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

As Amended by Act of 1919

Questions for Applicant

STATE OF GEORGIA, COUNTY.
Personally before me comes Marthy A. Rowden of said State and County,
and, after being duly sworn, says that she desires to apply for a pension allowed under the Act
of 1910, as amended by Act of 1919, and submit testimony to make out the same, true answers makes to
1. What is your name, and where do you reside! Man Murita Defallo
2. How long and since when have you been a continuing resident of the State of Georgia?
3. When where and to whom wer you married 10 CA 2h 18 4 Hesselons and
a. Have you mar he the death of first and soldier husband? There Rat
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Con-
Carpente Army or Georgia Militia! (State the arms and class of Service.) Sugget 862
5. When and where did the command of your hysband surrender or discharge from the army 1
6. Was your husband personally present at the time of the surrender or discharge of this command?
7. If he was not present state clearly where he was?
8. Where was his command when he left? Left it all I surrende
a. For what cause did he leave his command?
b. By whose authority did he leave his command
c. For how long was he granted leave of absence?
e. What was his physical condition when he left his command?
f. What effort did he make to return to his command?
• V
h. Was he captured by the enemy at any time! Coffmula at Directis bung.
i If so, when and where captured and where held as a prisoner, and when and for what cause released?
j. When and where did your first husband die 1. May 28 1-1900
k. Were au residing together when he died! - we was
1 If not, how long had you resided apart?
m. Are you now a widow!
9. Have you or your husband heretofore been paid a pension by the State! have val
If so, when and for what cause were you or your husband placed on the roll f
Sworn to and subscribed before me this the 2 4 day of October 1912 North North
Dens County
(SEAL)

STATE OF GEORGIA, COUNTY.
Later De De C
being duly sworn, true answers to make to the following questions, answers as follows:
1. What is your name and where do you reside to have W Busully Dela life Redan Ga
2. How long and since when have you known Rossedier applicant?
3. How long and since when has the continuously resided in this State! (Give date.)
all him refe
4. When and to whom was she married! W. M. Pour fern. How do you know! 5. How long and since when did you know. W. M. Carroller. her
husband Ot year Lince beginning of the war
6. When and where did WM Rawdell a
the husband of applicant, diet Xelcolb
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?
9. When, where and in what Company and Regiment did _ W. M. Rowellen _ enlist?
May \$862 Congres Company (= 42 Ga Rego
10. Here 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 12 100 1100 1100 1100 1100 1100 1100
Herril 1865 - Bentonvill Mag
13. Were you personally present when it was surrendered! If not, where
were you Andrews and how came you there? (Dueleut
14. Was the husband of applicant personally present at surrender! Al was If not
where was he?
authority did he leave his Command Willeller 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-
mand atta Not leave Conpuand Surrender
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? I have the state of the property
Juas Present
Sworn to and subscribed before me this the Shith Brankly
Janes Plessyl Ordinary)
of De Malla County.}
(SEAL)

State of Georgia,

. Newton County

You are authorized and permitted to join in the honorable state of matrimony William M. Rowden and Martha A. Center according to the rites of your church, provided there be no lawful casue to obstruct the same; in assordance to the constitution and laws of this State and for so

Given under my hand and seal this 17, day October 1854.

doing this shall be your sufficient license.

Wm D. Luckie Ordinary (L.S.) To any minister of the gospel, Judge, Justice of the Peace Justice of the Inferior Court to selebrate.

I hereby certify that William M. Rowden and Martha A. Center were joined together in the holy bans of matrimony on the 19 day of October 1854.by me .

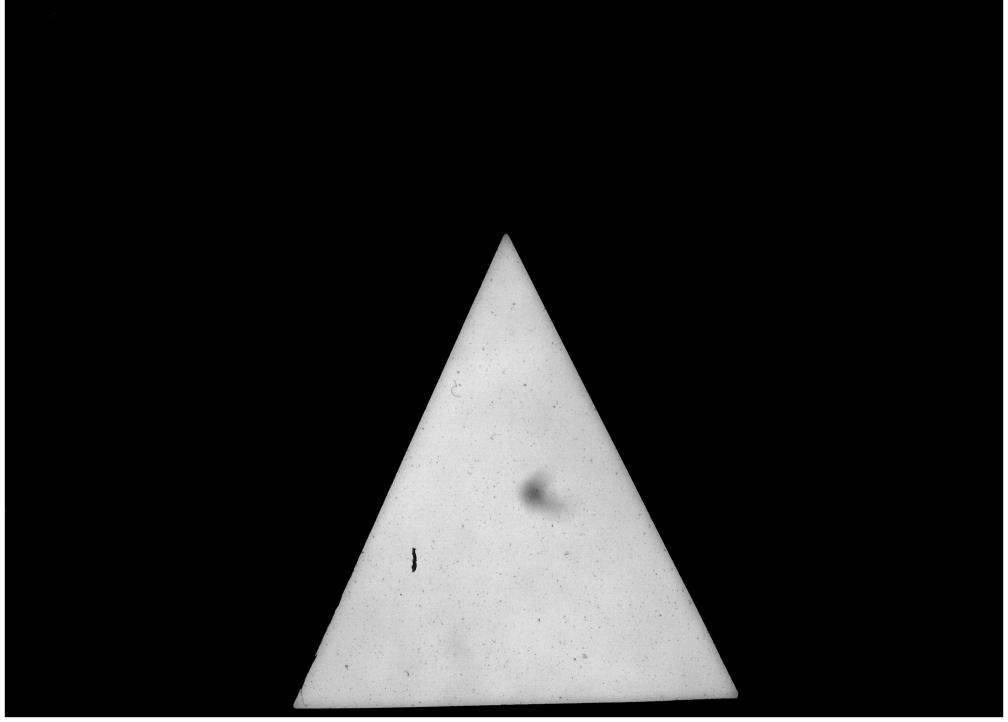
Reuben Woodruff J.P.

Georgia, Newton County; -

I, A.D. Meador Ordinary in and for said State and County do sertify the above and foregoing marriage license and certif -ieste of William M. Rowden and Martha A. Center to be a true copy as appears of record in this office recorded in marriage license record, 1852-1859, Page 119.

Given under my hand and seal of office this Jet 29,1919.

a D Meadon



Widow's Pension UNDER ACT 1910. County She Kolb Name Susan Rowland Widow of J. Al Rowland J. W. LINDSEY, Commissioner of Pensions. 10/28/1912 1/22-1913

for Applicant.

nd after	sonally before me comes
f owing qu	
owing qu	
	estions to wit:
	What is your name, and where do you reside? Liban Rowland Mekelb
2,	How long and since when have you been a continuing resident in the State of Georgia?
10	out 70 years, since 1842
3.	When, where and bowhom were you married tring 1863 Roswell Golf Sa
	When, there and in what company and Regiment ad your husband enlist as a soldier in Con-
	rmy or Georgia Militia? (State the arms and class of Service.)
861-	Roomell Gott Comy &a Co H 4th ga Rigg In
J .	When and where did the Commands of wur husband surrender or discharge from the army?
6.	Was your husband personally present at the time of the surrender or discharge of this Command?
2	418
7.	If he was not present date clearly where he was? He loss knisel
	Where was his Command when he left? Mr. Aphamator & H De
	For what cause did he leave his command?
	By whose authority did he leave his Command?
	For how long was he granted leave of absence?
	What was his physical condition when he left his Command?
f.	
	What effort did he make to return to his command?
	In what way was he prevented from going back to Command?
	Was he captured by the enemy at any time?
ased?	
	When and where did your husband die Aug 26 1893, Attenta &
k.	Were you residing together when he died?
1.	If not, how long had you resided apart?
9.	What property of any description did you own, hold or control for your use and its cash value,
ov. 4, 19	08. (State same by items.)
10.	What property of any kind have you sold or given away since Nov. 4, 1908? What was received
or it and v	what did you do with the proceeds thereof? (Give items and cash value.)
	Nothing
	10 17
	What property of any description of any value have you now? No Manager
	nd cash value?
	What are your annual earnings or income and their value?
	Have you heretofore been paid a pension by the State?
	a and for what cause were you struck from the Roll?
Jo, when	and to many cause were you solden from the Roll?

James Registrate Ordinary of Departs County.

ISTATE OF GEORGIA,	STATE OF GEORGIA.
	STATE OF GEORGIA,
Co-66 County.	County. Val James & Bu Carten
Mai	Destall County Jod Stamps V Bu Parten
Personally before me comes & Head I A Reed & Dr. M. Shows who after	
Willing duly sworn true answers to make, to the following questions, answers as follows: 60 \ Coff 60	Personally before me comes. The who on oath says that they
distribution and the state of t	are freeholders of said County and that they know Ensur Powland
1. What is your name and where do you reside? I Made Resmell Soft to High out the	of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by
2 How long and since when have you known But A and Royal The the	
3. How long and since then has she continuously resided in this State? (Give date.)	Schedule (A) as follows
3. How long and since when has she continuously resided in this State? (Give date.)	Personal property Rone \$
Since 1863	
4. When and to whom was she married? A. M. Rowland How do you know? By glowered rule	Notes and accounts due
The state of the s	Total Nothing
5. How long and since when did Jou know J. M. Rowland her	
1 husband? 51 41000 Divec 1564	Schedule (B).
	We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:
6. When and where did . G. M. Rowland	
the husband of Applicant die? Any 26 1593 Attenta Gullon County Ca	Personal property home \$
The state of the s	Money, Notes and accounts
7. Where the Aplicant and her husband living together as husband and wife at the date of his	The same accounts the same acc
death?	Schedule (C).
16 to the second	We also know what property she has now in her possession, use and control to wit:
8. If not, how long did-they live apart before his death?	
	Acres of land worth Nothing 8
Were they divorced?	Horses and Mules
9. When, where and in what Company and Regiment did & M. Rowland enlist?	
and Regiment did a series of construction of the series of construction of the series	Cows and Hogs.
1841 Rosquell both to to Cott y higa Rig Infly	Other property
	income and earnings Wolking &
1, 20	Total Value of all property and effects \$ Nothing
10. Were you a member of the same Company? Jes All andrews.	Sworn and subscribed before me this the M A A A A A A A
	and one of the things of the
11. How long within your personal knowledge did he perform actual military service with his Com-	day of 19/2
pany and Regiment? 12 months on more	Stamp Pleater
party and regiment.	The state of the s
12. When, and where did his Command Subrender, and was discharged?	County
12. When, and where did his Command Surrender, and was discharged?	County.
	County:
Appointage Va	County:
13. Were you personally present when it was firmfund Ges If not where	ORDINARY'S CERTIFICATE.
13. Were you personally present when it was firmfund Ges If not where	
13. Were you personally present when it was strendered yes If not where were you & Reid In prison from Sand how came you there? Cophered	STATE OF GEORGIA,
13. Were you personally present when it was strendered yes If not where were you & Reid In prison from Sand how came you there? Cophered	STATE OF GEORGIA,
13. Were you personally present when it was strendered yes If not where were you & Reid In prison from Sand how came you there? Cophered	STATE OF GEORGIA, County.
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13. Were you personally present when it was shrendered to If not where were you I A Rud In Muser that dealer and how came you there? Cophand It. Was the husband of applicant personally present at surrender? It is to It not where was he? It to be the standard of applicant personally present at surrender? It is to It not where was he? It to be the standard of applicant personally present at surrender? It is to be the standard where and for what cause did he leave Command? (Give date). By whose authority did he leave his Command? Annual data and how long was he granted leave? How do you know all this? J. W. Aud was furnish The whole Trime. 15. For what cause, if you know of your own knowledge was he prevented from returning to his Command?	STATE OF GEORGIA, County. I Granus R. Grange Ordinary of said County do certify that, I know the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov., 1908. That I also know the witness who swears to the service of husband, and husba
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13. Were you personally present when it was shrendered the were you of A Rund for Minister that the share the share the share that the share the share the share the share the share the share that the share the share the share the share the share the share that the share the s	STATE OF GEORGIA, County. I. County. I. County Manufacture and Secretary and Secretary of Said County do certify that, I know the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov., 1908. That I also know the witness who swears to the service of husband, and the service of husband the service of husband, and the service of husband husband the service of husband the service of husband husband the service of husband husb
13. Were you personally present when it was shrendered to If not where were you I A Rund In prince I and how came you there? Cophing I had and how came you there? Cophing I had a line to the husband of applicant personally present at surrender? I have the first in the II not where was he? It is the standard of the leave Command? (Give date.) 14. Was the husband of applicant personally present at surrender? I have the standard cause did he leave Command? (Give date.) 15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? 16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?	STATE OF GEORGIA, County. I. County and was in the 4th Nov., 1908. That I also know.
13. Were you personally present when it was shrendered to If not where were you I A Rund In prince I and how came you there? Cophing I had and how came you there? Cophing I had a line to the husband of applicant personally present at surrender? I have the first in the II not where was he? It is the standard of the leave Command? (Give date.) 14. Was the husband of applicant personally present at surrender? I have the standard cause did he leave Command? (Give date.) 15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? 16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?	STATE OF GEORGIA, County. I. County. I. County Manufacture and Secretary and Secretary of Said County do certify that, I know the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov., 1908. That I also know the witness who swears to the service of husband, and the service of husband the service of husband, and the service of husband husband the service of husband the service of husband husband the service of husband husb

TO PAY-1930, \$/27 Cig. & C. Tax.\$

	19	3 2		1
Due 1	ication Decease (UNDER y expenses fun	ed Pe	nsion	er
v.	s. Morg	an-	Ord	inar
For	irs. Sus	an Row	and	
Date of D	eath Aug	. 19	19	32
Amount \$	100.00	127	00	
Ap	proved and	dordered	l paid	
			-	1
1 .	R. de	T. LAN	of Pens	ione
APP	ABOUT	.15	E OFFI	CE
1935 F	UND FROM	WHICH F	PAID	*
2.20	193	0	/2	70
	•	TOT	AL. /	2700

150

4

C. D. WOOD

CRESOR TO C. J. PERR

DRY GOODS, NOTIONS, SHOES
AND FANCY GROCERIES

Roswell, Ga. Juny 9th 1913

Personally appeared before

me a M. Mobble of Reside ga

who are outh boy he

knows Mrs busan Roland

there he he the widdow

of our for Married pryon to

formy of 1870

Millight

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness) (Under Act Approved August 15, 1904)

GEORGÍA, DeKalb County	
Personally before me, the Ordinary of said County, con	nes
A. S. Turner of said C	ounty, who, after being sworn, on oatl
says that he knewMr.sSusan.Rowland	f said County, and that said Pensione
was on the Pension Roll of said County at the time of der	
County, in this State, on theday of	
and that pensioner left no widow surviving, and no estate of	
expenses, which amounted to the sum of \$15000, pe	r sworn statements fully and completely
ITEMIZED hereto attached.	
Sworn to and subscribed before me.	
V. S. Mary aw, Ordinary	607
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	as Zumer
DeKalb County	
(Seal of Ordinary)	
CERTIFICATE OF O	RDINARY
FEORGIA, DeKalb County.	
I, Y. S. Morgan	0-31
hat I personally know	
itizen of said County, and that said person is of truthful an	
aith and credit; that I also knew.MrsSusanRowlar	
he same person whose name appears on the Pension Roll of	DeKalb County, and
vas paid a Pension of Two Hundred and Ten and	no/100 (\$.210.) Dollars
n said County for 19.32, and I now believe said pensione	r to be dead; and that the instructions
t the foot of this voucher have been carefully observed in n	naking up this voucher and the bills
hich are attached hereto.	
Given under my hand and official seal, this19	day of September 19.32
(Seal of Ordinary)	V. D. Margan, Ordinary
(Sear of Ordinary)	Dake 16 County
Market Company of the	Dana ID
INSTRUCTIONS	
1st. Require those claiming expenses of last illness and funeral, to	make out their accounts in fully itemised form,
ving each item and the value of it, and each date. 2nd. Each account must be sworn to before the Ordinary, and in	the following forms
"The above and foregoing account is rendered for services in the la	
of, who died without ow	ning sufficient property to pay this bill.
3rd. The Ordinary must see to it that each bill is perfectly legitimed all attached neatly to this blank, after this blank has been properly	ate in every respect, and properly sworn to,
4th. The completed voucher—this blank and the bills—must be see money must be paid out until it is returned to you as your authority	
omoney must be paid out until it is returned to you as your authority 5th. Return this application, and attached bills, properly receipted	
	of the Patients Daharamane

A. S. Turner

NIGHT AND SUNDAY PHONE DE. 0095 525-27 N. MCDONOUGH ST. PHONE DE. COSS

Juneral Director and Embalmer Prompt Ambulance Serbice Becatur, Georgia

september 19, 1932.

Funeral Expenses of Mrs Susan Rowland, K F D #2, stone Mountain, Georgia.

August 20, 1932.

To Casket Embalming Dress Funeral Notices

Hearse Service and Service Hendered

Georgia, DeKalb County,

I do hereby certify that the above and foregoing account is rendered for the funeral expenses of Mrs Susan Rowland, who died without owning sufficient property to pay this bill.

Sworn to and subscribed before me. This September 19, 1932.

> Rux, Whusto Nothing Patric, State at Laupe, 17

My Commission Expires Nov. J.

A Certificate

STATE OF GEORGIA, County of

De Kalk

IN RE: Expenses last illness and funeral Mrs. Jusen Simuland

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

- 1. Died inside of the State of Georgia;
- 2. Left no estate of any kind or value, sufficient to pay these expenses.

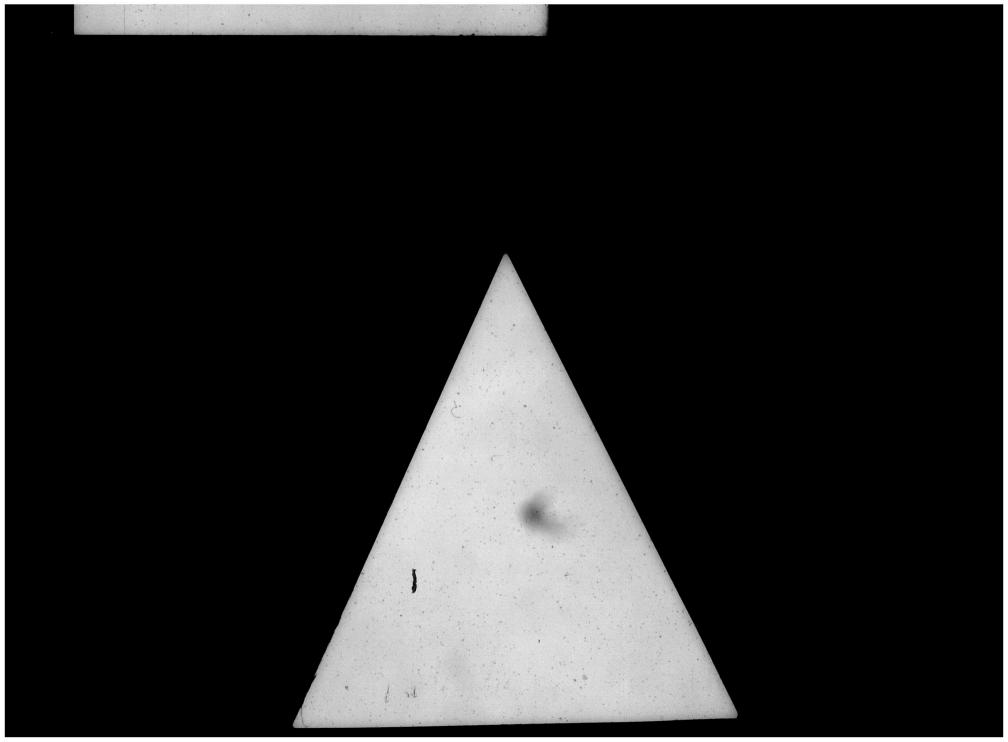
day of august

.1933.

(SEAL)

V. S. mora u, Ordinary

(Ordinary will please complete and return immediately to A. L. Henson, Director, Veterans Service Office, State Capitol, Atlanta, Ga.)



VET EN AND WHERE BORN? Resident of Georgie since Jan. 19th 1864. (64 yrs)

WILLSTED WHEN AND WHERE? Feb. 1863 . Lawre neeville, Georgia.

PANK

GOWPANY AND REGIMENT? Company D, Lee's Battm.

" AL CF CAPTAIN AND COLONEL?

DIFP? Sick while in service-

"ILED. WHEN AND WHERE?

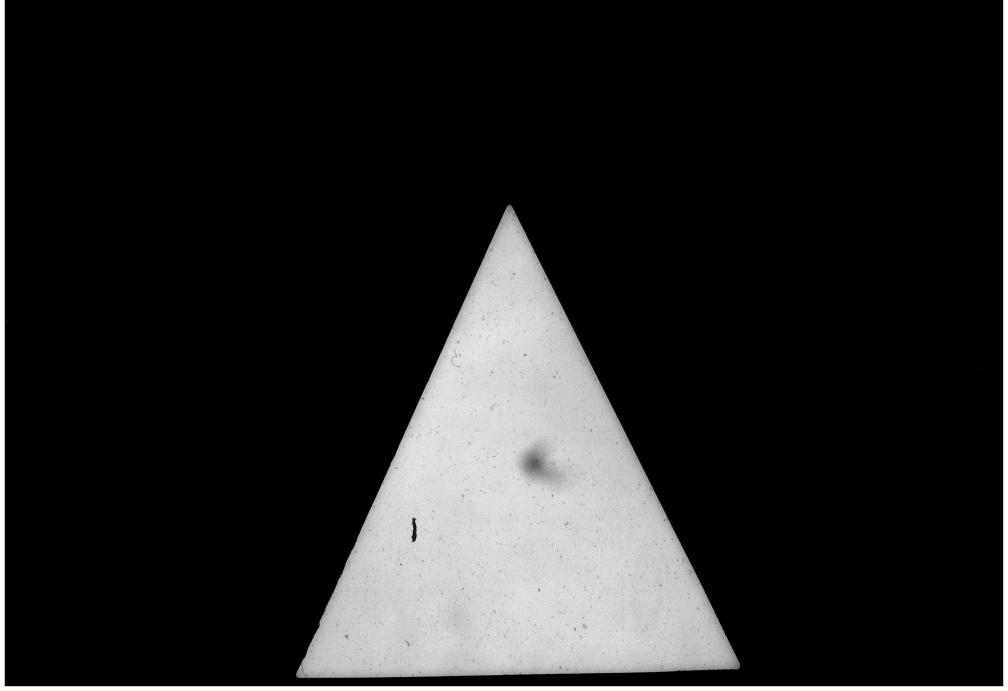
L. LEASED.

