

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, _____ hereby authorize _____

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

shall be able to use it _____ by his check or registered mail.

Witness my hand this _____ day of _____ 1901.

Executed in presence of

Ordinary,

County.

Halcomb (Mrs.) S. A.
Fulton County

No. *OK*

WIDOW'S
Indigent Pension.
1901.

Name *Mrs. S. A. Halcomb.*

County *Fulton*

Widow of *M. M. Halcomb*

94 Halcomb

Approved *4/22* 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

1901

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

JLC

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

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

Witness my hand this _____ day of _____ 190 _____

Executed in presence of _____

Ordinary,

L. S.

County.

SEAL

Questions for Applicant.

STATE OF GEORGIA.

County.

Hall County.
Mr. S. A. Kelsom of said State and County, desiring to avail himself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed Oct 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Giles State, County and Post Office) Atlanta
2. How long and since when have you been a resident of this State? Atlanta Ga
3. When and where were you born? June 1844
4. When and where was your husband born—state his full name, and when were you and he married? Mr. Duffie W. Kelsom was born in Georgia
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? 1862-1864 in the 1st Georgia Infantry
6. How long did your husband serve in said Company and Regiment? 1862-1864
7. When and where did your husband's Company and Regiment surrender and was discharged? At Appomattox Court House Va. 9th of 1865
8. Was your husband present at the time and place when his Company and Regiment surrendered? Yes
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? He was there

10. When and where did your husband die? Aug 1866

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

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. 1866-1868 I was unable to work and had to be supported by my children

13. What has been your occupation since your husband's death? None

14. How much can you earn gross, by your own exertion as laborer? Nothing

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

16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899-1900, and what disposition, if any, by sale or gift, have you made of the same? Nothing

17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation? Hall County

18. How have you been supported since death of husband, and especially the 1899 and 1900? By my children

19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? Nothing

20. What was your employment during 1899 and 1900—how much did you receive for each year? None

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

22. Have you ever made an application for pension before? None

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

Depose and subscribed before me this 18 day of July 190 1

S. A. Kelsom } S. A. Kelsom
County.

WIDOW'S
Indigent Pension.
1901.

Mad. Kelsom
Widow
S. A. Kelsom
732
1901

JOHN W. LINDSEY
Commissioner of Pensions

WARRANT MADE TO

1901

Witness my hand

and depose under oath

Questions for Witnesses.

STATE OF GEORGIA,

Fullon County.

I, J. W. Williams, of said State and County, having been presented as a witness in support of the Application of Mrs. S. A. Keelam for a Pension under the Act of Oct 1900, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? The Williams - B. P. Keelam
J. W. Williams - Fullon County, Ga.
 2. Are you acquainted with the applicant, Mrs. S. A. Keelam, since 1862?

If so, how long have you known her? Since 1862

3. Where does she reside, and how long and since when has she been a resident of this State?

Atlanta Ga. all her life

4. When and where was she born? Nov 1854 - Sumner Co. Ga.

5. Were you ever acquainted with her husband?

Yes - Sumner Co. Ga.

6. Where did he reside in 1861?

Sumner Co. Ga.

7. When and to whom was he married?

In 1861 to S. A. Keelam

8. When and where was he born?

Dec 1825 - Sumner Co. Ga.

9. How long have you known him?

Since 1862

10. When and where did he enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this?

In 1862 - Co. B - 9th Bat. Arty. - Lawrenceville Ga. - Co. B - 9th Bat. Arty.

11. Were you a member of the same Company and Regiment?

Yes - I was with him until he was discharged.

12. How long did he perform regular military duty?

About 3 years - to end of war.

13. When and where was his Company and Regiment surrendered and discharged from service?

April 9th 1865 - at Appomattox Va.

14. Were you with the command when it surrendered?

Yes - I was.

15. Was McGuffey H. Keelam the husband of applicant present?

He was.

16. If not present, where was he?

He was there - I saw him.

17. When and where did he leave his Command?

At Appomattox Va.

For what cause? Surrounding of Appomattox

By whose authority he left? 10th Confederate Army - S. A. Keelam

How do you know all this? (State fully and clearly.)

at the time of the surrender.

18. When and where did McGuffey H. Keelam die?

In Aug 1866 - Sumner Co. Ga.

19. Where did he reside at his death and how long had he been a resident of Georgia at his death?

Sumner Co. Ga. - all his life.

20. Do you of your own knowledge know that applicant is the lawful widow of McGuffey H. Keelam?

Yes - I do.

21. Has the applicant answered these questions truthfully and to the best of her knowledge?

Yes - I believe so.

22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?

Nothing - she has no property or income.

23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it?

Nothing.

24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom?

Nothing.

25. What is applicant's physical condition and her chances and ability to earn a support?

She is old and feeble - unable to make a support.