WEEN AND WHERE SURRENDERED? Company and Battn. disbanded August 10th 1864, Atlanta, Georgia.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? At home on sick furlough. Left command 1864, April , Atlanta, Georgia. Granted 20 days sick fur-DIED, WHEN AND WHERE? lough.

BURIED.

WI INESSES. W. T . Cates-Same command-



t what time and prevented itness who Widow's Pension UNDER ACT 1910 DeKalb couper DeKalb left comming how Namelys R.J. Rucker
Widow of R.J. Rucker 912 - In 1st 11/19-1915 J. W. LINDSEY, Commissioner of Pensions.

10/27-1915

J. M. Lindsey, Comm. of Pensions.

The second of th Widow's Pension UNDER ACT 1910

Muse	County.
Pe nd after	rsonally before me comes
	1910, and submit testimony to make out the same, true answers makes to the fol-
owing q	uestions to-wit:
1.	What is your name, and where do you reside? Mrs-R.Z. Rucker, Atlanta,
2.	How long and since when have you been a continuing resident of the State of Georgia?
	l my life.
	When, where and to whom were you married?
	When, where and in what Company and Regiment did your husband enlist as a soldier in
onleder 186	ate Army or Georgia Militia? (State the arms and class of Service.)
	When and where did the Commands of your husband surrender or discharge from the army? April 9th 1865, Apppomattox C.H.Va.
	Was your husband personally present at the time of the surrender or discharge of this Com- No, he was at home sick, on furlogh,
	If he was not present state clearly where he was?
. s.	Where was his command when he left?in Yirginis
a.	For what cause did he leave his Command?on_sick_furlough.
ъ.	By whose authority did he leave his Command?Officer_in_Command
c.	For how long was he granted leave of absence?
e.	What was his physical condition when he left his Command?sick
f.	What effort did he make to return to his Command? was unable.
g.	In what way was he prevented from going back to Command?
h., i.	Was he captured by the enemy at any time?
leased?	
j.	When and where did your husband die? Atlanta Ga. about 1897.
k.	Were you residing together when he died?Xea
1.	If not, how long had you resided apart?
9. alue, N	What property of any description did you own, hold or control for your use and its cash ov. 4, 1908? (State same by items.) Onelot worth about \$ 1909.
	. What property of any kind have you sold or given away since Nov. 4, 1908? What was re-
	r it and what did you do with the proceeds thereof? (Give items and cash value.)
	nonec
	. What property of any description of any value have you now?
12	and cash value Onelet worth about \$ 1000,00 What are your annual earnings or income and their value?
	Nothing.
	. Have you heretofore been paid a pension by the State? No
	Al DINO
Sı	worn to and subscribed before me this the

Muscogee County.	
Personally before me comes	- who after
being duly sworn true answers to make, to the following questions, answers as follows:	
1. What is your name and where do you reside? Wm. F. Snyder. Columbu	B. Ore
2. How long and since when have you known - Krot A. Rucker	applicant?
9. How long and since when have you known	te)
about 50 years	
4. When and to whom was she married? Columbus, R Z who know? of	nowledge.
10/1	her
6. When and where did R.Z.Rucker	
he husband of Applicant die? Atlanta, Ga. about 1897.	
7. Were the applicant and her husband living together as husband and wife at the	
leath: Yes,	date of his
8. If not, how long did they live apart before his death?	· -
Were they divorced?No	
9. When, where and in what Company and Regiment didR.Z.Bucker,	enlist?
Columbus, Ga. 1861 Co " A" 2nd Ga Btln.	
10. Were you a member of the same Company?Yes.	
11. How long within your personal knowledge did he perform actual military serv	
Company and Regiment?About 4 years until surrender.	
12. When and where did his Command surrender, and was discharged?	
Appomattox April 9th 1861.	
13. Were you personally present when it was surrendered?I	f not where
were you At home _ wounded on furlough and how came you there?	-3~
By oredr officer in command.	
14. Was the husband of applicant personally present at surrender?No	If not
where was he? He was at homeon sick furlough. when, where a	nd for what
ause did he leave Command? (Give date.) Dont_know.	By whose
authority did he leave his Command?On furlough.	
ong was he granted leave?dont_knowHow do you know all	this?
I was a member of same company and know from mys	
knowledge.	own
15. For what cause, if you know of your own knowledge, was he prevented from	returning to
nis Command?	, and a second
16. What effort did he make to return to his Command and how do you know thi	s? Of your
own knowledge or how?dant_know any more than I have stated.	or your
Sworn to and subscribed before me this the W. Smiller	
15th day of April 1915, 19	
W) - Yux - 1	
of Mus Co of County	
of County.	

County.	
Personally before me comes	who on oath says that they
are freeholders of said County and that they know- of said County and know what property she owned	
by Schedule (A) as follows	
Personal property	
	\$
Total	\$
Schedu	le (B).
We know the property sold or given away sin	ce Nov. 4th, 1908, its cash value to be as follows:
	\$
Money, Notes and Accounts_	
We also know what property she has now in	
Aeres of land - worth	\$
Horses and Mules	
Other Property	
Income and Earnings	
Total Value of all property	and effects\$
Sworn and subscribed before me this the	
day of19	
of	County.
STATE OF GEORGIA, Miscogee. County.	EXPERIENCE OF THE PROPERTY OF
I Wm Redd Jr	Ordinary of said County do certify
that, I know Mrs R. Z. Rucker	the applicant for pension. She
is the person she represents herself to be and she is	HE HONE TO BE THE SECOND CONTROL OF THE CONTROL OF
County and was on the 4th Nov., 1908	
to the service of husband, and	said County and were duly sworn by me before
entitled to full faith and credit.	
That the Tax Returns	Returned for Tax is for
1908 \$ for 1910 \$	
	e thisday ofday
April 1915. 19	DIOW 10
(SEAL.)	Musican County
(SEAL.)	
NOTES 1. Before any questions are answeded the Ordinary "You do selemnly swear that you will true answe you shall give will be the truth. So help you G Additional affidavits may be attached if blank spa All affidavits must be made before the Ordinary. Only widows who married priot to first January Attach certified copies of marriage license if obta eral reputation.	shall swear applicant and the witness in the following words, rs make to each of the questions asked you and the evidence odd.?" ces are insufficient. 1870, are entitled. inable. If not, prove marriage, by some person, or by gen-

GEORGIA, Muscogn	County.	RUA
Montedd	<i>N</i>	Ordinary of said county, do certify
that I personally know		, the applicant, and that she
is the lawful widow of	2. Rucke	, an d was o n
	Rolf of said	county, and polit
a Pension from		.county for 19, and at the time
of his death on the	la y o f	
him and unpaid his Pension of	0	
of Georgia, and I know Mm J. C.	meder THE HA	Cleans,, the within
witness and he is of a truthful and t	rustworthy character and er	ntitled to full credit.
Given under my hand and seal th	hisl.Vday of	hue 1910
	u	Jan. J. Ordinary,
	m	uscaga County.
Due .	County County	7.16
	Z Z Z	of Pen
insi Idie	1201	bie ki
No. 1914 attion for Pension Deceased Soldier UNDER ACT 1891		Regt
ior ior ed	E 3 7	LIIN ved a
eas No eas	300	A hora
Per litte	. 6 0	
	9	3
A G	Wido of _	8
GEORGIA,		
		of said county, my
lawful attorney to collect and receipt f		
deceased husband,		
Pension Roll and paid from		
Witness my hand this	day of	19
Attested before me:)	

.....

......

Application for Pension Due Deceased Soldier To be paid to his widow or dependent children.

UNDER ACT APPROVED OCTOBER 9, 1891

	STATE OF GEORGIA County.
	Personally before me comes Mrs R. J. Luckerd of said county,
	after being duly sworn, on oath says that she is the widow of
	who was duly enrolled as a To who was duly enrolled as a Pensioner from the county
	of
	Dollars from
	A. J. Kucker died in Alanta, Suction Conty on
	theday of Alzant
	was due him from
	Applicant further swears that she married the said
	the day of august 1866 in Museuge con county and
	State of
	as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and uppaid be
	paid to her.
	Sworn to and subscribed before me this 2 day of Africe 1914 1916
	Ordinary(L. S.)
	County.
	AFFIDAVIT OF WITNESS.
	GEORGIA, Muslogue County
	Personally before me comes Am & Survider Amyl Milliams who
	Personally before me comes
	on oath says that he knew
	and that he knows (Missternine Mance sine -Mrs. R. 3 Rucker
	the above applicant; that he knows that the said 1. 3. Rucker
	and Miss Enima Nauce were in due form of law married in the county
	and Miss. Ensure Nauce were in due form of law married in the county of Muserge
	the day of 1866, and that they resided together
,	as husband and wife from date of marriage to the day of his death on theday
	of
	Sworn to and subscribed before me this
	Non Ked & M. Ordinary. X W. F. Amden
	Muscrand County. & Williams
	Note let This form can be used by quantitating mistory children where there is no widow

2d-Ordinary must send in all cases certified copy of marriage license attached.

THE HOUSE THAT SATISFIES IAC CHANCELLOR CO.

LOOK FOR SIGN-THE GOLDEN ARM

TATE OF THERE !A. TARE COUNTY

Columnus, Ga., Jan. 17, 1916

deorata, dadoree County.

lest cet, or social mary)

Personally come before "n. . Snyder of said State and County, who after being duly sworm, on oath says he is the only serving member of Co "A" City Light Guards, 2nd Scorela Tolunteers, res ding in this city; that he and R.Z. Rucker enlisted in that Jampany April 1861, that said Snider was wounder about hix months before the surmender, and at that time he left er. Tueller was with his Command - that said hacker was a good soldier, and to the pest of his belief Eucker remained with the Commany watil the surrender.

Sworn to and subscribed before me this the Soth day of January 1946.

7. T. Snyder

WM. REDD. JR.. Judge, Court of Ordinary. R. J. HUNTER. Deputy Clerk, Court of Ordinary

STATE OF GEORGIA MUSCOGEE COUNTY OFFICH OF ORDINARY

Columbus, Ga., 1/17/. 16. 191

Georgia, Muscogee County.

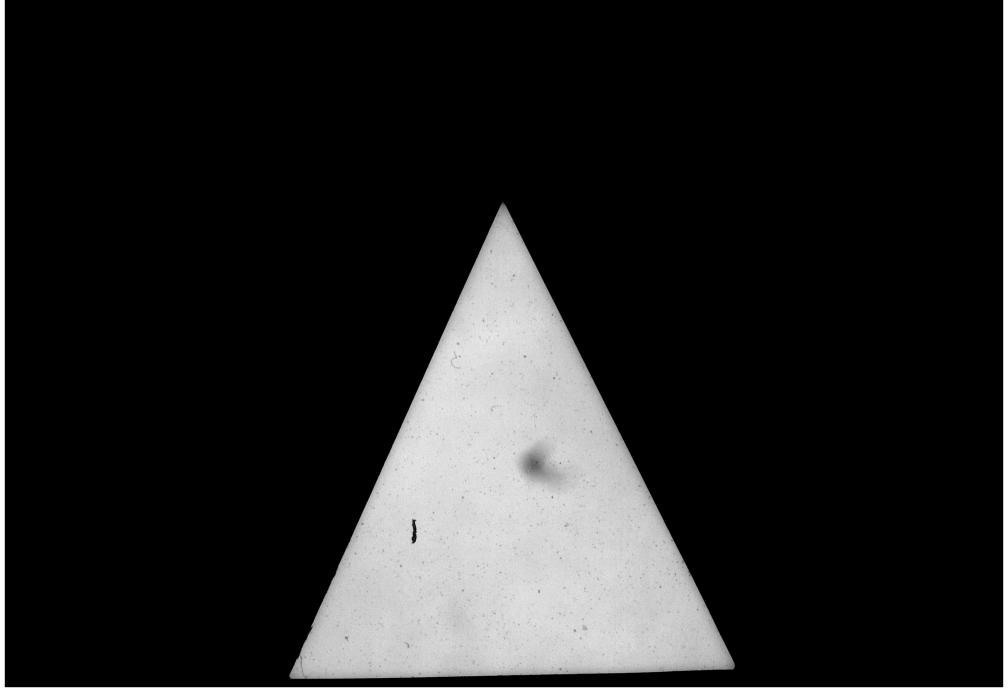
Personall come before Wm. F. Snyder of said State and County, who after being duly sworn, , on oath says he is theonly surving member of Co "A " City Light Guards, 2nd Georgia Volunteers, that he and R.Z.Rucker enlistedin for that Company April 1861, that said Snyder was wounded about six month before the surrender, and at that time he left Mr Rucker with his Command - that saidRacker was a good soldier, and to the best of his belief Rucker remained with the Company until the surrender. Sworn to and subscribed before me this the + 112 Amden 20th day of J amary 1916.

LOOK FOR SIGN. THE GOLDEN ARM

Jan. 21st, 1916.

THE HOUSE THAT SATISFIES

THE HOUSE THAT SATISFIES ACCHANCELUR OF COLUMBUS, GA LOOK FOR SIGN--THE GOLDEN ARM



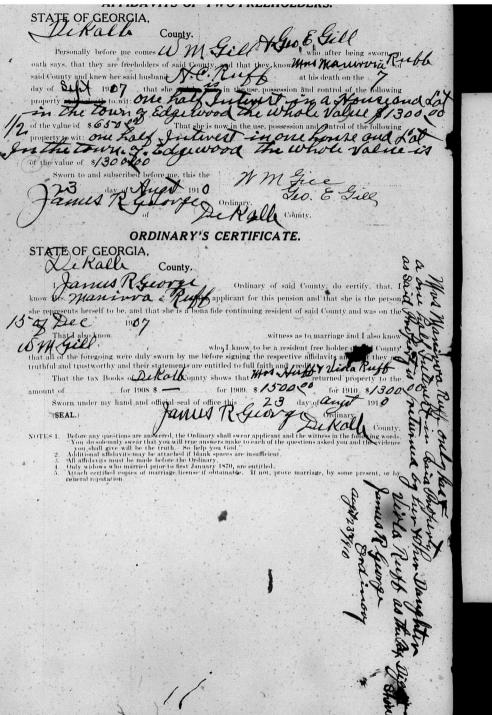
Widow's Application To Be Put on Roll in Her Own Right, when Husband Was on Roll at Death. Nam Minerva Ruff
Widow of St. C. Ruff Approved J. W. LINDSEY, Commissioner of Pensions

value will exceed the tex valuation from one half to one third in in valuation, and you will be close on to the actual cash value of the property. STATE OF GEORGIA. DeKall J.E. Lindsey, Cm. of Pensions. Personally before me comes Mrs. Minima Pull of sgid County, who, after being duly sworn, on oath says, that she is the widow of Reall to whom in the County of Dikall. State of Leafly she was married on the 23 day of Karl 18 Jund that she remained his wife, and esided with him to the date of his death in Suff 7 1907 and that she has not since his death remarried. At the time of his death County, in said State of Georgia, and be Indigent Pension Roll of the State and paida pension of \$60 Colon ty for 1907 per annum, on account of being a soldier in Company (Volunteers of State Militia) At the death of ACA help he was proposession the following of the cash value of \$. That she is now a boundide resident citizen of said Compy Dekalla and the has so continuously resided since day day Broken Sworn to and subscribed betook we Affidavit of Witnesses to Prove Marriage and to Whom-Date of Death of Husband. FATE OF GEORGIA. HERall Personally before me come WM Lill and truthful persons, residing in said Couown personal knowledge Mrs. Misservica Ruff, who made the forgoing affidavit, is has not since remarried. That she became the wife of

Personally before me come who and truthful persons, residing in said County, who after having duly sworn on eath, say: the own personal knowledge Mrs. Manually who made the forgoing a the lawful widow of the said State of the said State of the said State of the said that she and he had resided together as man and wife continuously since day of 18 and that the Manually was the same man who was on the pension roll of said State when he died.

Sworn to and subscribed before me, this the Manually County.

Ordinary of Manually County.



Meneron A Dowda

Recorded in Book of 18608

28 day of Opil 18608

John G Cacaptell
ORDINARY.

MARRIAGE LICENSE.



STATE OF GEORGIA, COBB COUNTY.

TO ANY MINISTER OF THE GOSPEL, JUDGE OF THE SUPERIOR COURT, OR JUSTICE OF THE PEACE, TO CELEBRATE:

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

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 LIGHTS

	DOING THIS SHALL E	E YOUR SUFFICIENT I	DAY OF WAS	
	GIVEN UNDER MY H	Jus-	MARKET AND STREET	fell son
—	lereby Certify That	96en	ny le Ru	H en
M	inem A		were j	
on the	HOLY 1	ah:00	IATRIMONY	

For DeKalb

1 9.2 30

.County

Application for Pension Due Deceased Pensioner

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

... V. S. Morgan Ordinary

For Mrs. M. Ruff

Date of Death Oct. 27, 1930 INS

Amount \$ 100,00

Approved and ordered paid

Dec. 9. 1930 R. deT. Lawrence JOHN W. CLARK.

Commissioner of Pensions.

Received of s. 3 margan aid One brunded Dallatos Leg. June of mis m Riff.

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.

JOS. W. AWTRY, Pres. & Treas. FRANK B. LOWNDES, Vice-Pres. & Mgr.

IN ACCOUNT WITH

AWTRY & LOWNDES COMPANY FUNERAL DIRECTORS

AMBULANCE SERVICE

21 Cain Street, N. W.

Nov/ 3/3

ATLANTA, GA.

Mr. m.J. Buff,

T.F.D. Smyrn, Gr.

For Mrs. Henry G. Luff (Minarya)

Casket. Burial case. 175.33 I .50 Embalming. 5.00 15.00 Hearse. Underwear and Hose. 4.50 Pallbearers Gloves.

2.00 Constitution. 8.60 Journal. 3.75 Georgian. 4.55

The above and foregoing account is rendered for funeral expenses of Mrs. Henry C. (Minerva) buff, who died without owning sufficient property to my this bill.

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness) (Under Act Approved August 15, 1904) July County GEORGIA. Personally before me, the Ordinary of said County, comes . (U. Geottre) ... of said County, who, after being sworn, on oath savs that he knew? m. M. Sund of said County, and that said Pengioner was on the Pension Roll of said County at the time of death, which occurred in Le Aack County, in this State, on the 2 - The day of October 1980 and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 250 per sworn statements fully and completely ITEMIZED hereto attached. Sworn to and subscribed before me. U. dimorgen, Ordinary (Seal of Ordinary) CERTIFICATE OF ORDINARY GEORGIA. DeKalb V. S. Morgan ., Ordinary of said County, do certify that I personally know J. W. Awtry , who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. M. Ruff while in life and that this was the same person whose name appears on the Pension Roll of DeKalb County, and was paid a Pension of One Hundred Fifty (\$150) Dollars in said County for 19x. 30, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto. Given under my hand and official seal, this. (Seal of Ordinary) 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 sorvices in the last library for for funeral expenses, as the once may

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.

OFFICE OF ORDINARY.

GEORGIA, COBB COUNTY.

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

A. C. Ruff and Mineral A Drussla

therefrom, and of the whole of such original record as found in book records of the whole of such original record as found in book records of the Whereart I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the day of Ordinary and Ex-Officio C. C. O.

Georgia, DeKalb County.

Personally appeared before me, the undersigned, Mrs. Minerva Ruff and being first duly sworn according to law, deposes and says, that she owns a one half interest in a house and lot in the town of Edgewood, DeKalb County, that said property has been returned for tagation at the price of \$1,500.00, and that this sum is the true worth of the property, and that if it was put up and sold she does not believe that it would bring more than that amount.

Sworn to and subscribed before me, Mrs Minerva & Ruff
this 6th day of April. 1911.

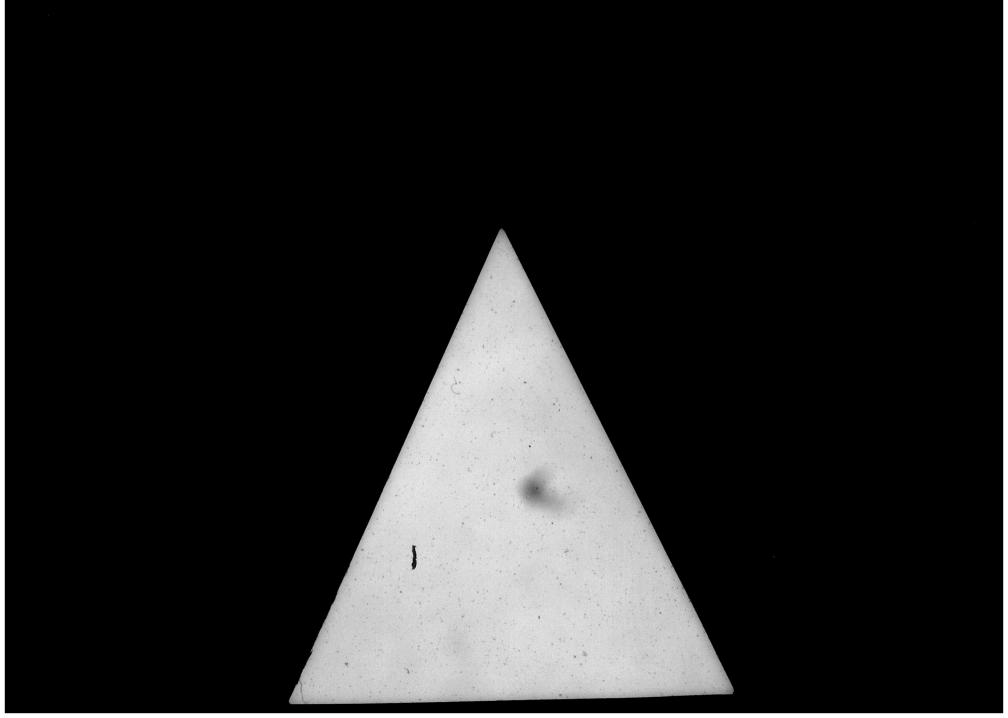
James R. George Ordinary.

Georgia, DeKalb County.

Personally appeared before me, the undersigned,

W. M. Gill and George E. Gill and both being first duly sworn according
to law, depose and say that they are acquainted with Mrs. Minerva Ruff,
and know the real estate owned by her in DeKalb County, Georgia, and that
said property is not worth more than six hundred and fifty (\$50.00) dollars, and that the same has been returned for taxation at its true market
value, to wit \$1,500.00, Mrs. Ruff owning only a one half interest in
said property. If the property was sold it would not bring more if as much.
Sworn to and subscribed before me,
This 6th day of pril, 1911.

James R. Gerry Ordinary.



Ruggles, FRANK A. Disapponed 1937 CONFEDERATE SOLDIER'S APPLICATION Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920. County Dikall Ruggles Company. Regiment. Approved.

Ordinary of said County, certify that I know

represents himself to be, and that he has

State since January 1st, 1920; that I also know

their

said County

and were duly

sworn by

(SEAL OF ORDINARY.)

a naswered the Ordinary shall swear applicant and the witness in the following that you will true answers make to each of the questions asked you and the evidence h. So help you God."

be attached it blanks spaces are insufficient, where the Ordinary of the County in which the applicant or witness resides and the before the Ordinary of the County in which the applicant or witness resides and the ordinary of the County in which the applicant or witness resides and the ordinary of the County in which the applicant or witness resides and the ordinary of the County in which the applicant or witness resides and the ordinary of the County in which the applicant or witness resides and the ordinary of the County in which the applicant of the ordinary of the County in which the applicant or witness resides and the ordinary of the ordinary of the ordinary or the ordinary of the ordinary of the ordinary or t

JOHN W. CLARK, Commissioner of Pensions.

The E Elen Rone wa

SOLDIER'S APPLICATION Ruggles, FRANK A. JOHN W. CLARK, er of Pens Under Act of 1910—As Amended by 1919, and Constitutional Amendm of 1920. CONFEDERATE Name Frank a.

Ordinary's Certificate

STATE OF GEORGIA,
Derall COUNTY.
I, J. L. Marquin , Ordinary of said County, certify that I know
I. J. S. Margan , Ordinary of said County, certify that I know Frank a Ruggles. 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, the 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 truthfor and trustworthy and their
statements are entitled to full faith and credit.
Sworn under my hand and official seal of office this 10 day of Febru 1937
Sworn under my hand and official seal of office this 10 day of February 1937
(SEAL OF ORDINARY.) of DEKala County
Instructions:

Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. So help you God."
 Additional affidavits may be attached it blank spaces are insufficient.
 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.

 Figure 1. The such as the such

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:
STATE OF GEORGIA,
Devall
Personally appears before me, <u>Trank</u> <u>A.</u> <u>Ruggles</u> of said State and County, and hereby applies for the pension allowed by the Atlof 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, and submits testimony to support the same and after being duly sworn true answers to make to the questions propounded, answers as follows, towit:
1. What is your name and where do you reside? (Give County and Post Office). Frank a. Ruggles - 167 Howard St. N. E. Atlanta, Hekal
2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? b. O. syears
3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State
from 1861 to 1865?
4. When and where, and in what Company and Regiment did you enlist? (State the arm and
class of service, and give name of Colonel and Captain.) Santhur. That The Company of the Company and Regiment?
(Give date of discharge.) Last rine nos of war. Discharge papers destroy is by five
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? about thirty five miles went
b. When did you leave the Command? at the class of the war
c. For what cause did you leave? War ended
d. By whose authority did you leave? By the Castain
e. For how long was your leave of absence granted? In what way?.X
f. Why did you not return to your Command after leave expired? X
g. In what way were you prevented?
h. What effort did you make to return? . Y.
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?
10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was
not allowed? . T.o.
Sworn to and subscribed before me, this the 1.0. day of February, 19437

County

(SEAL OF ORDINARY.)

STATE OF MISSOURI
ADJUTANT GENERAL'S OFFICE
JEFFERSON CITY

August 15, 1934

A. L. Henson Director Veterans Service Officer Atlanta, Ga.

Dear Mr. Henson:

RE: Frank A. Ruggles

We regret to inform you that we are unable to locate the civil war record of the above named veteran. Our records are by no means complete, however, and it is suggested that you communicate with the Adjutant General of the Army, War Department, at Washington, D. C. from whom the desired information may be received.

Yours very truly,

H. W. Brown

The Adjutant General

Bp

Just well



THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

L. T. PAT GILLEN, DIRECTOR

C. ARTHUR CHEATHAM, ARST. DIRECTOR

MIGS LILLIAN HENDERSON.

April 2nd. 1957.

Mr. Thomas E. Glenn, First Mational Bank, Atlanta, Georgia.

Dear Mr. Glenni

Permit me to advise that we have made efforts to obtain some proof of the Confederate military service performed by Mr. Frank A. Ruggles, but without any success at all.

It is not the policy of the office to assist in securing evidence in support of an application for pension, but an exception was made in this case for the reason that the circumstances are unusual and we are morally certain that the service was performed as claimed.

It appears that no official record of the service is preserved, and the Mr. Ruggles will; therefore, have to rely upon testimony of individuals who have personal knowledge of the service.

I deeply regret that we are unable to assist Mr. Ruggles in this matter,

With personal regards,

Yours very truly.

W. Sam Askew.



THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

COPY.

War Department,

The Adjutant General's Office,

Washington, May 11, 1934.

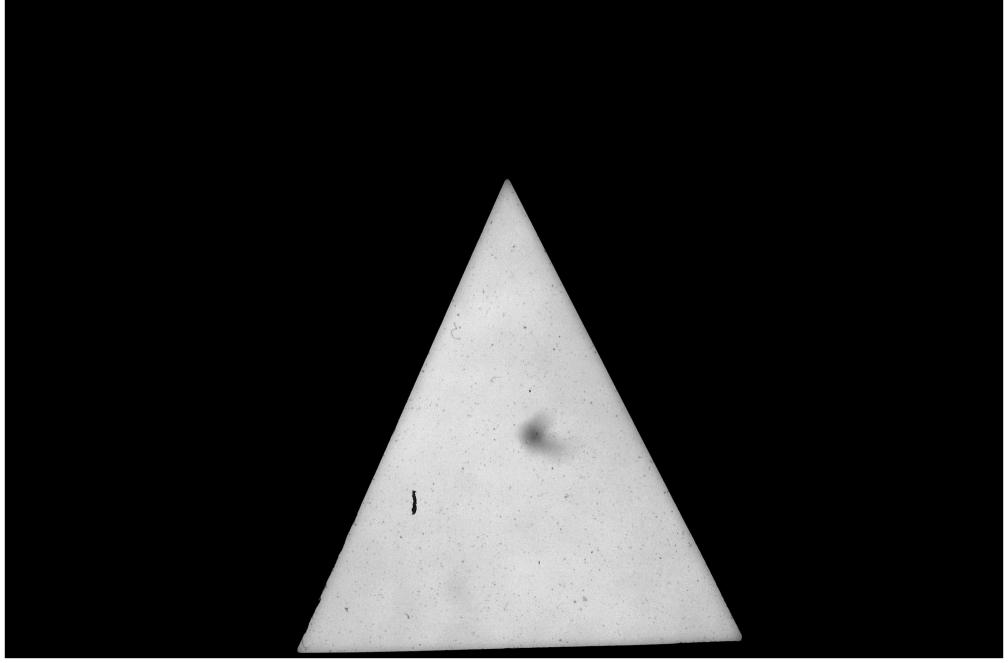
The name Frank A. Ruggles has not been found on the rolls on file in this office of any Confederate States Army organization.

(Signed) James F. McKinley.

Major General.

The Adjutan General.

Sew 5-4 34 Front He Ruggles - age so The end Trices Guillas ? Company B. + Captain Breing 7564 - Served in the and if the Was present at by loving of Basing Kone Level Hember Death - 5094 - W 167 Howard 31.716 Attento to



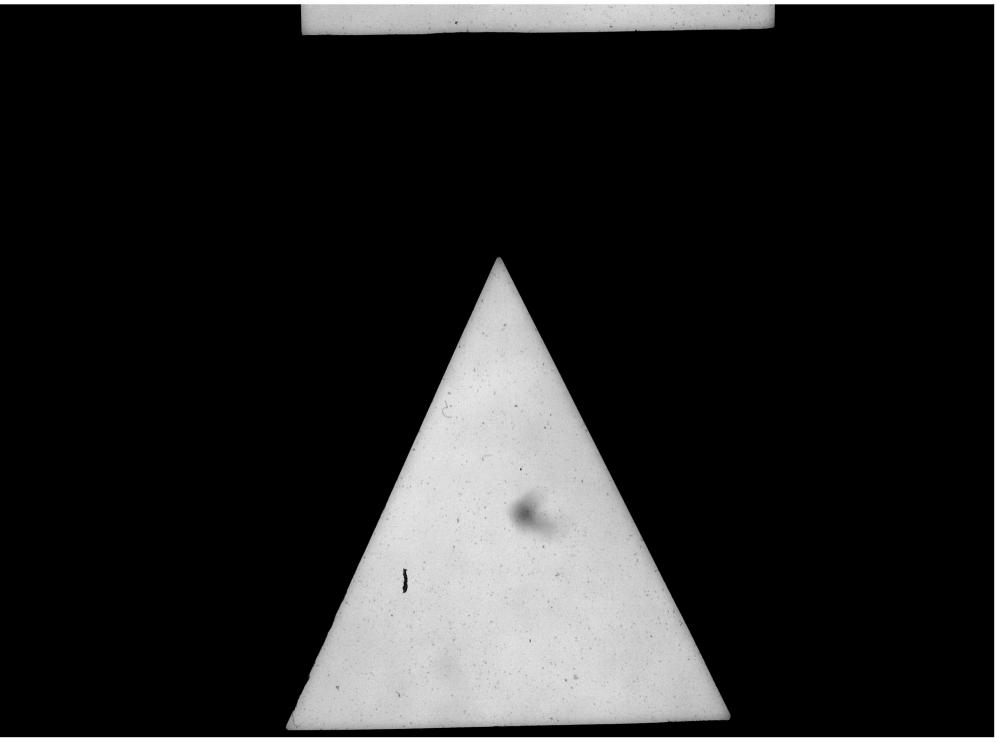
COPY.

War Department, The Adjutant General's Office, Washington, Feb. 24, 1937.

....The name John A. Ruggles has not been found on the muster rolls on file in this office of any Confederate States Army organization from the State of Missouri, and no record has been found in this office of the service, capture or parole of any men of that name in a Missouri organization, S. C. A.

(Signed) E. T. Conley, 'Major General, The Adjutant General.

See Jension application.



Sanders Briton

De Kalk Gung

Out for 1911

Confederate

Soldier's Application.

UNDER ACT 1910.

County Detall

* Name Brillon Sandia

Company

Regiment 16 Ga

Approved

J. W. LINDSRY.

Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta

8/30/10

Confederate
Soldier's Application.

UNDER ACT 1910.

Company De Hall

Name Brillon, Sandan

Company D. W. LINDSEY.

Commissioner of France.

CHAS 4. WILL State Printer, Atlanta.

Questions for Applicants to Answer. 114:16 STATE OF GEORGIA. DiKalla County. Trillou Dandurf said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit: 1. What is your name and where do you reside? (Give County and Post-office).

1. This County Sanders Stone Mountain Destalle Stom How long and since when have you been a continuous resident citizen of this State?... 76 yen august 191 834 3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Confederate States 4. When and where, and in what Company and Regiment did you enlight? (Give the arm and class of Service) 5. How look did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Juny 8 Moulis was your Company and Regiment surrendezed or discharged from the Service? Were you actually present with your Command when it was surrendered or discharged? Livas Mc If you were not actually present, fate specifically and clearly where you were. I was athou on a wound dantough a. Where was your Command when you left it? Rich word Va b. When did you leave the Command? March 20 1861 c. For what cause did you leave? What ou Turlough d. By whose authority did you leave? If the time Commond of For how long way your leave granted? In what way? ... 30 days was the way of the whole of the way of the g. In what way were you prevented? Surfueler Come i. Were you captured during the war? Work 200 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 my to and its cash value on the 4. Nov. 19082 (Make list by items and value.) Oul Supul Supul Salar Sa Value of & 600 08 Now North Goods \$ 175-00 10. What property of any and have you or your the disposed of and for what purpose since 4 Nov., 11. What property of any discription of any kind, and of any value now owned and in the use, possession and control of yourself and sign and its cash value? (Make itemized list).

Our Advance Mountain 12. What annual or monthly income or earnings of yourself and tife and the source derived have you? have none 14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? The Moch of the Georgia Pension and had it refused? and for what cause it was Boitton Sanders

STATE OF GEORGIA,	
CAR Pringer C. V Stanto	
as a witness in support of the application of said State and County is hereby presente by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded	d
answers as follows: 1. What is your name and where do you reside? In Hayan + F. J. Seath	_
2. How long and since when have you known Briefin Sanders the applicant	, 4°
3. Where does he now reside and since when has he been a bonafide continuing resident in thi State and how do you know?	s /9
4. When, where and in what Company and Regiment did Edict 14 15-1841 enlist durin war from 1861 to 1865? (Give date and place). And 1811 Member 1864 to 1865. How flid you obtain your information of this Service? Member of Same Do.	10 S
5. How fid you obtain your information of this Service? Meutles of Same 16,	
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date)	ju m
7. When and where was his Command surrendered or discharged (give date and place)	
8. Were you personally present at the Surrender?	
9. If not, where were you and how came you there? Image	
10. Was the applicant personally present with his Command at surrender? The long know	ma
11. If not where was he and how came him there? here would furlingle	
when he left it? By whose authority did he leave Officer Course and how	1 *
By whose authority did he leave Officer Council and how	, * _J
long was he granted leave? 36 days while kounded How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)	
13. In what way was he prevented from returning to his Command? Command Australia	r-
How do you know? 14. What effort did he make to return to his Command and how do you know? X	
15. Was applicant captured as a prisoner If so, when and where? X	
In what prison was he held? X and when released?	X
Sworn to and subscribed before me, this the flood of the Pays. Sworn to and subscribed before me, this the flood of the Pays. Sworn to and subscribed before me, this the flood of the fl	
of County.	
AFFIDAVIT OF TWO FREEHOLDERS.	
STATE OF GEORGIA.	
Personally before me comes B. N. Davis YEA Nolley who on oath	
ays that they are free holders residing in said County and we know	
he 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 wif: (Make List by items and value.)	1
Value 30000 D	
1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.	

2. When and to whom was it sold or given to? No Bull 3. What was the price paid or stated to be paid?
4. What relation is the party to applicant? Mone
5. What disposition was made of the proceeds of the sale? Made was 1
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)
17th play of augst 1910) Danies
James Range
O. Dekalla
Oi. County.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
Dekall County.
Variable
Ordinary of said County, certify that I know
the applicant in the person is the person he represents himself to be and resides in
said County. That I also know Clarke county the witness swearing to the
service and 13 NV Navis V 600 Wally who are free holders, that
they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the
Tax Results of Pullul County shows that Anton Sander and
value for tax is in 1908 \$ 800.00 for 1909 \$ 80000 for 1910 \$ 7.75
Sworn under my hand and official seal of office this day of Assett 1910
towns Rlupre Ordinare
of Revalle County
NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words
"You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
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.

VALUE AND WHERE BORN? Resident of Georgia since August 19th 1834.

"NULSEED WHEN AND WHERE? July 15th 1861.

Witness states; Danielsville, Madison County. Georgia.

BOAK

COMPANY AND REGIMENT? Company D, 16th Georgia Regt.

MANUS CF CAPTAIN AND COLONEL?

CUPIDED? Sick while in service.

THED. WHEN AND WHERE?

LUASED.

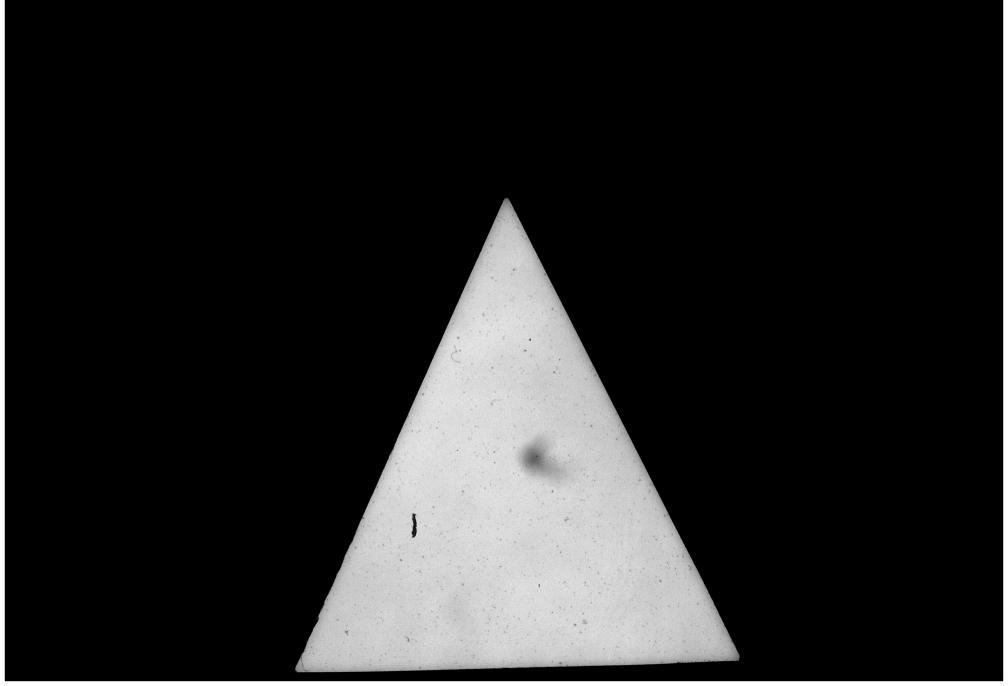
WEEN AND WHERE SURRENDERED? April 9th 1865, Appointtox Court House, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Was at home on wounded furlough. Left command March 20th, 1865, Richmond , Va. on 30 days furlough. DIED, WHEN AND WHERE?

BURIED,

Whitnesses. J. F. Payne- Same Company-T. J. Seott-

No data



POWER OF ATTORNEY.

Sanders, James De Kall Co						
					5	i.
No. O.K.		***		5. ₩.	I,	
NDIGENT PENSION,		~		ed in p	receipt	
1900.	£			and and	for the pension	ç
Jame James, Sanders				8	allowed,	County.
Je Kalh				day	and request	
1900, 1900,				of	ofothat he remit same	
JOHN W. LINDSEY, Commissioner of Pensions.				- by	t same to	
WARRANT HANDED TO					, here	
Geo. W. Harrison, State Frinter, Atlanta.			(F s.)	1900.	by authoriz	
					1 6	

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. 1900 Executed in presence of (L. S.) W. LINDSEY,

Questions for Applicant, STATE OF GEORGIA, Deligh County. Danders of said State and County, desiring to avail limself 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: What is your name and where do you reside? j(give State, County and post office) Harries Saudas Vitharing Dehall Canty Braising How long and since when have you been a resident of this State ? He are hear la week bush of this State of force When and where were you born ! Hall rounty the October 14th 1882 When and where and in what company and regiment did you enlist or serve? 1862 it dammer will 48th In Regionest 5. How long did you remain in such company and regiment? 5 Le v nb Sucrendent at Spanetty Court House Va ow the 9th day of April 1000 6. For how long a period did you discharge regular military duty? Sharak When, where and under what circumstances were you discharged from service? here, dischoused with derunder of family 8. What is your present occupation? The large of Count to a core to be facile 9. How much can you earn (gross) per annum by your own exertions or labor? \$2500 10. What has been your occupation since 1865? Ha uner 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"? Italy land face, ter 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 ?... Keup Gagno 13. What property, effects or income do you possess, and its gross value? To profe aty 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? The books aty Auni 9 Lettos of that Lease 15. In what County did you reside during those years, and what property did you then return for taxation? De Kall Canuty and returned no fre forty 16. How were you supported during the years 1898 and 1899 ?. 154 the help of 712 children, and whol & could de 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? \$80 /6, yer a, Countributed \$2500 18. What was your employment during 1898 and 1899? What pay did you receive in each year? 19. Have you a family , If so, who composes such family ? Give their means of support? Have they you wife and danghot, No Truent 8, Dulysont 20. Are you receiving any pension? If so, what amount, and for what disability? time Trak ceceding lette for issian Sworn to and subscribed before me this the) fames Handers mas County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,	
COUNTY.	
A. J. Backey , of said State and County, hav	ing been presented
as a witness in support of the application of Jane vo Danters	
under Section 1254, Code, and after being duly sworn true answers to make to the fe	mowing questions,
deposes and answers as follows: 1. What is your name and where do you reside? A D Bailey	
In Dickall Co La Westview P.O.	
0- 100 (0004)	ne applicant; if so
2. Are you acquainted with factor and the how long have you known him? Ever since 1862	ic approduct, it so
3. Where does he reside, and how long and since when has he been a resident of this	State?
Lithra in Dellate longe Ever strice V Knew him	State .
1. When, where and in what company and regiment did he enlist, and how do you l	mow 9 1862
than a wife the mett los to Co. J. 48 for Negh	LUOW 1
5. Were you a member of the same company and regiment? 'Ye	h parahaman mermalam um um um
6. How long did he perform regular military duty, and what do you know of his servi	co os a Confederato
soldier, and the time and circumstances of his discharge from the service? 3 year	d was a
good soldier aroled at surender	
The state of the s	
The state of the s	
	2 mass
7. What property, effects or income has the applicant? (Give your means of know.	leage.)
I know from close personal agrant	cee.o
me or on it workeding	
8. What property, effects or income did the applicant possess in 1806, 1807, 1808 at	id 1899, and what
disposition, if any, did he make of same?	
	<u> </u>
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? Fasure.	Very wear
Physical condition	
	· · · · · · · · · · · · · · · · · · ·
11. Is the applicant unable to support himself by labor of any sort, if so, why?	is, on
account of age and nifernity.	
12. How was he supported during the years 1898 and 1899? By his chi	ldrein
13. What portion of his support for these two years was derived from his own labor or Each year about \$25 dollars.	income?
14. Give a full and complete statement of the applicant's physical condition that entitles	him to a pension
under Section 1254, Code? He has Rheimalism and	
of Smithering.	
The state of the s	
15. What interest have you in the recovery of a pension by this applicant?	rie!
\ \(\cdot\), \(\cdot\), \(\cdot\) \(\cdot\)	
the 17th day of 1900.	Witness.
- 11/1/ Comadale Ordinary	