26. Is applicant able to earn a support of labor of any sort, if not why?

She is not - because of age - weakness - and infirmity.

27. How was she supported for 1899 and 1900?

By her mother - Charles

28. How much did applicant contribute to her support for last two years?

Nothing.

29. Give a full and complete statement of applicant's physical condition?

She is feeble - infirm - and unable to labor or work.

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

None.

Sworn to and subscribed before me this 16th day of Feb 1901

John R. Williams Ordinary.

Fullon County.

T. C. Williams B. P. Keelam

B. W. Williams Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

Fullon County.

Personally before me comes M. C. Keelam and

M. C. Keelam both known to me to be reputable

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

S. A. Keelam, applicant for a Pension under Act of 1900, and after

such personal examination say that her physical condition is this: She has Chronic

bronchitis - Her heart does not act regularly

due to Valvular disease of same, she is unable to

perform manual labor.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 19 day of Feb 1901

John R. Williams Ordinary.

Fullon County.

M. C. Keelam M. C. Keelam

M. C. Keelam Witnesses.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fullon County.

I, John R. Williams Ordinary in and for said county, hereby

certify that the applicant, Mrs. S. A. Keelam resides in said

county, and has been a bona fide resident of this State since

1862, and that the witnesses, Mr. T. C. Williams and

B. W. Williams are of trustworthy character, and that their statements

are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the

oath herein prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same

was signed and subscribed.

I further certify that the tax digest of Fullon county shows that applicant

returned for taxation in her own name in 1899 _____ dollars worth

of property, and in 1900 _____ dollars worth of property.

Witness my hand and official seal, this 16 day of Feb 1901

John R. Williams Ordinary.

Fullon County.

Notar - 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."

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

All affidavits must be made before Ordinary.

Only widows who were the wives of the dead husbands while they were holding bond apply - and are now

widows. Those married since the April, 1865, census, and

Witnesses and two physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

, hereby authorize

of

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

at

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

day of 1902.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

, hereby authorize

of

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

at

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

day of 1903.

[L. S.]

Executed in the presence of

Halsey & Co. Mrs.

Fulton Co.

To Those Hereofore Paid.

1902.

No. 34

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. S. A. Halsey

of

Fulton County,

Widow of *M. M. Halsey*

Co. *9th Art Yr* Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

11/15/1902

AND HANDSD TO

SA

SEE W. H. HALSEY, 1000 PENSION, ALBANY, GA.

Halsey & Co. Mrs.

Fulton Co.

To Those Hereofore Paid.

1903.

No. 44

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. S. A. Halsey

of

Fulton County,

Widow of *M. M.*

Co. *9th Art Yr* Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

11/23/1903

AND HANDSD TO

SA

SEE W. H. HALSEY, 1000 PENSION, ALBANY, GA.

WIDOWS HEREFORE ATTOWED PENSION

FOR INDIGENT WIDOWS HEREFORE ATTOWED PENSION

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

S A Holcomb

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State continuously ever since Nov 2 1834.

That she is the Widow of M M Holcomb who was a soldier in Company 9th Art Regiment of 4th

Volunteers, that he enlisted in said regiment on or about the month of Nov 1861, and served in the Army up to 9th Apr 1862. That he died on the Aug 15 day of Aug 1862.

Age and poverty.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1861.

I have been allowed an Indigent pension as a resident of Fulton, County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me, this day of JAN 9 1902.

Mrs S A Holcomb

Post Office

State of Georgia,

Fulton County.

Ordinary of said County, certify that I am well

acquainted with Mrs. S A Holcomb, 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 2nd day of Nov 1834.

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

Official Seal

John R. Wilkinson

Ordinary of

Fulton County.

NOTE.—All blanks must be filled. Vouchers and affidavits must bear date not later than January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

S A Holcomb

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State continuously ever since Nov 2 - 1834.

That she is the Widow of M M Holcomb who was a soldier in Company 9th of the Art Regiment of 4th

Volunteers, that he enlisted in said regiment on or about the month of Nov 1861, and served in the Army up to 9th Apr 1862. That he died on the 15 day of Aug 1862.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1861.

I have been allowed an Indigent pension as a resident of Fulton, County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this day of JAN 22 1903.

S A Holcomb

Post Office

State of Georgia,

Fulton County.

John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. S A Holcomb, 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 2nd day of Nov 1834.

Given under my official signature and seal, this the 22nd day of JAN 1903.

Official Seal

John R. Wilkinson

Ordinary of

Fulton County.

NOTE.—All blanks must be filled. Vouchers and affidavits must bear date not later than January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

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

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

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

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

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

[L. S.]