AFFIDAVIT OF PHYSICIANS

STATE OF GEORGIA,
Defalla county.
- Peraonally came before me CO. A Houston and
W.J. Currely , both known to me as reputable physicians
of said County, who, being severally sworn, say on oath that they have examined carefully Lanna
, applicant for pension under Section 1254, Code, and after
such personal examination say that his precise physical condition is as follows:
Old Cige - Me - culo / Kiminathing -
Chome Frank of the
•
They further say on oath that the physical condition of applicant renders him unable to labor at
any work or calling sufficient to earn a support for himself, and that we have no interest in said pension
being allowed.
Sworn to and subscribed before me this the
17 day of Aug 1900.) 71 Horas min
MM Cagolice Ordinary.
ORDINARY'S CERTIFICATE.
ORDINARY'S CERTIFICATE.
ORDINARY'S CERTIFICATE. STATE OF GEORGIA,
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, De Jack County.
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, De Jack County.
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, De Jack County. I. M. Magalage , Ordinary in and for said County, hereby certify
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, State County. I, Magazine County, ordinary in and for said County, hereby certify that the applicant Sands Sand Is resides in said County, and has
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, State County. I, Managed County, ordinary in and for said County, hereby certify that the applicant Sands Sand Is resides in said County, and has
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Land County. I. Magdage, Ordinary in and for said County, hereby certify resides in said County, and has been a bona fide resident of this State since the H day of Olf 1832.
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Land County. I. Land County.
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Land County. I, Land County. I, Land County. In the applicant. Land County, and has been a bona fide resident of this State since the day of Oct. In the witnesses, viz: Bailey and that the witnesses, viz: Bailey for 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 cach witness took.
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Land COUNTY. I, Land County, ordinary in and for said County, hereby certify resides in said County, and has been a bona fide resident of this State since the day of Oct. In the witnesses, viz: Back guides in said County, and has been a bona fide resident of this State since the day of Oct. If urther certify that before answering the foregoing questions the applicant and cach witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Lightham County, I, Maybelle , Ordinary in and for said County, hereby certify that the applicant. Language , Ordinary in and for said County, and has been a bona fide resident of this State since the 44 day of County, and has used a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has used that the witnesses, viz: David guardent of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and has been a bona fide resident of this State since the 44 day of County, and the 44 day of County, and has been a bona fide resident of this State since the 44 day
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Land COUNTY. I, Land County, hereby certify that the applicant. Land Sand County, and has been a bona fide resident of this State since the day of Cap 1832. Indeed that the witnesses, viz: David George 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 he oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed. I further certify that the tax digests of De Mall County show that applicant.
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Land County. I, County. I, County. I, County. I, County. I, County. In the applicant. I county, and has been a bona fide resident of this State since the day of County, and has been a bona fide resident of this State since the day of County. I further certify that before answering the foregoing questions the applicant and cach witness took. The county was signed. I further certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the tax digests of County show that applicant and certify that the certify that the tax digests of County show that applicant and certify that the certificant certific
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Lack COUNTY. I, Lack COUNTY. I, Lack County, hereby certify that the applicant Lack County, and has been a bona fide resident of this State since the day of County and has not that the witnesses, viz: Described and that the witnesses, viz: Described and that the witnesses, viz: Described and that the full text of the affidavits was read to the applicant and witness before same was signed. I further certify that the tax digests of De Malk County show that applicant and county
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Land County. I, County. I, County. I, County. I, County. I, County. In day of County, and has resides in said County, and has been a bona fide resident of this State since the day of County. In day of County and has recorded and that the witnesses, viz: I further certify that before answering the foregoing questions the applicant and cach witness took he cath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness refere same was signed. I further certify that the tax digests of County show that applicant enturned for taxation in his name in 1898 Dollars Dollars Dollars of property. In my opinion the foregoing claim is made in good faith.
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Leach COUNTY. I, County, hereby certify that the applicant law county, hereby certify resides in said County, and has been a bona fide resident of this State since the the day of County, and has been a bona fide resident of this State since the the day of County, and has been a bona fide resident of this State since the the day of County and has been a bona fide resident of this State since the the day of County and has been a bona fide resident of this State since the the day of County and has been a bona fide resident of this State since the the day of County and has been a bona fide resident of this State since the the day of County and that the witness took he cath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed. I further certify that the tax digests of the affidavits was read to the applicant and witness before same was signed. I further certify that the tax digests of the affidavits was read to the applicant and witness before same was signed. County show that applicant pollars of property, and in 1899 Dollars of property. In my opinion the foregoing claim is made in good faith. Witness my hand and scal of office, this this day of the day
ORDINARY'S CERTIFICATE. STATE OF GEORGIA, Land County. I, County. I, County. I, County. I, County. I, County. In day of County, and has resides in said County, and has been a bona fide resident of this State since the day of County. In day of County and has recorded and that the witnesses, viz: I further certify that before answering the foregoing questions the applicant and cach witness took he cath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness refere same was signed. I further certify that the tax digests of County show that applicant enturned for taxation in his name in 1898 Dollars Dollars Dollars of property. In my opinion the foregoing claim is made in good faith.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answer make to each of the questions asked of you; and the evidence you shall give will be the whole truth, so help you God."

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

3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof, as above set out.

POWER OF ATTORNEY.

L. hereby authorize

of

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

at

by

Witness my hand and seal, this day of 1901.

Executed in presence of

SOLDIER'S PENSION.
1901.

(For Those Aiready Enrolled.)

No. 463

ndus, James

FOR THOSE ALREADY ENROLLED.

[L. S.]

OHN W. LINDSEY,

WARRANT HANDED TO

POWER OF ATTORNEY.

Ι,		hereby a	uthorize	
****		of		
o receive and rec	eipt for the	pension allowed and	request that he	remit same
		at		

Executed in presence of

DIER'S PENSION 1902.

WARRANT ISSUED

WARRANT HANDED TO

WARRANT HANDED TO

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Le Rach County
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the the day of OC 1830; that he is 20 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of A 1) during the war between the States and served for the term of 2 years in Company I, of 48 th Regiment is that his physical condition is as follows: Lucia Sing from Municality and the follows: Lucia Sing from Municality and the follows:
that his property consists of the following items have
That the property construction of the property
Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of New county been allowed a pension for the year 1 Sworn to and subscribed before me, this the 21 day of farm 1901. I have heretofore as a resident of New County been allowed a pension for the year 1 Ordinary.
STATE OF GEORGIA,
do certify that I am well acquinted with and that the statements in the applicant in the foregoing affidavit, and am well satisfied that the statements in the by him in his said affidavit are true, and I know 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 file 1 1901.

N OTE - The Ulank spaces must be filled

Nore. - Affidavit should not be aftested before January 1st, 1901

STATE OF GEORGIA. De Walk County. Personally appears James Danders of De Kilh 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 day of Oly 1830; that he is 72 years old and since the by occupation a Harner that he enlisted in the military service of the Confederate States (or of the State of Za) during the war between the States, and served for the term of 2 in Company I, of 48 th Regiment of La Kal ; that his physical condition is as follows: Rhumatism + Heart Isoully of La Val that his property consists of the following items Dollars, that by reason of his physical of the value of UU 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 He Ral county been allowed a pension for the year 190/1 Sworn to and subscribed before me, this the 3th day of Jan Mogsday STATE OF GEORGIA, Millosdace Ordinary of said County, do certify that I am well acquainted with Jamels the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

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

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

POWER OF ATTORNEY.

	Sandino			
receive and receipt	for the pension a	llowed and re	quest that he re	emit sam
Witness my hand a	nd seal, this 30	May of	2 an	1
Executed in pres	sence of	Jam	his Sand	10
Motor of	m			
		12.50		4

LDIER'S PENSION Name Sanders James Regiment H 4Th JOHN W. LINDSEY, WARRANT HANDED TO WARRANT ISSUED 1903. DeValle

(FOR THOSE ALREADY ENROLLED.)

INDIGENT

(FOR THOSE ALREADY ENROLL

No. 420

INDIGENT

SOLDIER'S PENS 1904

JOHN W. LINDSEY,

WARRANT HANDED TO

STATE OF GEORGIA. Se Nath County. Personally appears similar Daniele wo of De Mall 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 14 day of (Cet 1830; that he is 71 years old and by occupation a Masues, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 2 Leave in Company I, of the Regiment of En la graphic with that his physical condition is as follows: licas) Trouble that his property consists of the following items: U / 16 C. of the value of CO 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 A.c. Rall county been allowed a pension for the year 1/02, Sworn to and subscribed before me, this the James X Sanders day of A 21 1903. Minardace Ordinary. STATE OF GEORGIA, Schall I. H. III Regulace Ordinary of said County, do certify that I am well acquainted with fance worders the applicant in the foregoing affidavit, and am well satisfied that the statements made by

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

Given under my official signature and seal, this.....

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

Millagidas

be and that he resides in this County.

day of MUI

STATE OF GEORGIA. DEKall County. Personally appears James Sanders of Jestuck 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 14 day of LCf , 1837; that he is 74 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 2 Yours in Company 7, of 48th Regiment of ; that his physical condition is as follows: Rama matis m well their trouble that his physical condition is as that his property consists of the following items: Hone of the value of ______Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Wells County been allowed a pension for the year 1 903 Sworn to and subscribed before me, this the 131 day of January 904. Ordinary. STATE OF GEORGIA, Descall I James 19 Storge Ordinary of said County, do certify that I am well acquainted with James Saundys the applicant in the foregoing affidavit, and am well-satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this day of January

APPLICANTS DENETUTIONE ALLUWED

Note.—The blank spaces must be filled.

Norg.—The blank spaces must be filled.

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

Affix your Seal here.

County.

STATE OF GEORGIA. STATE OF GEORGIA, 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:

What is your new spell where do you reside? (Give State County and post-office).

Additional Company COUNTY. hereby authorize 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?

4 June 9 C 7 2 7 8 3 2 When and where were you born? Oct 2-21-1882 Hall consily .day of. Witness my hand and seal, this. 48 ya Riginust Donyeng & .[L. S.] Executed in presence of 5. How long did you remain in such company and regiment? 6. When and where was your company and regiment surrendered and discharged? 18660 Were you present with your company and regiment when it was surrendered.

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I wan with y chrimina 9. How much can you earn (gross) per annum by your own exertions or labor? about 10. What has been your occupation since 1865? Hauning Your State 1865? Hauning Your State 1965? Hauning Your State 1965? Hauning You have been in such ondition that you could not earn your 12. It upon the first ground, state how long you have been in such ondition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? 13. What property, real and personal, or income, do you possess, and its gross value? Wilhing 14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1898, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? Hulling Made no disposition has north 15. An what County did you reside during those years and what property did you then return for taxation? How were you supported during the years 1899, 1900, 1901 and 1902? What 17. How much did your support cost for each of chose wars, and what portion did you contribute thereto by your own labor or income? 1 / 18. What was your employment during 188, 1899, 1901 and 1902? What pay did you receive in each year?

19. Have you a family? 1 6, who composes such family? Give their means of support? Have they a homestony, or other property? Their ages and how employed? Myself + wife Children all married name of Applicant, Compassing as indicated above. TO W. LINDSEY, I did receiving any pension? If so, what amount and for what disability? I was a HANDED 21. Have you ever made an application for pension before ? 22. How many applications have you ever made and under mat class? Out - Suc DIGENT WARRANT Sworn to and subscribed before me this the NHOL will

STATE OF GEORGIA,	STATE OF GEORGIA,
Destall County.	Dikall COUNTY.
A. T. Kinnelly of said State and County, aving been presented	Personally came before my Buf A Synd MD. and
as a witness in support of the application of Aurus Sandens for pension	Personally came before med Control and
under section 1254, Code, and after being dull sworn true answers to make to the following questions, deposes and	Softanda M.D., both known to me as reputable physicians
answers as follows: 1. What is your name and where do you reside?	of said County, who, being severally sworn, say on oath that they have examined carefully.
11010	Janua Jandum , applicant for pension under Section 1254, Code, and after
2. U. Annell James	
2. Are you acquainted with the applicant; if so, how long have you known him?	such personal examination say that his precise physical condition is as follows:
long have you known him? 40 40 40 40 40 40 40 40 40 40 40 40 40	applicant, James Sanders, has thron
Nikallo, 74 read	alleumstism contracted while serving in civil i
4. When; where and, in what company and regiment did he callst, and how do you know?	his heart has become agritul from the nhounding
Shing 4864. I do not know	Leaves story by exhausted when fatherfling to do an
5. Were you a member of the same company and regiment?	us well hat blacking greatly arbitisted totally unp
6. How long did he perform regular military duty?	tuendight would of sight greatly impossed -
7. When and where was his command surrendered?	and that we have no interest in said pension being allowed. Deg allowed.
	Sworn to and subscribed before me, this, the
8. Were you present when it surrendered?	12 say of april 1904)
9. Was applicant present?	Lanin Splant Ordinary.
When did be leave his command? he about a flar for what cause?	ORDINARY'S CERTIFICATE.
By what authority he left? I glo not Know. How do you know all of this?	omittin or grongi
I know he went to the army	STATE OF GEORGIA,
of favor remains of the	DE/galla County.
11. What property, effects or income has the applicant? (Give your means of knowledge.)	1, James R give Ordinary, in and for said County, hereby certify
Mulling	that the applicant farm Canal Tresides in said County, and has
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 samg?	been a bona fide resident of this State since the 22 day of 22/832
Melly no destition	and that the witnesses, viz.: V.V. Princes
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?	
had willing to corney	are of trustworthy character, and that their statements are entitled to full faith and credit.
14. What ig the applicant's occupation and physical condition?	I further certify that before answering the foregoing questions the applicant and each witness took the oath
he has no ocyholion. Thyical Condition	hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.
La Lad	I further certify that the tax digest ofCounty shows that applicant
15. Ly the applicant unable to support timeself by labor of ony sort; if so, why?	2007
I do not think he is	returned for taxation in his name in 1899 Dollars of
noncon a management management management and particular and a management management and a management	property, and in 1900 Dollars of property; in 1901
16. How has he supported during the year 1898, 1899, 1900, 1901 and 1 02 ?/	Dollars of property; in 1902
what fill he did the his abildold	Dollars of property.
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	12 21 -1
1 1/2 A A A A A A A A A A A A A A A A A A A	Witness my hand and seal of office, this day of 1907
Section 1254, Code? V /Luow with ground continues	Janua Plany Ordinary,
19. Who composes family?, What property have they? Children's age and their earning capacity?	of Deleath County.
hinself & wife	NOTE.
0	1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following
20. What interest have you in the recovery of a pension by this applicant? The cat will	1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." 2. Additional affidavits may be attached if blank spaces are insufflicint. 2. Additional affidavits may be attached by the character of the witness, and as to the execution of the proof as above every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above every case the contract.
Sworn to and subscribed before me, this the	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.
/ 81 day of Opinil 1904 Witness.	
	as adore set out.

Dollars of

County.

Janes Pluste Ordinary. 1904 Jame Soulis Resulting 6 724-1924 Georgia & Janus Vandin Dekall coming make This affidavit Grandyny of Dukach county at in March tenn 7903 million was natified to appear before The Encus Jun 9-1904 Jung and make and a claim felt This pure is dais Oliver or Vague " why I was Jan Races of 190x drighed family Sandens o from to him of Summe to and Orner contilulas for Entrement before ben 1904 Dunday Rinn Upwil 18#7904 Jonno Rfurge Ordinary

3no. W. Lindsey, Commissioner of Pensions, Bilanta, Ga.

PENSION OFFICE,

March 26, 1904.

To James Sanders

Decatur, DeKalb County, Ga.

Sir:

This evidence must be first-class, made before Ordinary of your County, clearly and distinctly showing, beyond doubt, your right to this Pension under the law.

- 1-- were you before the Grand Jury of Dekale dounty at the Mirch
 Term 1903. Were you notified to appear before the Grand Jury
 and take out your claim for a Peneton.
- 2-- Show cause by a new application and proof your Indigency and Inability to earn a support; and your full right to the Indigent Pension of Georgia.

Respectfully,

Com Assioner of Pensions.

DISAPPROVED

NAME Sanders, James . YEAR 1904 CCUNTY DeKalb (previously drew a pension)

WHEN AND WHERE BORN? Resident of Georgia continuously since October 14, 1839 (74 years old)

ENLISTED THEN AND THERE?

RAIM.

COMPANY AND RECTAMENTS Company , 48th Regt.

NALE OF CAPTAIN AND COLONEL?

. MOUNDEDS

CAPTURED, WHILE LAID LIBILE?

RELEASED.

THEN AND WHERE SULRENDERED?

IF NOT PARSENT AT SUMMEMBER, WILLIAM WITHE YOU?

- DIED, WHEN ALL MAKE?

BURTED.

WITH ASSES.

lw

(Additional information)

YEAR 1901 COUNTY Dekelb

WHEN AND WHERE BORN? - Resident of Ga. since October 14th. 1830.

I MILISTED WHEN ALL WERET

RANK.

COLPANY AND REGISENT? Co. I, 48th. Regt. Ga. Infantry

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND JELLE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDAR, WHERE WERE YOU?

DIED. WHEN AND WHERE?

BURIED ..

WITNESSES.

NAME Sanders, James. YEAR 1911

AR 1911 COUNTY DEKELD

MINET AND WHERE BORN? October 14th 1852, Hall County, Georgia.

WHEN AND WHERE? 1862, Lawrenceville, Georgia.

COMPANY AND REGIMENT? Company I, 48th Georgia Regt.

TAL CF CAPTAIN AND COLONEL?

WC JN JFD?

CAP THEED, WHEN AND WHERE?

EULEASED.

THEN AND WHERE SURRENDERED? April 9th 1865, Appoint tox Court House, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

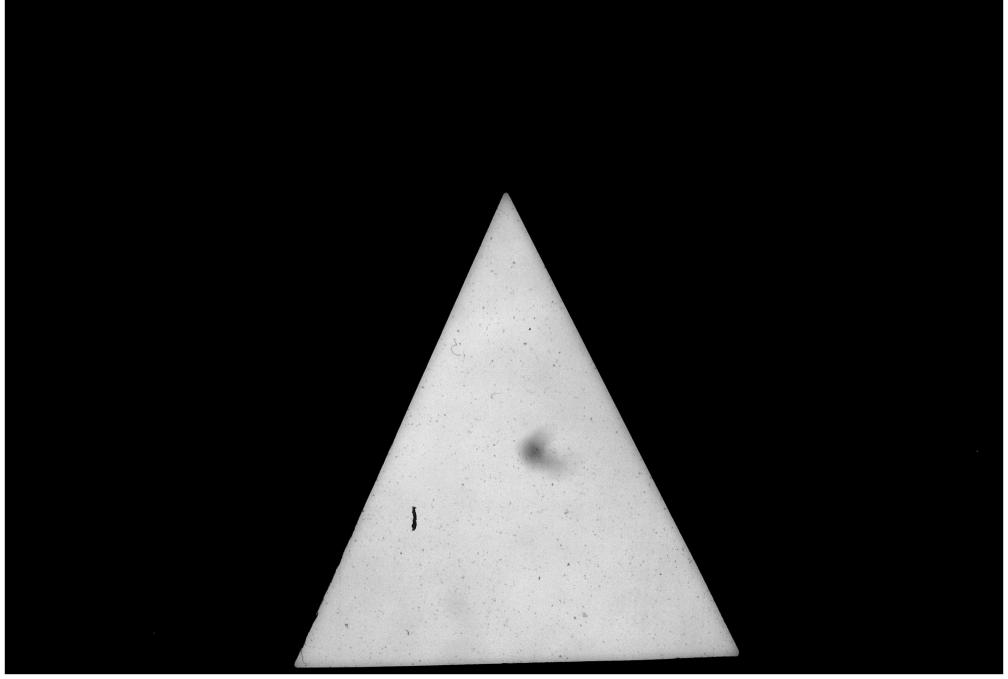
BURIED.

WI INESSES. D. J. Bailey-

Same command-

No data

JWT



Britis ma/rth Sandery Willow's John Henderen Widow's Application UNDER ACT 1910. Who Lost a Husband During War as a Soldier, Remarried and is Now a Widow. Course DeKall Soldier Husband's Name.
John Kinderson Regiment Liba Batalion James Sanders J. W. LINDSEY,

Chas. P. Byrd, State Printer, Atlant

10/30/14

Widow's Application

Widow's Application

UNDER ACT 1910.

Who Lat a Husband During War as a Soldier, Remarried and is Now

Soldier, Remarried and is Now

Regiment Lat Husband Marders

Regiment Lat Husband

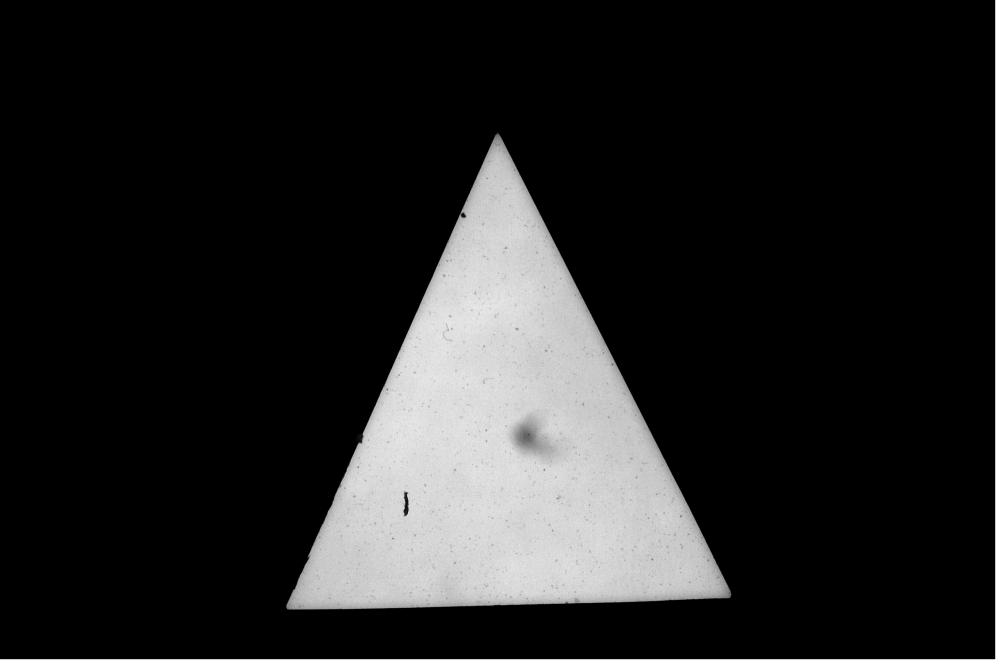
Name of Law Husband

Name of Law

STATE OF GEORGIA, County.
Personally before me comes. M. P. Julia Sand of said county who after being sworn on oath
hay stat she became the lawful wife of fibres. May always that she did on the 2 day of 2 fibres 1862 enlist in Company A-12 Ga Regiment and was on the 22 day of 1863 billed or died as the result of an injury received while
that he did on the
and was on the 20 day of 1244 1800 and the result of an injury received while
n line of duty on theday of1863, leaving this opplicant, his widow.
That on the
of Allala State of Ja , the said Allaret Samuelied and that
That she was on the 4th day of November, 1908 or at the death of her last husband left in the use possession and control of the property. Stated in schedule (A)
possession and control of the property. Stated in schedule (A)
Horses or mules
Hogs and cows and other stock
money, notes, etc.
. O
Total Vulling
SCHEDULE B.
That since the 4 of November, 1908 or the death of her husband, she has sold, given away the
following property of the cash value
Total value
and that the proceeds were disposed of
SCHEDULE C.
That she is now in the use, possession and control of the following property at the cash value attached
acres of land of the cash value Multipage
Horses and cows of the cash value
Hogs and other stock
Total value of all property.
and that the valuation of all of said property, is stated at its true cash value.
Sworn to and subscribed to by me this
Januar Regioner Ordinary.)
Destable County Mark
County) Warse
Affidavit of the Witness to the Service and Death of Soldier
Husband and Her Marriage.
STATE-OF GEORGIA,
County.
Personally before me come
knew the Huslemen, that he enlisted in Company 12. 12 Da Marchellen
vertrans on the 28 day of 1862
and that on theday of
while in line of duty as a soldier, in the Confederate army, and that he knows Mrs.

I	married again on the day of 19 to one to an analysis an
+	hat her said husband has Sander died on the 5 day of 1914 and that the
	Andia Bandis applicant is now a widow.
0	() () () () () () () () () ()
1	A. Carry Ordinary.
1	County County
7	
1	
1.	Affidavit of the Witness to the Property and its Value.
Ø,	STATE OF GEORGIA,
2	Tierale County. DE Thompson
3	County Control
	Personally before me MACAN Men who after being sworn on oath says that they are
	Free Holders of said County of Dekall and that they know Mrs Julia Sauden and
t	hat she was on the 4th day of November or at the death of her last husband, on the
C	of 19/4 and that he left her in the use, possession and control of property at its true case
. '	ralue, as follows.
	SCHEDULE A.
0	Lands whose cash value Marthing
}	Horses mules
4	Cows hogs and other stock
3	Manuscript and accounts
10	Money, notes and accounts
30	All other property
3	Total cash value of all property
13 MHz	1 otal cash value of an property
7 7	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of
3	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold a given away property of the cash value of to-with
3	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of the control of t
3	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold given away property of the cash value of to-with land worth. Land worth. A. M.
3	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold given away property of the cash value of to-will land worth. Horses and mules.
3	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of the away property of the cash value of to-with land worth hose and mules. Cows, hogs and stock of all kind any and all other property.
~).	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of the last husband she h
~).	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of the analysis of the cash value of to-with land worth. Horses and mules. Cows, hogs and stock of all kind. any and all other property. Total cash value.
~).	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of given away property of the cash value of to-will land worth. Horses and mules. Cows, hogs and stock of all kind any and all other property. Total cash value. Total cash value its full cash value and was disposed of State fully.)
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	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of given away property of the cash value of to-with and worth horses and mules. Cows, hogs and stock of all kind any and all other property. Total cash value is full cash value and was disposed of State fully.) SCHEDULE C. We know that the applicant is now in the use, possession and control of property of the acturates value as follows, to-wit: Land of the cash value of horses and mules, cash value of Cows hogs, and other stock wagon and Buggy.
	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of given away property of the cash value of to-will land worth. Horses and mules. Cows, hogs and stock of all kind. any and all other property. Total cash value. Its full cash value and was disposed of this property were. State fully.) SCHEDULE C. We know that the applicant is now in the use, possession and control of property of the acturates value as follows, to-wit: Land of the cash value of those and mules, cash value of the cas
	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of given away property of the cash value of to-will land worth. Horses and mules. Cows, hogs and stock of all kind any and all other property. Total cash value. State fully.) SCHEDULE C. We know that the applicant is now in the use, possession and control of property of the acturates value as follows, to-wit: Land of the cash value of. Horses and mules, cash value of. Cows hogs, and other stock. Wagon and Buggy. Other personal property. Money notes and accounts.
	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of given away property of the cash value of to-will land worth. Horses and mules. Cows, hogs and stock of all kind any and all other property. Total cash value. Schedule C. We know that the proceeds of this property were. its full cash value and was disposed of the state fully.) SCHEDULE C. We know that the applicant is now in the use, possession and control of property of the acturates and mules, cash value of Cows hogs, and other stock. Wagon and Buggy. Other personal property Money notes and accounts. Actual income and savings.
	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of given away property of the cash value of to-will land worth. Horses and mules. Cows, hogs and stock of all kind any and all other property. Total cash value. State fully.) SCHEDULE C. We know that the applicant is now in the use, possession and control of property of the acturates value as follows, to-wit: Land of the cash value of. Horses and mules, cash value of. Cows hogs, and other stock. Wagon and Buggy. Other personal property. Money notes and accounts.
	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of given away property of the cash value of to-will land worth. Horses and mules. Cows, hogs and stock of all kind any and all other property. Total cash value. Its full cash vade and was disposed of State fully.) SCHEDULE C. We know that the applicant is now in the use, possession and control of property of the actural value as follows, to-wit: Land of the cash value of. Horses and mules, cash value of. Cows hogs, and other stock. Wagon and Buggy. Other personal property Money notes and accounts. Actual income and savings. Total cash value of all property.
	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of given away property of the cash value of to-will land worth. Horses and mules. Cows, hogs and stock of all kind. any and all other property. Total cash value. SCHEDULE C. We know that the applicant is now in the use, possession and control of property of the acturash value as follows, to-wit: Land of the cash value of. Horses and mules, cash value of. Cows hogs, and other stock. Wagon and Buggy. Other personal property Money notes and accounts. Actual income and savings. Total cash value of all property. Money notes and accounts. Actual income and savings. Total cash value of all property. Mosey notes and savings. Total cash value of all property. Aday of Oct. 19.44.
	SCHEDULE B. We know that since the 4th November, 1908 or since the death of her last husband she has sold of given away property of the cash value of to-will land worth. Horses and mules. Cows, hogs and stock of all kind any and all other property. Total cash value. Its full cash vade and was disposed of State fully.) SCHEDULE C. We know that the applicant is now in the use, possession and control of property of the actural value as follows, to-wit: Land of the cash value of. Horses and mules, cash value of. Cows hogs, and other stock. Wagon and Buggy. Other personal property Money notes and accounts. Actual income and savings. Total cash value of all property.

TATE OF GEORGIA.
Telcalle County.
I Las R Lor Stem ordinary of said County and do certify that I know Mrs
pplicant for Pension and that I know that she is the person that she represents herself to be, and that she
s a bona fide continuing resident of said county, and was on the 4th day of November, 1908.
That I also know witness to the service, of Husband's marriage, and the death
Husband, and I also know A Desica M. Messan whom I know to be resident and free-holder of said
ounty, that all of said persons were duly sworn by me before signing their respective affidavits and that
hey are truthful and trustworthy persons and their statements are entitled to full faith and credit.
That the Tax Books of Rikell County, shows nathering returned property to
ne amount of 1908
Given under my hand and official seal of affix, this to 22 day of Oct 1914
orvent didde my using and omersia sear of and, this so
1 Tulade county
Read this note. 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
You do solomnly swear that you will true answers make to each of the questions asked you and the evidence you shall we will be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the ordinary of the County of the residence of the person to be sworn. 4. Only widows whose husbands died from wounds or injuries, received in line of duty before 26 April 1865, since
arried and is now a widow are entitled to this Pension. 5. Attach copies of marriage license of both marriages or prove marriage, by some who know it, or by general
putation.
Count House was burned in Junes
County in 1870 So a copy of manninge
Licence Cannot be oblained I Know a
and could control
Mis own knowledge
and 2211/6/11 / family yunge
Out man
of my own knowledge fames & Grove



POWER OF ATTORNEY. STATE OF GEORGIA.

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Widow of Malhaniel L. Sanders						40			y authorized	
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JOHN W. LINDSEY,			11:4:		#			r regist	the pe	
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WARRANT HANDED TO								190_	Howed	
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GEO. W. HARRISON, STATE PRINTER, ATEANTA							L B		hat be	
9/29/08										

County.	STATE OF GEORGIA,
County.)	Dikally gounty
I,hereby authorize	avail herself of the pension Ryowed to Indigent Widows of Confederate Soldiers, under Act of General Assembl
County to receive and receipt for the pension allowed and that he	passed December 19, 1900, hereby submits her proofs, and after being duly sworn true answers to make to the
mit the same to me atby his check or registered mail.	following questions, deposes and answers as follows: S. J. What is Tout name and where do you reside? (Give States Guniy and Postofice.)
Witness my hand this day of 190	Califabeth anders Descale County & a Dice
Transes my mand this day of	1. Someon and since when have you feen a resident of this State?
Executed in presence of	When and where were you born
Ordinary, L. S.	When and where was your husband boungstate his full name, and when were you and be married
County.	(Attack copy merriage license in every case.) They - 183 2 . Malhania
	5. When and where and in what Company and Request did, your husband enlist or serve during the
SEAL.	war between the States? /869 World Co
	6. How long did your husband serve in said Company and Regiment? about 3
	When and where did your husband's Company and Regiment sugrender and was discharged?
	8. Was your husband present at the time and place when his Company and Regiment surrendered?
	helia
Control of the second of the s	9. If not with his command at surrender that clearly and specifically where he was, when he left command, for what cause, and by what authority?
	wer was over
	The same of the sa
	10. When and where did your husband die?
	11. Which of the following grounds do you base your application for pension, viz.: Eiry Age and Pou
	erty; Second-Infirmity and Poverty, or Third-Blindness and Poverty? Infirmity & Vol
	12. If upon the first ground, state how long you have been in such a condition that you cannot earn you support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the thir state whether you are totally blind, and when and when you lost your sight?
	13. What has been your occupation since your husband's death? I had y conf
	14. How much can you earn gross, by your own exertion or labor? Williams
	15. What property, real or personal, or income do you have or possess, and its gross value
	- I Trave no Suchery
	16. What property, real or personal, did you possess at the though or he left you, and of the yea 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1905, 1907, 904 what disposition, if any, by sale or gift have you mad of the same?
	18. What properly, real or personal, did you possess attleath of husband or he left you, and of the yea 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you mad of the same? 17. In what counties did you regide in 1901, 1902, 1903, 1904, 1905, 1908 and 1907, and what proper
	18. What property, real or personal, did you possess at the sth of husband or he left you, and of the yea 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you may of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what proper did you return for taxation? 18. How have you been supported since doubt, of husband and especially for 1899, 1900, 1901, 1901.
	18. What property, real or personal, did you possess attleath of husband or he left you, and of the yea 1899, 1900, 1901, 1902, 1903,1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you may of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what proper did you return for taxation? 18. How have you been supported since both of husband and especially for 1899, 1900, 1901, 1905, 1908, 1904, 1905, 1906, 1906, 1906, 1906, 1907, 19
	18. What property, real or personal, did you possess at fleath of husband or he left you, and of the yea 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you mad of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what proper did you return for taxation? 18. How have you been supported since fouth of husband sand especially for 1899, 1900, 1901, 1901, 1903, 1904, 1905, 1906 and 1907? 19. How much did your support cost for each of those years, and how much did you contribute by your paper over income?
ON.	16. What property, real or personal, did you possess at death of husband or he left you, and of the yea 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you may of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what proper did you return for taxation? 18. How have you been supported since footh of husband sand especially for 1899, 1900, 1901, 1901, 1903, 1904, 1905, 1906 and 1907? 19. How much did your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of these years, and how much did you contribute by your support cost for each of the years.
SION. Slander S. To	18. What property, real or personal, did you possess attleath of husband or he left you, and of the year 1899, 1800, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you may of the same? 17. In what counties did you regide in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what proper did you return for taxation? 18. How have you been supported since death of husband especially for 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907? 19. How much did your support cost for each of those years, and how much did you contribute by your contribute of the years, and how much did you contribute by your contribute of the years, and how much did you contribute by your contribute of the years, and how much did you contribute by your contribute of the years, and how much did you contribute by your contribute of the years, and how much did you contribute by your contribute of the years, and how much did you contribute by your proposes the years, and how much did you contribute by your proposes the years, and how much did you contribute by your proposes the years, and how much did you contribute by your proposes the years, and how much did you contribute by your proposes.
INSION. SERY, SERY, SERY, Antonio	18. What property, real or personal, did you possess attleath of husband or he left you, and of the yea 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you may of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what proper did you return for taxation? 18. How have you been supported since death of husband and especially for 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907? 19. How much did yous support cost for each of those years, and how much did you contribute by you own labor or income? 20. What was your support cost for each of those years, and how much did you contribute by your receive for each year? 10. What was your support cost for each of those years, and how much did you contribute by your receive for each year? 11. Have you a family? If so, who composes sugfi family? Give their means of support?, Have the
PENSION. Rade Kade Kade Kade Kade Kade Kade Kade K	18. What property, real or personal, did you possess attleath of husband or he left you, and of the year 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you may of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what proper did you return for taxation? 18. How have you been supported since fighth, of husband sand especially for 1899, 1900, 1901, 1901, 1903, 1904, 1905, 1906 and 1907? 19. How much did your support cost for each of those years, and how much did you contribute by you own labor or income? 20. What was your employment suring 1901, 1903, 1903, 1905, 1906 and 1907—how much any lands or other property? 21. Have you a family? If so, who composes such family? Give their means of support? Have the any lands or other property? 22. Have you ever made application for pension before? 18. What the property is a support to the pension before? 23. Have you ever made application for pension before?
OW'S PENSION. Kalk Kalk LINDSRY. Commissioner of Pension. HANDED TO	18. What property, real or personal, did you possess attleath of husband or he left you, and of the year 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you may of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what propert did you return for taxation? 18. How have you been supported since neeth of husband real especially for 1899, 1900, 1901, 1903, 1904, 1905, 1906, 1906 and 1907? 19. How much did yous support cost for each of those years, and how much did you contribute by you own labor or income? 20. What was your support of the year of the year, and how much did you contribute by your receive for each year? 10. What was your support cost for each of those years, and how much did you contribute by your receive for each year? 11. Have you a family? If so, who composes such family? Give their means of support? Have the any lands or other property? 21. Have you a family? If so, who composes such family? Give their means of support? Have the any lands or other property?
	18. What property, real or personal, did you possess attleath of husband or he left you, and of the year 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you may of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what proper did you return for taxation? 18. How have you been supported since fighth, of husband sand especially for 1899, 1900, 1901, 1901, 1903, 1904, 1905, 1906 and 1907? 19. How much did your support cost for each of those years, and how much did you contribute by you own labor or income? 20. What was your employment suring 1901, 1903, 1903, 1905, 1906 and 1907—how much any lands or other property? 21. Have you a family? If so, who composes such family? Give their means of support? Have the any lands or other property? 22. Have you ever made application for pension before? 18. What the property is a support to the pension before? 23. Have you ever made application for pension before?
	18. What property, real or personal, did you possess attleath of husband or he left you, and of the year 1899, 1800, 1901, 1902, 1903, 1904, 1907, 1904 what disposition, if any, by sale or gift have you may of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what propert did you return for taxation? 18. How have you been supported since doubt of husband sale especially for 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, 1906, 19
WIDOW'S WIENT PENSION. SLIGHT PENSION. SLIGHT PENSION. Commissioner of Pension. Commissioner of Pension. Commissioner of Pension. Commissioner of Pension. STORY THE PENSION. Commissioner of Pension. Commissioner of Pension. STORY THE PENSION. Commissioner of Pension. Commissioner of Pension. STORY STORY THE PENSION. Commissioner of Pension. Commissioner of Pension. Commissioner of Pension.	18. What property, real or personal, did you possess attleath of husband or he left you, and of the year 1899, 1800, 1901, 1902, 1903, 1904, 1907, 1904 what disposition, if any, by sale or gift have you made of the same? 17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what propert did you return for taxation? 18. How have you been supported since death of husband especially for 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907. 19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? 20. What was your employment sturing 1901, 1902, 1903, 1904, 1905, 1906 and 1902—how much group receive for each year? 21. Have you a family? If so, who composes such family? Give their means of support? Have the any lands or other property? 22. Have you ever made application for pension before? 23. How many applications have you made for a pension, and under what class? 8 worn to and subscribed before me, this the

STATE OF GEORGIA,	97 Hamman A. 1000 1004 1007 1009 1 1007
Majespa County.	27. How was she supported for 1903, 1904, 1905, 1906 and 1907? 28. How much did applicant contribute to her support for last two years?
(1-1: 11-1	29. Give a full and complete statement of applicant's physical condition?
been progent as a winess in support of the application of Mrs. When the support of the supp	The state of the s
been progen as a winess in support of the application of Mrs. 1900, and after being duly yourn true answers to make to the following questions, deposes and answers as follows: 1. What is your name and where do you reside!	30. What interest have you in the recovery of this pension by the applicant?
Uplante fa Fo. Allautolle, la wyonor of	Sworn to and subscribed before me this 14 01
2. Are you acquainted with the applicant, Mrs. May leg whath Sand	day of Aug 1908 John Hewart
If so, how long have you known her? Let - want of the	JEH Matheen Ordinary,
3. Where does she reside, and how long since when has she been a resident of this State? Set Rack Cola. recycle lefter that all of her life.	O Mitneses.
4. When and where was she born? July 14,1832 to Missan Co less	AFFIDAVITS OF PHYSICIANS.
5. Were you ever acquainted with her husband? 6. Where did she reside in 1861? Les Repartes la	STATE OF GEORGIA,
7. When and to whom was he married? Let 13/85 1 to Many Elastyte De louch	& K2100
8. When and where was he born? Jeb 1837 in Upicoa Co la	County.)
9 How long have you known him? About, Or yre,	personally before me comes was Afauston and an
10. When and where did Makacul L. Sainder enlist in the war between	, both known to me to be reputable
the States, and in what Openany and Regiment did he enligt, and how do you know this? . Who ale	physicians of said County who, being severally sworn, say on oath that they have examined carefully Mrs.
1862 in Charleta LC - Swara Muchon of lane Co	Migabel Sanders, applicant for a Pension under act of 1900, and after
11. Were you a member of the same Company and Regiment!	such personal examination say that her physical condition is this raction of neck
11 +20	Jold age physical condition exertinely meetance
12. How long did he perform regular military duty? About The	eye ought bad totally mable to make a living
13. When and where was his Company and Regiment surrendered and discharged from service?	and we have no ifterest in said person if allowed.
April 10 180 at Freenelong Ne.	
14. Were you with the Command when it jurgestered?	Sworn to and subscribed before me this
15. Was filled a cel & Sacreles the husband of applicant present?	Ordinary, Ordinary,
-yet	County. Got Jose Will
16. Hoot present, where was he?	- Court of
17. When and where did he leave his Command?	ORDINARY'S CERTIFICATE.
For what cause?	STATE OF GEORGIA,
By whose authority he left? Love a preculer How do you know all this? (State fully and clearly.) Love a preculer	
of the same bampany.	Me for County.
	that the assistant Mrs. We Ordinary, in and for said County, hereby certif
18. When and where did Halfraceul Sacracy die?	and has been a bona fide resident of this Standings the day of
Me mace surry formalles to See a number of youngs	18 , and that the witnesses, Mr. Loke Sleen and
19. Where did he reside at his seath and how long had he been a resident of Georgia at his death?	are of trustworthy character, and that their statement
20. Do you of your own knowledge know that applicant is the lawful widow of	I do further certify that before answering the foregoing questions, the applicant and said witnesses took the
the state of the s	I do further certify that before answering the foregoing questions, the applicant and said witnesses took the certific prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same took in the said of the same to the applicant and witnesses before the same took the same to th
21. Has she remained unmarried since her soldier husband's death, and is now his widow?	I further certify that the tax digest of County shows that applican
22. What property, effects or income has the applicant, if any, and how do you know this of your own	of property, and in 1900
knowledge?	in 1901 dollars worth of property dollars worth of property
	in 1902
23. What property, effects or income did applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and	in 1903dollars worth of property.
1907, and what disposition did she make of it?	Witness my hand and official seal this day of the 190 8
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to	(Lefison County
whom?	Norse Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following
	Norss.—1 Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the followin words: "You do solemnly swear that you will true answers make to each of the questions asked of you and the evidence you shall give will be the whole truth; so help you God." Additional amdavite may be attached. If blank spaces are insufficient. All affiavits must be made before Ordinary. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are no widows. Those married since the 6th of April, 1865, not entitled. Minesses and two Physicians are necessary to make out olaims. Attach certified copy of marriage license in every case, or show why it cannot be obtained.
25. What is applicant's physical condition and her chances and ability to earn a support?	All affidavits must be made before Ordinary. Only widows who ware the wives of the dead bushess are insufficient.
The state of the s	widows. Those married since the 9th of April, 1865, not entitled. Witnesses and two Physicians are necessary to make untitled.
The state of the s	6. Attach certified copy of marriage license in every case, or show why it cannot be obtained.