Executed in presence of _____

Holcomb, S.A. (Mrs.)
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. 131

INDIGENT
WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO
Mrs. S. A. Holcomb

Fulton County,

Widow of *M. M.*
On *24th* day of *Apr* 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

121 1904.

AND HANDED TO

eff

Geo. W. Harrison, State Printer, Atlanta.

Holcomb, S.A. (Mrs.)
Fulton County
To Those HERETOFORE PAID.

1905.

No. 156

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs. S. A. Holcomb

Fulton County,

Widow of *Geo. Duffie Holcomb*
Co. *9th* *Regiment*.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

120 1905.

AND HANDED TO

Apr

Geo. W. Harrison, State Printer, Atlanta.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

S. A. Kolescomb

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

Fulton.

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

continuously ever since Nov 2 - 1834. That she is the Widow ofMr M Kolescomb

who was a soldier in Company

9th of the Art'yRegiment of Geo

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

1862, and served in the Army up to 9th Apr 1865. That he diedon the 15th day of Aug, 1886A + P

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1861.

I have been allowed an Indigent pension as a resident of Fulton.
County, under Act 1900, for the year 1900, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this 22 day of JAN 1904.

Ordinary.

Post Office

S. A. KolescombState of Georgia,
Fulton County.I, John R. Wilkinson,

Ordinary of said County, certify that I am well

acquainted with Mrs. S. A. Kolescomb, 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 theday of Nov 1834Given under my official signature and seal, this the 22 day of JAN 1904.

Official Seal.

John R. WilkinsonOrdinary of Fulton County.NOTE—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

S. A. KolescombFulton.

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

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

continuously ever since all her life. That she is the Widow ofMr Duffy Kolescomb

who was a soldier in Company

of the 9thRegiment of Georgia

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

1862, and served in the Army up to Oppomattoy 1865. That he died onthe 16 day of Aug, 1886.Age and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1861.

I have been allowed an Indigent pension as a resident of Fulton.
County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me,

this 22 day of JAN 1905.

Post Office

AtlantaState of Georgia,
Fulton County.I, S. A. Kolescomb,

Ordinary of said County, certify that I am well

acquainted with Mrs. S. A. Kolescomb, 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 theday of all her life 1834Given under my official signature and seal, this the 22 day of JAN 1905.

Official Seal.

S. A. KolescombOrdinary of Fulton County.NOTE—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____, 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 _____ 1906.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____, hereby authorize

of

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

at

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

day of _____ 1907.

[L. S.]

Executed in presence of

Holcomb, S. A. (Mrs)
Fulton County
To These Hereofore Paid.

1906.

No. 118

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1906.

Mrs. S. A. Holcomb

Fulton

or

Fulton County
Widow of S. A. Holcomb

Co. 2nd Mass. Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1906.

AND REMITTED TO

John W. Lindsey

For Pensions paid for year ending Dec. 31, 1906.

Holcomb, S. A. (Mrs)
Fulton Co

To These Hereofore Paid.

1907.

No. 126

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1907.

Mrs. S. A. Holcomb

Fulton

or

Fulton County
Widow of S. A. Holcomb

Co. 2nd Mass. Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1907.

AND REMITTED TO

John W. Lindsey

For Pensions paid for year ending Dec. 31, 1907.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton } S. A. Holcomb

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since all life. That she is the Widow of Mr. Duffy Holcomb who was a soldier in Company 7th of the 9th Regiment of SA Volunteers, that he enlisted in said regiment on or about the month of 1862, and served in the Army up to Appomattox 1865. That he died on the 76 day of Age and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1861

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 1st day of JAN 1 1906 1906.
John R. Wilkinson Ordinary, Post Office SA

State of Georgia, }
Fulton County, } I, John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. S. A. Holcomb, 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 all life

Given under my official signature and seal, this 1st day of JAN 1 1906 1906.

Official Seal

NOTE--All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton } S. A. Holcomb

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since 1840. That she is the Widow of Mr. Duffy Holcomb who was a soldier in Company 9th of the 9th Regiment of SA Volunteers, that he enlisted in said regiment on or about the month of 1862, and served in the Army up to Appomattox 1865. That he died on the 72 day of Age and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1862

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 2nd day of JAN 2 1907.
John R. Wilkinson Ordinary, Post Office SA

State of Georgia, }
Fulton County, } I, John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. S. A. Holcomb, 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 1840

Given under my official signature and seal, this 2nd day of JAN 2 1907.

Official Seal

John R. Wilkinson Ordinary of Fulton County.

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

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

day of all day

Given under my official signature and seal, this 10 day of JAN 1 1906 1906.

Official
Seal

Ordinary of Fulton County.

NOTE.—All blanks must be filled.

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

day of 18 40

Given under my official signature and seal, this the 2 day of JAN 2 1907.

Official
Seal

Ordinary of Fulton County.