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ATTORNEY AT LAW

Thomaston. Sa

#764

Nathaniel L. Sanders & Mary Eliz. DeLoach

Dec. 7.

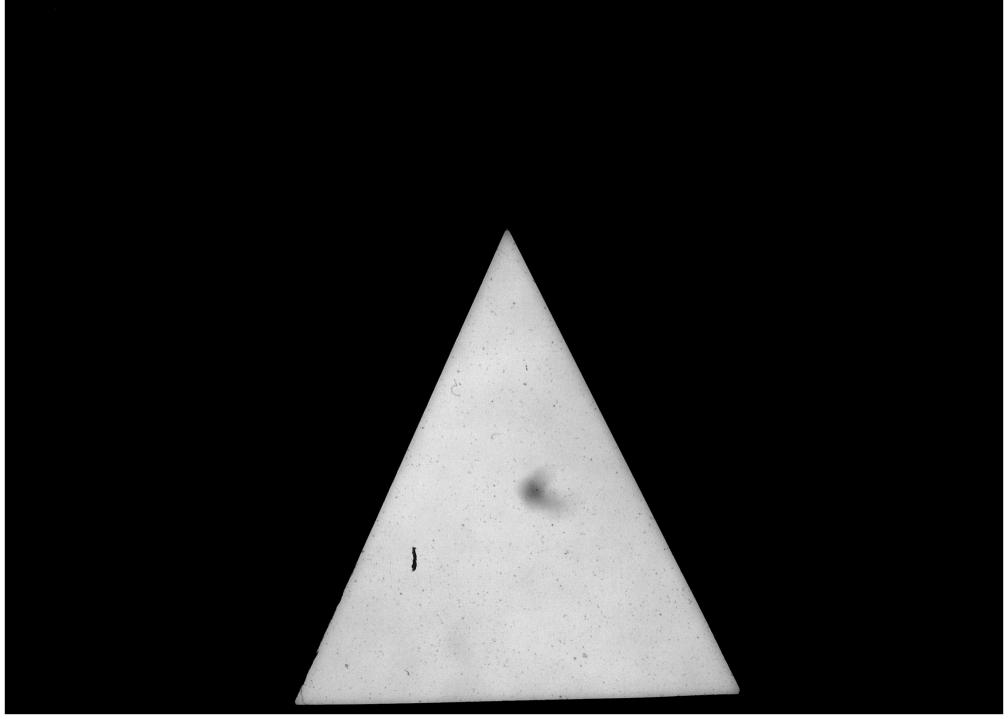
Georgia, Upson County.

I certify that Nathaniel L. Brown & Mary Elizabeth DeLoach were duly joined in Matrimony by me, this 13th day of December, 1857.

H. J. Waeless, J. P:

I hereby certify the foregoing to be a trad copy from the record in my office, Given under my official signature and the Seal of the Court of Ordinary of Upson County, Georgia, this 14th day of August, 1908.

Ordinary Upson County, Georgia.



Widow's Application

record indeed.

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

County DeKalb

STATE OF GEORGIA,

Certificate

she represents herself to be,

and that she has been,

Ordinary of said County,

1920; that I also

Mrs. Willie S. Morgan

ears to

Name Mrs. Willie O. Sanders Widow of .. Newton Sanders

Company

DEC 27 1937

The Man Teller Director.

Date of Marriage Jan. 27 1.887 Date of Husband's Death Apr. 30 1.929

Regiment_ Approved_

INSTRUCTIONS:

are entitled to full faith

(SEAL OF ORDINARY) Given under my hand

DeKalb

_County.

193.7

re answered the Ordinary shall swear applicant true answers make to each of the questions as and". witness in the following words: and the evidence you shall give

If not, prove

AUG 11 1937

Date of Husband's Death Apr. 30 1.929 Mrs. Willie O. DEC 27 DeKalb

Ordinary's Certificate

STATE	OF	GEOR	GIA,
			-

DeKalb COUNTY.

I. V. S. Morgan , Ordinary of said County, do certify that I know Mrs. Willie O. Sanders the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know Mrs. Fanuie S. Wilkinson the witness who swears to the service of husband and/or the marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 10 day of 4 day of 1937. (SEAL OF ORDINARY)

DeKalb(

.....County.

1937

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 saked you and the evidence you shall give will be the whole truth. So help you God." 2. Additional affidavits may be attached if blank spaces are insufficient. 3. Only widows who married prior to January 1st, 1920, are entitled. 4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary. 5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation. 6. Fill out the back of the application carefully. 7. Don't use the bulk form of harriage clifficate in vogue throughout the State. A short, simple form is easier to handle. 8. Do not take an application from any widow who is already seceiving a pension.

OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,	
DeKalbCOUNTY.	
Personally appears before me, Mrs. Willia O. Sandersof said State and County and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after being duly sworn, true answers to make to the questions propounded, answers as follow, to wit:	
SECTION I.	
What is your name, and where do you reside? (Give Post Office and County)	
Mrs. Willie O. Senders - 279 Elmira Pl. Atlanta, DeKalb Co., Ga. 2. How long and since when have you been continuously, a bona fide resident citizen of the State	
of Georgia? All.life	
Give date, or year, of your birth. December 1, 1869 Age? 68	
3. (1)When, (2)where and (3)to whom were you married?	A .:
Married January 27, 1887 in Gordon, Ga. to Newton Sanders	
a. Have you married since the death of first and soldier husband? . ao b. When and where did your first husband die? April 30, 1929 in Twiggs County	
c. Were you residing together when he died? Jes.	
d. If not, how long had you resided apart?	
e. Are you now a widow?	
f. Have you or your husband heretofore been paid a pension by the State? Husband received pension by the State? Husband received pension by the State?	310
g. If so, when and for what cause were you or your husband placed on the roll? Service in Confedent	ra
SECTION II.	
Answer the following questions if your husband was not a pensioner: 1. When, where and in what Company and Regiment did your husband enlist as a soldier in	
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-	, ,
try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.	
2. When and where did the Commands of your husband surrender or discharge from the Service?	
Was your husband personally present with his Command when it was surrendered or discharged?	
3. Was your nusband personally present with his command when it was suffered to 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?	
e. What was his physical condition when he left his Command?	
g. In what way was he prevented from going back to his Command?	
h. Was he captured by the enemy at any time?	
i. If so, when and where? In what prison was he held and when was he released?	
Sworn to and subscribed before me, this the	4

.... 26 day of July, 193 .7 (SEAL OF ORDINARY) County.

no William & Sangdon ... Applicant.

(Read carefully before making this affidavit.)

	State of Georgia,
	County of
	Before me, the Ordinary of said County, comes Mrs. who, after being duly sworn, deposes and says:
	1. That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers;
POSSON PROPERTY.	2. That her deceased husband was not a pensioner of the State of Georgia at the time of hi death, and, therefore, his Confederate military service has not heretofore been proven in connectio with an application for pension;
	 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 sai Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of the Adjutant-General, Washington, D. C.
	Sworn to and subscribed before me, this the
	day of, 193
	day of, 193
	day of, 193 , Ordinary,

STATE OF GEORGIA,	
DeKelb COUNTY.	
Mrs. Faunie S. Wilkinson of said State and County is hereby presented	
as a witness in support of the application of Mrs. W1111e O. Sanders for the pension	
provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920	
and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers	
as follows, to-wit:	
1. What is your name and where do you reside? (Give Post Office and County)	
Mrs. Faunta S. Wilkinson - 279 Elmira Pl., Atlanta, DeKalb Co., G	8
2. How long and since when have you known Mrs. Willie O. Sanders applicant	
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen	
of this State? 279 Elmira Pl. Atlanta, Ga. Been citizen all life	
4. When and to whom was she married? 1887 Sander How do you know? Present at wed	đ
5. How long and since when did you know Newton Sandersher	Schiller
nusband? January 27, 1887	
6. When and where didNewton_Sanders	
he husband of applicant, die? Died April 30, 1929 in Twiggs County	
7. Were the applicant and her husband living together as husband and wife at the date of his death?	
You	
6.16	
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 guestions.	
9. When, where and in what Company and regiment didenlist?	
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.)	
13. Were you personally present with this Command when it was surrendered?	
f not, where were youand how came you there?	
14. Was the husband of applicant personally present with his Command at its surrender?	
f 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?	
nd how long was he granted leave?	
low do you know all that you have stated to be true? (If of your own knowledge, state clearly and speci-	
cally)	
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-	
nand?	
16. What effort did he make to return to his Command and how do you know this?	
17 Was he captured as a prisoner?	
17. Was he captured as a prisoner?If so, when and where?	
n what prison was he held?amd when released?	
Sworn to and subscribed before me, this the Min Farmin S. Milkinson	Selfer
day or (Witness)	
N. D. Macouw, Ordinary	
(SEAL OF ORDINARY)	

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. WILLIE O. SANDERS, WIDOW OF NEWTON SANDERS,

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

ORDERED:

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

This, the , 27th day of December 19 37 .

Director, Confederate Division State Department of Public



THE VETERANS SERVICE OFFICE

ARREARANA

STATE CAPITOL

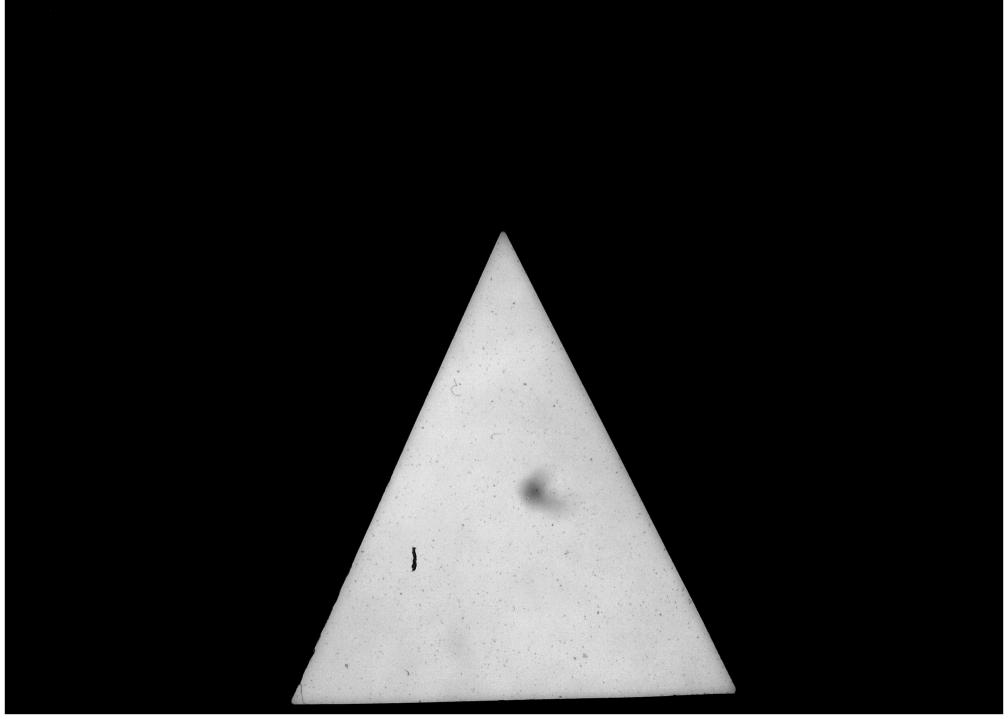
C. ARTHUR CHEATHAM, ASST. DIRECTOR ATLANTA Ga., July 20, 1937.

Unpublished records compiled for the State of Georgia by Lillian Henderson show that

Newton Sanders enlisted in Wilkinson County, Ga., as a private in Co. I, 8th Regiment Georgia Militia May 1864. Siek in Macon, Ga. hospital close of war.

Above is true copy of record on file in this office.

Listerin Director uson



POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I

County, in said State, do hereby appoint

to

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 my true and lawful attorney in fact, for aforesaid.

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

Executed in the presence of us:

If allowed, send amount by

and oblige.

Sappinaton M. E.

1891.

Mo. 788

Vidows' Pension

Mrs. No Esappington

Warrant Issued

\$100.00.

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlan

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

Know all Men by these Presents, That I

0

County, in said State, do hereby appoint.

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

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

Executed in the presence of us:

[L. s.]

DIRECTIONS.

If allowed, send amount by

....to

me at

, and oblige,



AND HANDED TO

1891

Warrant Issued

1891.

Widows' Pension

Widows' Pension

Widows' Pension

Affidavit to be Made by the Widow.

Form	No.	1.	

STATE	OF	GEC	POL	۸
SIAIL	UF	GEU	HGI	Δ

OTATE OF GEORGIA.		
1. 579	In person came before	ore me, the undersigned Ordinary
County of Sella	in and for the County	of the Acc
Mrs. // 3.5 // // // //	, who being sw	orn according to law, says under
oath that she is the widow of	12.7.7.7.	, who was a soldier in
the service of the Confederate States, and se	rved as a member of Con	npany 4 of the
214 " Regiment of V.	C' T Vol	unteers; that he enlisted in said
service on or about the 2"	day of	-1862 , and was in the
Army up to	12:121	186 27 That while in the
Army, he was on the	lay of	186 (See Note No. 1)
- 1 - Comment of the 276	4/10/	and the contract of the contra
In all him tille	10 12 100	Lack Comment
and surprise the second second second		
- the same of the same	11/12/21	
		· · · · · · · · · · · · · · · · · · ·
and the second of the second		

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 the day of the day

Sworn to and subscribed before me, this, the day of 1/12 (1891.)

Ordinary.

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

Affidavit for Three Witnesses.
STATE OF GEORGIA, In person came before me, the undersigned Ordinary
County of the in and for said County, witnesses
and C. C. Carroll (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
Mrs
Company of the 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 1862— That while in said service, or by
reason of said service in the Army, he lost his life as follows:
Lac, a doldier seas contrict to a
died on the 3th day of hime
1062.

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

Sworn to and subscribed before me, this, the

20 day of Phil 1891.

Heriothe Colo le anole

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

STATE OF GEORGIA,

County of De Half in and for said County of De Half

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

day of Anil 1891. M.M. Rogadale.

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 tull 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,	Personally comes Mrs.
	M& Sappington
who being sworn, says on oath, that she is a bona fie	
De Kull) State of Georgia,	and that she has resided in said State
continuously ever since Law 3th	1836 That she is the Widow of
1 Sapprington	who was a Soldier in Company
	riment of Sa
Volunteers, that he enlisted in said Regiment on or	about the month of Max
1862 and served in the Army up to June	
full particulars of the husband's death, when, where	and from subat cause)
Had neasles and	하다 그 전 전 경기 등에 가는 것이 되었다. 이 사람들은 이 사람들이 하는 것이 되었다면 하는 것이 되었다. 그렇게 되었다면 살아보다 되었다.
Hospital at Rich	mond da on
date above stated	
	of the last

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1857; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowand provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

tagsdale, Ordinary.

Certificate of Ordinary of the County of Applicant's Residence

STATE OF GEORGIA. County of Ale Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. C. Sabbington 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 J. Sapp in glow deceased, and as such has heretofore been allowed a peusion for the year ending February 15th, 1854. In Witness Whereof, I have hereunto set my hand and affixed the seal of my office. 2/ day of Lan

milossiale. Ordinary.

POWER OF ATTORNEY.

County. KNOW ALL MEN BY THESE PRESENTS, That I. 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 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this

, and oblige

ror widows nerelolore allowed relisions.

STATE OF GEORGIA, County of Ball M. E. Sapping towns.
County of De Rall M. C. Sapiling
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 Qet 1836 That she is the Widow of who was a Soldier in Company Tof the HHM Regiment of Grazier Volunteers, that he enlisted in said Regiment on or about the month of
1862 and served in the Army up to June 1862 That he lost his
life on the day of 18 (State here
full particulars of the husband's death, when, where and from what cause.)
The had measles and relapsed
Richmond la reture he died m
Deponent swears that she was the wife of said deceased soldier during his service in the army
as a soldier, and that she has never married since his death aforesaid, that she became his wife
in the year 18 4.; that Georgia is her home and she resided in his State 23d day of December,
1890, and has not lived in any other State or locality since that date. I have been allowed a
pension for the year ending February 15th, 1892, and now apply for the allowance provided by
law for the year ending February 15th, 1893.
Sworn to and subscribed before me, this day of Feb 1893. Min Regulacy Ordinary. Post-office 314 Whitehale St

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of De Kalk MESaphington
All the state of the state of the state of the state of
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 die dec die 18 That she is the Widow of
who was a Soldier in Company
I of the HILL Regiment of Long
Volunteers, that he enlisted in said Regiment on or about the month of
186 and served in the Army up to 1862. That he lost his
life on the day of 1862. (State here
full particulars of the husband's death, when, where and from what cause.)
ead muster there it desire int
died of the disease it Pick good to
in the date nime stands
the state of the s
Annual an
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 52, that Georgia is her home and she resided in this State 23d day
of December, 1890, and has not lived in any other State or locality since that date. I have
been allowed a pension for the year ending February 15th, 1894, and now apply for the
allowance provided by law for the year ending February 15th, 1895.
Sworn to and subscribed before me, this
2) day of feel 1895. ME Suffingtone.
Timber office Ordinary.) Post-office 3'4 Thite access
fetination

STATE OF GEORGIA, County of De Kalk I. Il Ill RagadaleOrdinary in and for said County of I. M.M. Rogalace, Ordinary in and for said County o State of Georgia, hereby certify that I am acquainted with Mrs. State of Georgia, hereby certify that I am acquainted with Mrs M. E. Sippington the applicant for a pension in this case, and M. E. Sappington 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 know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of I. Safefring ton resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of J. J. Dathmy ton deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895. 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 In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this (SEAL) MM Rogsdace, Min Ragsdice. POWER OF ATTORNEY. POWER OF ATTORNEY. County. STATE OF GEORGIA, STATE OF GEORGIA. County. hereby authorize hereby authorize 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 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 Executed in the presence of Executed in the presence of \$ 597 No. 1397 DOM'S PENSIO RICHARD JOHNSON MARRANT ISSUED

STATE OF GEORGIA, County of De Kalk

Lai. Minnas merentare umanen tensians.

STATE OF GEORGIA, Dersonally Comes Mrs.
County of De Kall M. Cappington
who being sworn, says on oath, that she is a bona fide resident of said county of De Kalb State of Georgia, and that she has RESIDED in said State continuously ever since all her life 18 That she is the Widow of who was a Soldier in Company
Volunteers, that he enlisted in said regiment on or about the month of. May
186 2 and served in the Army up to 186 That he lost his
life on the 30 day of fine 1862 (State here
full particulars of the husband's death, when, where and from what cause.) (
Had measles while in service and
- died of the disease in Richmone, Va
The same of the sa
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 1853
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
County for the year ending Feb, ary 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 31 M day of Jan 1896. ME Gaffington.

for widows heretotore allowed Pensions.

STATE OF GEORGIA,	Dersonally Comes Mrs
County of De Kall	M. E. Sappington
De Nalh who being sworn, sa	ys on oath, that she is a bona fide resident of said county of
and the state of the contraction of the contraction of the state of the contraction of th	State of Georgia, and that she has RESIDED in said State
	20th 1836. That she is the Widow o
Il Supprington	who was a Soldier in Company
1 of the 44 th	Regiment of La
Volunteers, that enlisted in said regiment on o	r about the month of May
186and served in the Army up to	Anne 1862 That he lost his
	ay of fine 1862 (State here
full particulars of the husband's death, when, wh	
	like in service and
	ond Va on the date
above given,	
The second second	and the second second
· · · · · · · · · · · · · · · · · · ·	
	eceased 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 1853,
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 the	at date. I have been allowed a pension as a resident of
De Kell County for	the year ending February 15th, 1896, and now apply for
the pension provided by law for the year ending	February 15th, 1897.

Sworn to and subscribed before me, this	ME Tapparglan.
18th day of San 1897.	Post-office Post-office
Property Ordinary.	1 ost-onice

POWER OF ATTOR	(NE	Y.
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	unty.			
I,		hereby authorof		*
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o receive and receipt for t	ne pension j		u request tha	
IN WITNESS WHE	REOF. I he			
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Executed in prese	nce of			
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	· 13	ounty fr.	ensions.	1889.
Nois	1, 1899.	County	ON, r of Pensions.	.1889.
Noish,	15th, 1899.	County	NSON, seioner of Perseions.	1899.
ISOB. No. 2224 No. 2224 NWS PENSION,	ending Rebrusry 15th, 1899.	Mongler.	CHÁRD JOHNSON, Commissioner of Pensions. ARRANT ISSUED	/30 1899. MAULTO

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Se Kall ME Seppington
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 sippe. Cel 1836 That she is the Widow of
Left pring tox who was a Soldier in Company Left the 44 th Regiment of
of the day
Volunteers, that he enlisted in said regiment on or about the month of
186 2 and served in the Army up to
life on the 30 day of Level 1862 (State here
full particulars of the husband's death, when, where and from what cause.)
had hundles and diedof the disease
al Richmond Va.
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 53.
she has never married since his death moresand, and that she became in
I have been allowed a pension as a resident of De Mach. County for the year ending
February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.
Sworn to and subscribed before me, this
day of1000.
Post-Office.
State of Georgia, \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Sie flath County. S Ordinary of said County, certify that I am well acquainted
with Mrs. 121. E. Seff 6 23 glos who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents he self to be, and that she
has continuously resided in this State since theday of
(iiven under my official signature and seal this the 2/2/ day of (at) 1898.
Mil Rayslace,
(Sofficial) Ordinary of General County.

For Widows Heretofore Allowed Pensions.

STATE County of	OF GEORGI	A, //	Personally Come	es Mrs.
De 1	who, being a		she is a bona fide resident orgia, and that she has RESI	
continuously ever	since de	n	1836 That she i	s the Widow of ldier in Company
Volunteers, that I	of the ##		of Mar	
1862 and serv	ed in the Army up to	day of Jones		That he lost his
full particulars of	of the husband's death, who	en, where and from when	el wRie	hmond,
				*
she has never ma I have bee February 15th, 1	that she was the wife of said rried since his death aforesaid en allowed a pension as a res	and that she became lesident of pension provided by law	County for the year ending Febru	for the year ending hary 15th, 1899.
4	0.0	1800.	· Saffing	toni.
State of	Georgia,	unty. Ordinary o	MM Regs.	
with Mrs.	M. E. Suffer to therein stated are true, an	ngton d I know she is the indi	who made the above aff	
	resided in this State since t	a	ay of day of Jan	
(Official) Seal.		Ordinary of	Delak	County.

POWER OF ATTORNEY.

	, I,			ounty. S	of	authorize		n entre	haran namu unnah
					_at				emit same
lay of.	1100	ness v	WHERE	OF, I ha	ve hereunt	to set my	hand an	i seal, t	his[L,
	Execu	ted in p	resence o	Î.					
							**.		
	. 1								
									. •. 3.
0 :			ج <u>ا</u> دا		rt.	7	į	900,	
Paid.			SION	th, 1900.	County	Y.	er of Pensi	9	
fore	00	5.50	OW'S PEN	For year ending February 15th, 1900.		XI Supposed	Commissioner of	MARRANT ISSUED They 14	DED TO
13		0/	Š	ling Febru	1º B	W. L		RANT	AND HANDED TO
hose Heretofore		NO.							3 \

& appinaton, M. E. Mis.

POWER OF ATTORNEY.

	at	equest that he remit
in witness whereof, day of 1901.		ny hand and seal, this
day of the state o	ME Saf	limpton.
Executed in presence of		
Miligalece Ordinory.		
Ordina sy.		
	14 y 4	901,
1901.	Course	and B
	1 - 0 1	9 0 0
To Those Heretofore Paid 1901. No. 3>0 [IDOW'S PENSIO] For year ending February 15th, 1901	Spring Sex LINDSEX	WARRANT ISSUED WARRANT ISSUED AND HANDED TO
ION,	County.	D 1901,

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Le Mally Shire Application
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 (4.6). That she is the Widow of
who was a soldier in Company
I of the 114th Regiment of A1
Volunteers, that he enlisted in said regiment on or about the month of
186 2 and served in the Army up to 122.2 186.2 That he lost his
life on the 3.2 day of 41160 1862 (State here
particulars of the husband's death, when, where and from what cause)
had mades and lied of the
- dicarent Weekingond lad
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_2
I have been allowed a pension as a resident of Ac /all County for the year ending
February 15th, 189, and now apply for the pension provided by law for the year ending February 15th, 1900.
Sworn to and subscribed before me, this day of the saffing to see
day of W 1900. Post Office
1.1, Let 2 (CC Ordinary.)
State of Georgia.
1.7.
County. Ordinary of said County, certify that I am well acquainted
with Mrs. // Color of the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the day of CC/ 1836.
Given under my official signature and seal, this the day of 1900.
(Official) Th/MCx gollier
Seal. 1

for Widows Heretofore Allowed Pensions.

	De Rall	1 A, }	Chic &	nally Comes	Mrs.
County of 2	me / Carr	<u> </u>	M. Eo Sa,	spring.	ion.
	who, being swe	orn, says on oath,	that she is a bons	fide resident of sa	id County of
se Ka	ll		f Georgia, and tha		
continuously ever since		36."		That she is t	
1. Jap	bingto	'n		ho was a soldier	in Company
	e 44 Th		Regiment of		
Volunteers, that he en	nlisted in said regimen	t on or about the	month of D	ray	
186 2 and served i	n the Army up to	June		186 .2 Tha	he lost his
life on the	20"	day of	me	18.6 2	(State here
particulars of the hu					
dads	neares	me.	e m	comm	ma v.
		6-mpanjananananinanana			
				•	
	•			· · · · · · · · · · · · · · · · · · ·	
*					* · ·
Deponent swears that	she was the wife of sai	d deceased soldier,	during his service	in the army as a sol	dier, and that
she has never married	since his death aforess	aid, and that she b	ecame his wife in the	ne year 18 5 3,	
	lowed a pension as a				
February 15th, 1			ded by law for the y	ear ending Februar	y 15th, 1901.
Sworn to and	subscribed before n	ne, this	11 8 Yal	inciten	
man day of	Teo.	1901. }		enegas e	-
	grace of	dinary. J Post	Office		4
State of Go	eorgia	,	1 MM	Roger	dace
Detai	Co.	unty. Ordin	ary of said County,		
with Mrs. M. E.			who made the	above affidavit and	t am satisfied
that the facts therein s					
has continuously reside					
	y official signature an	d seal, this the	12 day o	San	1901.
منتهن		11	Mago	edale	*
Seal.			of De It		County.

POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA, STATE OF GEORGIA, Destelle Ae hall COUNTY. A. D. Seppington of Winfton los E. Supprington hereby authorize , hereby authorize 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 Wifness Whereof, I have hereunto set my hand and seal, this 17 In Witness Whereof, I have hereunto set my hand and seal, this 15 day of Jan day of Jan ME Saffington [1.8.] Me Edeffington. [L. S.] Executed in presence of Executed in presence of 176 Landler in laystage VIDOW'S PENSION WIDOW'S PENSIO WARRANT ISSUED JOHN W. LINDSEY, JOHN W. LINDSEY, No. 240.

MARIE POPE OUR

ldows Heretolore 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 De rall State of Georgia, and that she has RESIDED in said State contiguously over since . That she is the Widow of 1. Sapping ton who was a soldier in Company Volunteers, that he enlisted in said regiment on or about the month of 186 2, and served in the Army up to kince life on the 30th 1862 . (State here particulars of the husband's death, when where and from what cause). And micasles while in service and died in Richmond, Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a the year 18 5 3 I have been paid a pension as a resident of Le Kalk

soldier, and that she has never married since his death aforesaid, and that she became his wife in

year ending December 31, 1901, and now apply for the pension provided by law for the year ending December 31, 1902.

Magsilae , Ordinary.) Post-Office

ME Saffington.

State of Georgia

1. M.M. Ragsdace

County. Ordinary of said County, certify that I am well 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

Official i Seal.

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

NOTE. - All blank spaces must be filled.

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

STATE OF GEORGIA, PERSONALLY COMES MAS.
County of De Kall M. & Suppring ton
Me Nath 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 Q21 36 . That she is the Widow of
I I Sappington who was a soldier in Company
I of the 44th Regiment of Ear
Volunteers, that he enlisted in said regiment on or about the month of May
1862, and served in the Army up to served 1862. That he lost his
life on the 30th day of knee 18.62 (State here
montionland of the humband's doubt when where and from what course & had mildstes
and died at Richmond, Ma.
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1853.
I have been paid a pension as a resident of A.c. Kalk County for the
year ending December 31, 1902, and now apply for the pension provided by law for the year ending
December 31, 1903.
Sworn to and subscribed before me, the Coaffingles.
Milliegredace Ordinary. Post-Office
State of Georgia, I. M. Registace
De Hall County. Ordinary of said County, certify that I am well
acquainted with Mrs. M. & Sapping ton , 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
001-
Given under my official signature and seal, this the day of Am 1903.
Jofficial? MM (agsdace)
Seal. (Ordinary of Le Call County.

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

STATE OF GEORGIA, STATE OF GEORGIA, COUNTY. COUNTY. , hereby authorize to receive and receipt for the pension paid hereon, and request that he remit same to 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 WITNESS WHEREOF, I have hereunto set my hand and seal, this. day of January day of___ 16.6. Safingtone Executed in presence of WIDOW'S PENSION TO THOSE HERETOFORE PAID. WIDOW'S PENSIO To Those Heretofore Paid JOHN W. LINDSEY, 1904. JOHN W. LINDSEY, WARRANT ISSUED 1905. No. 232

[L. s.]

POWER OF ATTURNEY.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.	PERSONALLY COMES MRS.
who, being sworn says on oath, the	at she is a bona fide resident of said County of
1000	Georgia, and that she has RESIDED in said State
continuously ever since.	That she is the Widow of
1. Sapping lon	who was a soldier in Company "Regiment of Ga
Volunteers, that he enlisted in said regiment on or	Oil.
1862 , and served in the Army up to	CHICAGO CONTRACTOR OF THE CONT
life on the 30 day of July	
particulars of the husband's death, when, where and pre-	
Had muasels Died h	Pichmond -
Deponent swears that she was the wife of said dece	
soldier, and that she has never married since his the year 18 53	death aforesaid, and that she became his wife in
I have been paid a pension as a resident of	DE Kall Commenter
year ending December 31, 1903, and now apply for	County for the
December 31, 1904.	the pension provided by law for the year ending
	1166
this 16 day of Jarry 1904.	ME Saffington.
Janua R. Gusglordinary.	Post Office & fourteers Mi hite for
A Control of the Cont	
State of Georgia,	1 Janus, R. George
Le Pall Courty	Ordinary of said County; certify that I am well
acquainted with Mrs. 16.6. Safe	bing to is 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 (O) 18 3 (
Given under my official signature and seal, th	s the 16 day of Jaury 1904.
(ometa)	UM. R George
Heal	ordinary of De Mall County
NOTE -All blank angres must be filled	· County,

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA. County of Serial } M.E. Sapington
County of the co
who, being sworn says on oath, that she is a bona fide resident of said County of
Listable State of Georgia, and that she has residen in said State
continuously ever since That she is the Widow of
Jus J. Sappington who was a soldier in Company
gof the gof the gof Regiment of G
Volunteers, that he enlisted in said regiment on or about the month of
186 2_, and served in the Army up to186 That he lost his
life on theday of18 . (State-Tage
particulars of the husband's death, when, where and from what cause.)
wied in Richmona Hospites mants
Juni 30 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the Armykas a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 18
I have been paid a pension as a resident of AMITACLE County for the
year ending December 31, 1904, and now apply for the pension provided by law for the year ending
December 31, 1905,
Sworn to and subgeribed before me, this 12 day of January 1905 Mrs. 16 & Saffine ton,
this 12 day of Larry 1905. Will 10 & Faminigion,
Lamus Region Cordinary. Post-Office
State of Georgia,) Aamus Phinge
District County. Ordinary of said County, certify that I am well
acquainted with Mrs M. E. Sappingline, Who made the above affidavit and
am satisfied that the facts therein stated are true, and I know sho is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of
Given under my official signature and seal, this the /2 day of / curry 1905.
Jonicial James & George
Official Senl.
Ordinary of Killall County

POWER OF ATTORNEY.	POWER OF ATTORNEY.
I, Mus M. E. Saphington, hereby authorize to receive and receipt for the pension paid hereon, and request that he remit same to M. E. Saphington at In Waness Whereof, I have hereunto set my hand and seal, this	STATE OF GEORGIA, DeKALB. County I, JAN Saphington tolreceive and receipt for the pension paid hereon, and request that he remit same MAN Man Saphinglia at 127
Executed in presence of Ordinary Drainan	In Witness Whereof, I have boreunto set my hand and seal, this day of family 1907. Executed in presance of family Charge. The Sufficient on Executed in presance of family Charge.
To Those Heretofore Paid. To Those Heretofore Paid. No. 122 No. 122 No. 122 No. 122 No. 122 Thu. M. Sale De. 31, 1906. Thu. M. Sale De. 31, 1906. On Parisher To County, Widow of Tanker of Pensions. WARRANT ISSUED LAND HANDED TO The MANDED TO The M	WIDOW'S PENSION For Year enting Dec. 31, 1907. PAID TO Those Heretolore Paid. WIDOW'S PENSION For Year enting Dec. 31, 1907. PAID TO PAID TO PAID TO OF DEKALB. County, Widow of Aus. LINDSEY, Con Regiment of Milk La. JOHN W. LINDSEY, Con Regiment of Milk La. JOHN W. LINDSEY, Land M. MARRAY I. SSUED WARRAY I. SSUED AND HANDED TO FOR STATEMENT MILKS. AND HANDED TO AND HANDED T

POWER OF ATTORNEY.

For Widows Heretofore Allowed Pensions.

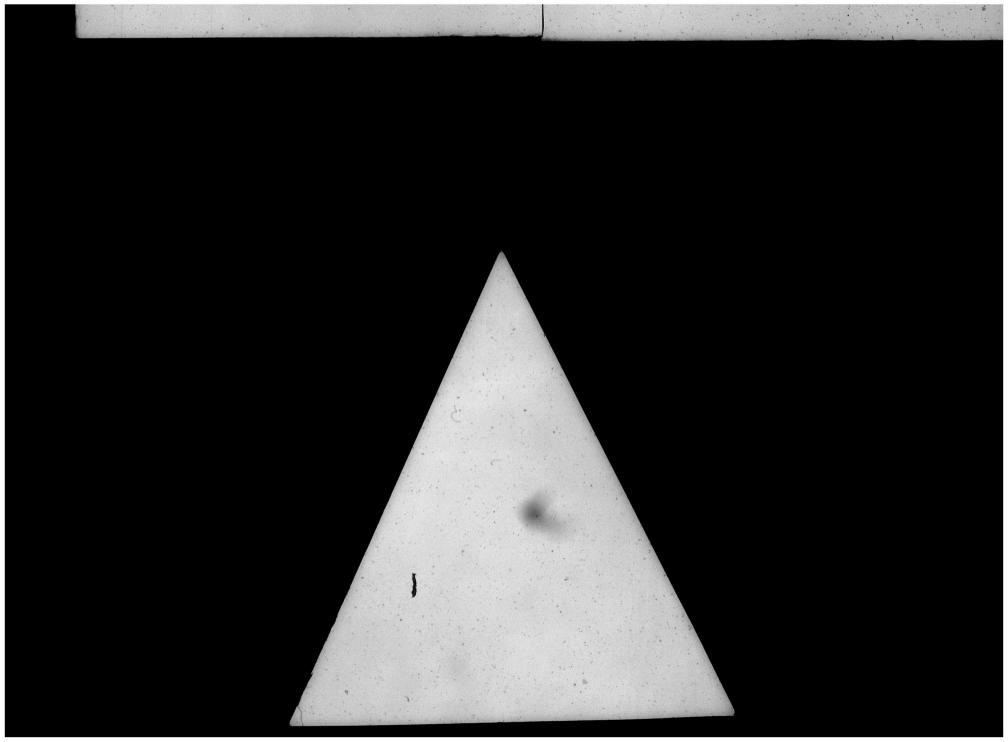
STATE OF GEORGIA,	PERSONALLY COMES MRS.
	11. O. Saphington
	that she is a bona fide resident of said County of Georgia, and that she has resided in said State
	That she is the Widow of
for Toppingle	
	Regiment of
Volunteers, that he enlisted in said regiment on or	
186 2, and served in the Army up to Jun of	2 That he lost his
particulars of the husband's death, when, where and	Leene 18.2 (State here
Died in Richard	
of measles	
Deponent swears that she was the wife of said dece	ased soldier, during his service in the Army as a
soldier, and that she has never married since his de	
the year 18	Denis
I have been paid a pension as a resident o	and the
year ending December 31, 1905, and now apply for	the pension provided by law for the year ending
December 31, 1906.	
Sworn to and subscribed before me this 17 day of 12 will 1906.	Mb & Suffregion .
mus Rycarge, Ordinary.	
() () () () ()	Post Office allanta Ga
State of Georgia,	1. kames & George
County.	Ordinary of said County, certify that I am well
acquainted with Mrs. // (OR applies	u flow, who made the above affidavit, and
am satisfied that the facts therein stated are true, as	
herself to be, and that she has continuously resided day of18	in this State since the
Given under my official signature and sell, this	the 17 day of Janey 1906.
(Official)	MRC 1806.
Seal	pary of De Halk County.
NOTE.—All blank spaces must be filled.	

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of DeKALB.		PERSONALLY COMES MRS.
The control of the co		E. Sappington
		oona fide resident of said County
DeKALB.	State of Georgia, and t	hat she has RESIDED in said Sta
continuously ever since		That she is the Widow
Ino. J. Doppe	ylon.	_who was a soldier in Compar
Ino. J. Sophi of the 44th 15	Regimen	nt of T
Volounteers, that he enlisted in said regi	nent on or about the mon	th of May
186.2 , and served in the Army up to		186 That he lost h
life on the	_day of	18 (State he
particulars as the hadrand's death, when, i Died in Richmor Measles	d hospital	June 30th 1862
measles		
		`````````\``\\
		4
I have been paid a pension as a r	esident of	County, for the
year ending December 31, 1906, and no	apply for the pension pr	rovided by law for the year endir
December 81, 1907.		
Sworn to and subscribed before	me] / /	6
this 12 day of Jarry	1907. ME	Suffington.
min Rem		11 0
orall orall	Bry. Post Omce	and the same of
State of Georgia,	1,	James R. George
D 1/ 1 1	ntv. Ordinary of	said County, certify that I am we
equainted with Mrs. M. E. Safe		
am satisfied that the facts therein stated		
nerself to be, and that she has continuou	m	since the
lay of 183		. 0 .
Given under my official signature	and soal this the	day of 190
(Official)	James 1	George
Seal	11	DOKALR

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date after January lst, 1907.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

Witness my hand and seal this

sawyer, J. M.		= .		
NDIGENT PENSION				
ounty DeKalb				
pproved 7/10 ~ 1897.	•			
WARRANT HANDED TO		1		

STATE OF GEORGIA. Sekath STATE OF GEORGIA. Malinger of said State and County, desiring County. to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows: hereby authorize Sawyer Schalle Toundy P.O. Inchein Where did you reside on January 1st, 1894, and how long have you been a resident of this State? to receive and receipt for the pension allowed and request that he remit same toat detarkstone in State Seventy three years 3. When and where were you born? 1823 in Pulnam County When and where and in what company and regiment did you enlist or serve n' 1863 day of. 1897. Witness my hand and seal this ... Executed in presence of 5. How long did you remain in such company and regiment? Tiero yeur and at the surrender on git Afor 6. For how long a period did you discharge regular military duty? Two year When, where and under what circumstances where you discharged from service? Perlole at his surrender 8. What is your present occupation? None at present 9. How much can you earn (gross) per annum by your own exertions or labor? No Mining 10. What has been your occupation since 1865? Mery Wille or form 11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? age to 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? Beero live years 13. What property, effects or income do you possess and its gross value? horse 14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of samp? all old much bour & call Stort Pris House Hould will 15. In what County did you reside during those years and what property did you then return for taxation? Dekala to amounting to about one Hundred to 16. How were you supported during the years 1895 and 1896? Sufferled Cy Sore 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? Sine my Effects for Support, about 30 18. What was your employment during 1895 and 1896? What pay did you receive in each year? no employment - being disabled to work 19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? have no Jamily Living with my un and Widow Dailghlin Have no Homestead -M. Sawye 20. Are you receiving any pension, if so what amount and for what disability? no Pension Sworn to and subscribed before me this the Applicant. Ordinary.

Machtale County. Sometimes , of said State and County, having been presented	STATE OF GEOR
as a witness in support of the application of The Lawyer for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the	Personally car
1. What is your name and where do you reside? M. It I true due Mr Male	of said county, who being
2. Are you acquainted with The Sources, the applicant, is of how long have you known him? about 33 years  3. Where does he reside, and how long has he been a resident of this State? He resides  4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? He does, Iras Irath him in War  863  5. When, where and in what company and regiment did he enlist? He willist in Spring 1863 at Buffolt Virguis Company By 7th ba May.  6. Were you a member of the same company and regiment? The word	such personal examination  Enlargement  which same  flow of M  an right of  the surake a  We further say on  work or calling sufficient allowed.
The 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? Some do that the years we virguman army good beldier, hund love or discharge at the Love of war.	Sworn to and subscripting the 29 day of
8. What property, effects or income has the applicant? (Give your means of knowledge.)  1000 1000 1000 1000 1000 1000 1000 10	STATE OF GEO
10. What is the applicant's occupation and physicial condition? Her over him is a former, Knows him to be an old more but court say so to his physical condition.  11. Is the applicant unable to support himself by labor of any son, if so, why?  The case not make more than half a support on account of him age	fide resident of this State  are of trustworthy charac  I further certify the the oath hereon prescribe before same was signed.
12. How was he supported during the years 1895 and 1896?  13. What portion of his support for these two years was derived from his own labor or income?  14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894?	I further certify that returned for taxation in l of property, and in 1896, In my opinion the f
15. What interest have you in the recovery of a pension by this applicant? There  Sworn to and subscribed before me, this  the 23 day of 72 day 1897.	Witness my hand an  Before any questions are a  true answers make to each of t
W.M.Rogelde Ax to witness	Additional affidavits may

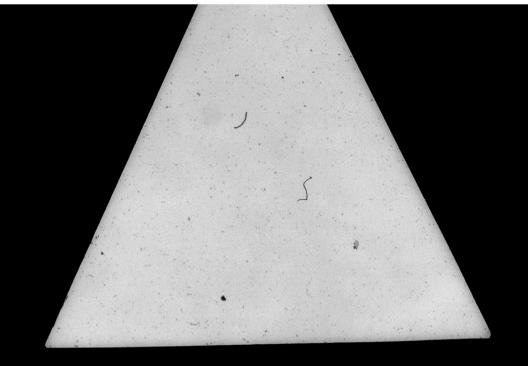
ST	SATE OF GEORGIA,  County.
	Personally came before me for the A green Me and A Ranney on D , both known to me as reputable physicians
of	said county, who being severally sworn, say on oath that they have examined carefully.
	F.M. Sawyer , applicant for pension under the Act of 1894, and after
_ {	ch personal examination say that his precise physical condition is as follows: Intergement of heart, irregular aution of same
1	which same dificult breathing, when has excession
1	low of Maine (Diabetes) and almost blindren in right eye said diseasen renders. him implit
	We further say on oath that the physical condition of applicant renders him unable to labor at any
wo	rk or calling sufficient to earn a support for himself, and that we have no interest in said pension being
all	owed. Joseph Higrur
the	Sworn to and subscribed before me, this 2 2 days of Hely 1897.
/	Maydale, Ordinary.

# ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Defall County.
I, Mall. Capelice, Ordinary in and for said County, hereby certify tha
ne applicant H. M. Sawy er resides in said County, and was a bon
de resident of this State on the first day of Jassury, 1894, and that the witnesses, viz:
re 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 tool
he oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses
efore same was signed.  I further certify that the tax digests of SellaC County show that applicant
eturned for taxation in his name in 1895, Sue la della della
f property, and in 1896, dollars of property.
In my opinion the foregoing clain is made in good faith.
Witness my hand and seal of office, this 23 d day of Re 6 1897.
Multagrace Ordinary of De Kell County.
NOTE.

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

W.M.Rogelaccin As to Witness



# CORRECTION

# CORRECTION

NDI	GEN	<del>:</del>	J. /2. DRN	VSIO	– N
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	18	39	7.		
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4	M.S		5.000	•	•(
unty	De	Ha	16		
proved		/11	0 -		397.
			+		<u>-</u>

Executed in presence of	Witness my hand and seal this.	seive and receipt for the pension allowed and request that he remit same to			ATE OF GEORGIA,
esence of	nd and sea	for the per			ORGI
	d this	asion allov			
		ved and re		County.	
	_day of_	quest that	of	•	~
		by_			
		same to			
				<u></u>	
	1897.			hereby authorize	
				thori	

POWER OF ATTORNEY.

	STATE OF GEORGIA,County.		STATE OF GEORGIA,  Selato County. Se  Hill, Saturyer of said State and County, desiring
	4	hereby authorize-	to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
			1. What is your name and where do you reside? (give State, County and post office) H. ///
			2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
	to receive and receipt for the pension allowed and request that he remit same to		3. When and where were you born? 1823 in Pulnate County
	Witness my hand and seal thisday of	1897.	4. When and where and in what company and regiment did you enlist or serve are 1863
	Executed in presence of		5. How long did you remain in such company and regiment? The year and
			6. For how long a period did you discharge regular military duty? Two year
		, i	7. When, where and under what circumstances where you discharged from service?
			8. What is your present occupation? None at present
		<b>8</b>	9. How much can you earn (gross) per annum by your own exertions or labor? . Milling
		- · · · · · · · · · · · · · · · · · · ·	10. What has been your occupation since 1865? Ally difficulty from 11. Upon which of the following grounds do you base your application for pension, viz.: first "age and
		in the second se	poverty," second "infirmity and poverty" or third "blindness and poverty"? Wise I feet 1911.  12. If upon the first ground, state how long you have been in such condition that you could not earn
		1	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?  Beero Aire 4 card
		in the second of the second	
			13. What property, effects or income do you possess and its gross value? none
		, chi	14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? Out old must bour & call.
. /			Kitchen Four hiliers Hould and  15. In what County did you reside during those years and what property did you then return for taxation?
		<b>V</b>	Dekala to amounting to about one Hundredon
			16. How were you supported during the years 1895 and 1896? Suppleasted Cy Son
			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? Give Iny officers for Support. about \$57
	NO   NO   NO   NO   NO   NO   NO   NO		18. What was your employment during 1895 and 1896? What pay did you receive in each year?
M.		in the second	19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? have no Family Living with my Syn mul Widow Daulghlin, Huve no
ti.		a Billion	Homestead
( ]	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	TO ST	20. Are you receiving any pension, if so what amount and for what disability?
31	1897 1897 1897 1974	WARRANT HANDED  A COAN  CHAN ONLY  A MERON, WAT PUTTER  3 2 //	Sworn to and subscribed before me this the 17 day of Get 1897. Applicant.
3		1 30 m	Mulage Rece Ordinary.
3		3	of Dellath County,
A	N. N		
	the state of the s	· · · · · · · · · · · · · · · · · · ·	

de righ es

	Rack sale County.
	Mr. Brismed in , of said State and County, having been presented
•	as a witness in support of the application of The Lawren for pension
	under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the
	following questions, denoses and answers as follows:
	1. What is your name and where do you reside? With Brusendine Brukdase
	County Fix Co
	2. Are you acquainted with 4. In Some on the applicant, is of how long have you known him? about 33 years
	3. Where does he reside, and how long has he been a resident of this State? Ye reden
	Do You know of his having served in the Confederate army or the Georgia militia? How do you
	know this? The diver, Ivas with him in wier
	-863
0	5. When, where and in what company and regiment did be enlist? He substitute Spring 1863 at Buffolk Virgunia Country B. 7th ba My.
•	6. Were you a member of the same company and regiment? 21'9 was
	7. How long did he perform regular military duty, and what do you know of his service as a Confed-
	erate soldier, and the time and circumstances of his discharge from the service? Sound while
,	thre years in Virginia army gird Soldier, timed
	love or duchanged at love of war
} ·	8. What property, effects or income has the applicant? (Give your means of knowledge.)
	the Mitnes A Britt being
, .	- collin distocra: 412 110 knoberty
ζ.	9. What property, effects or income did the applicant possess in 1805 and 1896, and what disposition, if
` '	any did he make of same? And some stock
'	and house hold purniture but sold in
1	at the applicant's occupation and physicial condition? The over him as
	but court say so to his physical Condition.
	11. Is the applicant unable to support himself by labor of any sors, if so, why?
	de can not make more than hack a support
	maccound of live age
	12. How was he supported during the years 1895 and 1896?
	12 11 min le boy and help of chiefe
	13. What portion of his support for these two years was derived from his own labor or income?
	14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension
	under the Act of December 15th, 1894?
	the on recount of an he is make to
	make his our support
	15. What interest have you in the recovery of a pension by this applicant? Trave
	Sworn to and subscribed before me, this
	the 2-3 day of 7-4 1897.
	the -3 day of 1907 1897.) Witness.  Ordinary. O.S. Brier
-	on Rosslace . And to witness
-/1	Ordinary. N.S. Britt 3

STATE OF GEORGIA,
De Kalb County
Personally came before me for ph H green Son ) and
Cy Kanney Oh D, both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully
F.M. Surveyer , applicant for pension under the Act of 1894, and after
such personal examination say that his precise physical condition is as follows:
Enlargement of heart, irregular action of came
which same dificult breathing, were har excession
which same difecult breathing, were has excessing flow of traine (Diabeter) and about blindren
in right eye said diseasen remiters him implit .
We further say on oath that the physical condition of applicant, renders him unable to labor at any
work or calling sufficient to earn a support for himself, and that we have no interest in said pension being
allowed. Joseph Higreen
Sworn to and subscribed before me, this the 2 3 d day of Ech 1897.)
Man Raysolde, Ordinary.
200 41 Congret Ordinary.
The state of the s
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
Dellally County.
I, Mill. Raguelec, Ordinary in and for said County, hereby certify that
fide resident of this State on the first day of January, 1894, and that the witnesses, viz:
are of crustworthy character and that their statements are entitled to full faith and credit.
I further certify that before answering the foregoing questions, the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses
before same was signed.
I further certify that the tax digests of De County show that applicant
returned for taxation in his name in 1895, 5700 line for dollars
of property, and in 1896, a dollars of property.
In my opinion the foregoing clain is made in good faith.

of De Kell

NOTE.

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 shalltrue answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." Additional affidavits may be attisched if blank space are insufficient."

# 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 day of [L. S.] Executed in presence of SOLDIER'S PENSION Name F.M. Sawyer County De Kill 1. (For Those Aiready Enrolled. RICHARD JOHNSON, WARRANT ISSUED INDIGENT 1898. NO. 1945

#### POWER OF ATTORNEY

	TIT TORINE	
FATE OF GEORGIA,		3.6
County		
, I,	<u> </u>	, hereby authori
	ofof	
and the second of the second		
receive and receipt for the pension	allowed, and reque	st that he remit same
Witness my hand and seal this	day of	1899.
Executed in presence of	)	The property of
	>	(i
	)	111111111
The second secon		
		C

Sawyer, 7, 11, No. 1210

AM. Sawar

SOLDIER'S PENSION

1899.

INDIGENT

RICHARD JOHNSON,
Commissioner of P

WARRANT ISSUED

WARRANT HANDED TO

# For Applicants Heretofore Allowed Pensions.

	STATE OF GEORGIA,
	De Kuth County.
	Mul 8 . 11 11
	Personally appears T. M. Surveyer of Ne Kath
	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 And day of All May 1823; that he is 144 years old and
	by occupation a farmer; that he enlisted in the military service of the Confed-
	erate States (or of the State of ) during the war between the States,
	and served for the term of 2 Lears in Company B, of 7 th Regiment of
	La Val ; that his physical condition is as
	follows: ou account diatetis and
いまたの	sear disease and mable to man
	a living
	that his property consists of the following items None
	the following teems 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2
	The state of the s
	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 1898. I have heretofore as a resident of Sulkach
	county been allowed a pension for the year 189 7
	6 Communication 1 11 C
	12 day of Live 1898.
	day (1)
	MN Magsdale, Ordinary.
	State of Georgia,
	De Nact County.
	I, M.M. Kagsdale Ordinary of said County,
	do certify that I am well acquainted with della sawyer the
	applicant in the foregoing affidavit, and am well satisfied that the statements made by him
	in his said affidavit are true, and I know he is the individual he represents himself to be
	and that he resides in this County.
	Given under my official signature and seal, this /3
	day of 1898.
	Anx your MM Ragsdace
	nere.
	Ordinary Wellall County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
De Kalh County.
Personally appears M. M. Sawyer of He 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 9" day of 1823; that he is 2 years old and
by occupation alarmen; that he enlisted in the military service of the Confed-
erate States (or of the State of  ) during the war between the States,
and served for the term of Harries in Company B, of 7 th Regiment of
; that his physical condition is as
follows: Inffering from Dialetis and
Heart trouble
that his property consists of the following items Anne
- Charles and the control of the con
of the value of OO Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1899. I have heretofore as a resident of Rehalf
county been allowed a pension for the year 189 8
Sworn to and subscribed before me, this, the
is I fill large
1000.)
Milagrada Cordinary.
State of Georgia,
Destally County.
Mini W
I, WM Ragsdale, Ordinary of said County,
do certify that I am well acquainted with fill Surveyer the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this 13
//
day of Jan 1899.

NOTE.—The blank spaces must be filled.

NOTE.—A flidavit should not be attested before January 1st, 1899

# 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 [L. S.] Executed in presence of SOLDIER'S PENSION CODE SEC. 1264. (For These Aiready Enrolled.) JOHN. W. LINDSEY, Commissioner of Per WARRANT ISSUED INDIGENT amount ? 1900. LABRANT HANDED TO NO. 472

County

#### POWER OF ATTORNEY

e nongonia sa Pelingana ang		County. J				eff.	
I,			hereby at	thorize	34.		
		the market	allowed and	request	that he	· wantit .	
to receive and	receipt for	the pension	at .	request	1 1	e Temit :	same

Executed in presence of

SOLDIER'S PENSION (For Those Already Enrolled.) INDIGENT 1901. No 673

WARRANT ISSUED

JOHN W. LINDSEY,

WARRANT HANDED TO

# For Applicants Heretolore Allowed Pensions.

STATE OF GEORGIA,
County.
personally appears All Secure of Delack
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 9/82 ( 1823; that he is 77 years old and
by occupation a Charles ; that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of I Lea to in Company B, of 7 th Regiment of
that his physical condition is as
follows: described grandiabel to and
Seca St & traceha.
that his property consists of the following items ( )
that his property consists of the following residence
5 / Di 11 1 C1: 1 : 1
of the value of
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one kerein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1900. I have heretofore as a resident of
county been allowed a pension for the year 189
Sworn to and subscribed before me, this, the day of 1900.
day of 121 1900.
1.11Condac Ordinary.
State of Georgia,
He la Ch County.
I, / Ordinary of said County,
do certify that I am well acquainted with Elliphicaryes the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this / 5
day of 1900.
{ four { seel { here. } }
Ordinary Acc Call County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1930.

# For Applicants Heretolore Allowed Pensions.

COLUMN OF CROPCIA
STATE OF GEORGIA,
He Kalk (County)
Personally appears & Mr Sawyer of De Halk
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 9 day of 9/11 1823; that he is 77 years old and
by occupation a lassner that he enlisted in the military service of the Con-
federate States (or of the State of Ha ) during the war between the
States, and served for the term of 2 Lears in Company B, of 7 th Regiment
of La lac); that his physical condition is as
follows: Sue fice sing with Diabetis and
heast diviase
that his property consists of the following items Nove
of the value of CO Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1901. I have heretofore as a resident of had Mills
county been allowed a pension for the year 1900
Sworn to and subscribed before me, this the
11th day of 1227 1901.
Millagsdale Ordinary.
STATE OF GEORGIA,
D 7/ ·/
I, MIN Ragadill At Dr. Ordinary of said County;
do certify that I am well acquinted with Milliaccoge 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 Mil 1901.
( AMIX your ) Millagadice
Ordinary Le Moth County.

Note - The thack spaces must be illied. Note. Allidavit should not be attested before January 1st, 1901

. I,	hereby authorize	
	of	
receive and receipt for the pensi		
Witness my hand and seal, this	day of	1902
	7	[1, ;
Executed in presence of		

LEOR THOSE ALREADY ENROLLED.) INDIGENT

SOLDIER'S PENSION 1902.

Name Sawy Cr. F. M. County De Malk WARRANT ISSUED

JOHN W. LINDSEY,

WARRANT HANDED TO

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
De Kall County.
Personally appears J. M. Sawyer of De Rolh
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
by occupation a Carrier that he enlisted in the military service of the Con-
federate States (or of the State of
States, and served for the term of 2 Leans in Company B, of 7 th Regiment
of a fal.; that his physical condition is as
follows: Suffering from Diabetio and
Me an trouble with old age
that his property consists of the following items NOW
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 Die / Co Ch
county been allowed a pension for the year 1 90/
Sworn to and subscribed before me, this the
1902 ( ) ( ) ( ) ( ) ( ) ( ) ( )
1/1/ Ragadree Ordinary.
STATE OF GEORGIA,
He Kalh County.
I, Magarace Ordinary of said County,
do pertify that I am well acquainted with J. Misawyer
the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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
( AMX your ) ///////////////////////////////////
Ordinary Die Kalh County.

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

YEAR 1897 COUNTY DeKalb

NAME Sawyer, F.M.

WHEN AND WHERE BORN? 1823 Putnem County, Ge.

FRILISTED WHEN AND WHERE? 1865 Witness states applicant enlisted spring 1863 Suffolk, Va.

RANK.

COMPANY AND REGIMENT? Co. B, 7th. Regt. Ga. Vols.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WILEAE?

RELEASED.

WHE AND WHERE SURRENDERED? April 9th. 1865 at surrender.

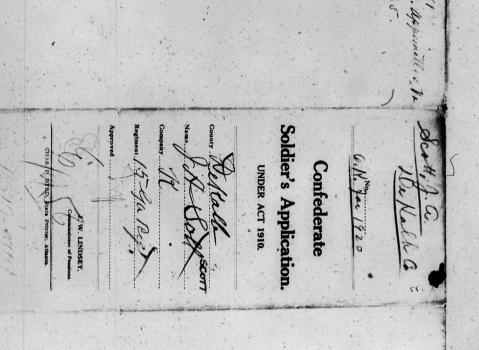
IF NOT PRESENT AT SURRENDER, WHERE WIRE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. W.H. Brisendine, same command -- No data.

Jung 15. 1861 Surrendles Va Scott, J. a. De Kalh a E 6. N. Jan 1920 Confederate Soldier's Application. UNDER ACT 1910. County Hekall



#### Questions for Applicants to Answer.

STATE	OF GEORGIA,
Mel	all County.
	of said State and County hereby and in
for the persion	on provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with
propounded	to make out the same, and after being duly sworn true answers to make to the questions answers as follows, to wit:
	hat je your name and where to you regide? Give County and Post-office)
	Hocas Austath allassiation
	w long and since when have you been a continuous resident citizen of this State?
7	5 gent all My high
. Di	d you enlist in the Army of the Constierate States or of the Organized Militia of this State
from 1861 to	1865? Considerets & Deta
4. W	hen and where, and in what Company and Regiment did you enlist dive the arm and class
of Service)	
	ow long did you remain in the actual Military Service with said Company and Regiment?
	discharge)
0. W	hen and where was your Company and Regiment surrendered or discharged from the Service?
	ere you actually present with your Command when it was surrendered or discharged?
8. If	you were not actually present, state specifically and clearly where you were
	here was your Command when you left it?
b. W	hen did you leave the Command?
	r what cause did you leave?
d. By	whose authority did you leave?
e. Fo	r how long was your leave granted? In what way?
. f. W	The did not
	'hy did you not return to your Command after leave expired?
	what way were you prevented?
h. W	hat effort did you make to return?
j. 11	so, when, and where? In what prison were you held and when were you released?
9. W	hat property of every description was owned, in the use, possession and control of yourself
	alue on the 4 Nov. 1908? (Make list by Items and value, and where situated.)
10. W	That property of any kind have you disposed of and for what purpose since 4 Nov.
	here and for what price?
11. W	hat property of any description of any kind, and of any value now owned and in the use.
possession as	nd control of your clf and its chan value? (Make itemized list).
12. W	hat annual or monthly income or earnings of yourself and the source derived have
13. Ar	e you drawing a pension of any amount from this State or the United States?
14. H	ave you ever applied for the Georgia Pension and had it refused? and for what cause it was
not allowed?.	
Sworn	to and subscribed before me, this the
10 g.da	y of Octoben 1918
Har	uls Pleavy prinary
7	No No II.

	F GEORGIA,
Have	County.
Chas.	of said State and County is hereby presented
s a witness in	support of the application of A Scott for the pension provided
	1910, in said State, and after toing sworn true answers to make to the questions propounded
nawers as foll	lows:
I. Wha	at is your name and where do you reside? Chas III Week
Mar	Comeda Ja
12. How	v long and since when have you known for a scott the applicant?
3. Whe	ere does he now reside, and since when has he been a bona fide, continuing resident in this
tate and how	dy you know? The Moreland Clygnice Attanta Ty
accc.	his life se was my Heightor for 15 years
4. Whe	en, where and in what Company and Regiment did
ar from 1861	to 1865? (Give date and place) Sparta Ju, 1861, Co/6 15th 9
5. How	v did you obtain your information of this Service? I was then seven y
near &	Sparta and said his Company leave for the army
	v long within your own personal knowledge did he perform actual military service with
	and Regiment? (give date) 1861 to April 1860
	en and where was his Command surrendered or discharged (give date and place)
ahh	omatter april 9 1865
	e you personally present at the Surrender?
	ot, where were you and how came you there?
	The state of the s
10. Was	the applicant personally present with his Command at surrender?
	ot where was he and how came him there?
	7
	an did he leave his Command?
	for what cause did he leave?
	By whose authority did he leave and how
	granted leave? How do you know
	ve stated to be true? If of your own knowledge (Tell clearly and specifically)
	· · · · · · · · · · · · · · · · · · ·
	what way was he prevented from returning to his Command?
	now?
14. Wha	at effort did he make to return to his Command and how do you know?
	,
	applicant captured as a prisoner.
	In what prison was he held?
	M 02 12
Sworn to	o and subscribed before me, this the \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
4	day of 191 (1)
4/1	Wolffer Ordinary,
	The state of the s

STATE OF GEORGIA.	1	19.00
Delalle	County.	
	( Delan	
Personally before me comes.	1 Julian	who on oath
says that they are freeholders residing	in said County and we know	17
the applicant for pension and we kno	w the property that is now in the	e use, possession and control of himself
and of its cash value to wit: (Make	List by items and value.)	
		y the applicant since Nov. 4, 1908?
5. What disposition was mad	ie of the proceeds of the sale?	mananiani dan manja di sasanan manasi dan da
		and full values?
Sworn to and subscribed before	pe, this the	day of OC 1919
Yours	Gentle Ordinapy,	
	Di Nal	County.
	<b>1 1 1 1 1 1 1 1 1 1</b>	County.
	INARY'S CERTIFIC	CATE.
STATE OF GEORGIA,		
	County.	
I.	Ordinar	ry of said County, certify that I know
		presents himself to be and resides in
said County. That I also know		the witness swearing to the
service and		who are freeholders, that
		ore signing the foregoing affidavit and
they are all truthful and trustworthy	and their statements are entitle	ed to full faith and credit. That the
Tax Returns of	shows th	hat
value for tax is in 1908 \$	for 1909 \$	for 1910 \$
		914 \$for 1915 \$
		day of191
	Ordinary,	The same of the sa
		County.
NOTES 1. Before any questions are answ		
ahali give shall be the whole t	ruth; so help you God."	cant and all witnesses in the following words h question asked you and the evidence you clent. him of self affidavits of freeholders unnecessary.
3. All affidavits must be made b	before the Ordinary and certified by	him,
4. At approant mas no property a	- III III possession, use or control	or por smaarne or treatenders undecessary,

NAME Scott, J. H.

YEAR 1920 COUNTY DEKalb

MYEN AND WERE BORN? A resident of Georgia since birth, 1844.

BELLISTED WHEN AND WHERE? April 1861, Sparta, Ga.

RANK?

COMPANY AND REGIMENT? Company K, 15th Ga. Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED?

WHEN AND WHERE SURRENDERED? April 9, 1865, Appointtox Court House, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED?

WITNESSES? Chas. M. Neel --- Personal knowledge

--- No data.