NOTE.—All blanks must be filled.

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

Holcomb, S. A. (Mrs.)

Adoles

For Fulton County

1926

Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Thos. H. Jeffries Ordinary

For Mrs. S. A. Holcomb

Date of Death June 9 1926

Amount \$ 10.00

Approved and ordered paid

John W. Clark
22 July 26, JOHN W. CLARK,

Commissioner of Pensions

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

08 ✓

ATLANTA, GA.

M—For Mrs. S. A. Holcomb
Atlanta Fulton Co. Ga.

TO HARRY G. POOLE, DR.
"FUNERAL HOME"
86 S. PRYOR STREET

PHONES: WALNUT 6386
WALNUT 6389

PRIVATE AMBULANCE

June 10th 1926	Casket	\$200.00
	Embalming and services	15.00
	Funeral notices	5.00
	Box to Cemetery	3.50
	P.B. Gloves	1.50
	Hearse	10.00
		\$235.00

Georgia
Fulton Co.

Personally appeared before me Harry G. Poole who after being sworn says that the above account is just true and unpaid and was for the burial of Mrs S A Holcombe June 10th 1926 in Fulton Co. Ga. and she died with out sufficient funds to pay her funeral expenses.

Harry G. Poole

Given to Subscribed before me this June 10-1926

William R. Marshall
C. G. Ordinary

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes
Harry G. Poole of said County, who, after being sworn, on oath
says that he knew Mrs. S. A. Holcomb of said County, and that said Pensioner
was on the Pension Roll of said County at the time of death, which occurred in Fulton
County, in this State, on the 9 day of June, 1926, and that
a Pension of (\$ 52.00) Dollars was due pensioner and
unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and
no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$735.00, per
sworn statements fully and completely itemized hereto attached.

Sworn to and subscribed before me

William R. Maubert Ordinary
Fulton County

(Seal of Ordinary)

Harry G. Poole

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos. H. Jeffries Ordinary of said County, do certify
that I personally know Harry G. Poole who is a resident
citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit;
that I also know Mrs. S. A. Holcomb while in life and that this was
the same person whose name appears on the Pension Roll of Fulton County, and
was paid a Pension of Fifty (\$52.00) Dollars
in said County for 1926, and I now believe said pensioner to be dead; and that the instructions at the foot of
this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 10 day of June, 1926

(Seal of Ordinary)

Thos. H. Jeffries Ordinary
Fulton County

INSTRUCTIONS.

- 1st. Requires those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unpaid," etc.)
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without owning sufficient property to pay this bill."
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipt.
- 6th. Return this application, and attached bills, with your final settlement to the Pension Department.
- 7th. Ordinary should see that the back of this blank, when folded, is filled out.

ATLANTA, GA.

M. For Mrs. S. A. Holcomb

Atlanta Fulton Co. Co.

TO HARRY G. POOLE, DR.

"FUNERAL HOME"

90 S. PRYOR STREET

PHONES | WALNUT 6326
| WALNUT 6329

PRIVATE AMBULANCE

June 10th 1926	Casket	\$500.00
	Embalming and services	15.00
	Funeral notices	5.00
	Box to Cemetery	3.50
	F.B. Gloves	1.50
	Hearse	10.00
		\$535.00

Georgia
Fulton Co.

Personally appeared before me Harry G. Poole
who after being sworn says that the above account is
just true and unpaid and was for the burial of Mrs
S. A. Holcomb June 10th 1926 in Fulton Co. Ga. and
she died with out sufficient funds to pay her funeral
expenses.

Harry G. Poole

Sworn to and Subscribed before me this June
10-1926

William R. Maubert
C. C. Ordinary

Ordinary's Certificate

STATE OF GEORGIA

Fulton

COUNTY

I, *J. H. [Signature]*

Ordinary of said County, do certify

that I know *Mrs. Laura J. Holcombe* the applicant for pension. She

is the person she represents herself to be and she is a bona fide continuing resident citizen of said County

and was on the 4th November 1898, that I also know

Myself the applicant for pension, that both *she* and *she* are now residents of said County and

were duly sworn before me before signing the foregoing affidavits and that *she* is a true and faithful, trust-

worthy, and *she* statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *17th* day of *Oct* 189*9*

(SEAL)

J. H. [Signature] Ordinary, *Fulton* County

NOTES: 1. Before any certificate is returned the Ordinary shall prove applicant and the above to the following words:

2. You do solemnly swear that you will true answers make to each of the questions asked you and the witnesses

3. Additional affidavits to be made by the Ordinary of the residence of the person to be sworn and certified by

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

5. The Ordinary must be made before the Ordinary of the residence of the person to be sworn and certified by

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County *Fulton*

Name *Laura J. Holcombe*

Widow of *Mr. H. Holcombe*

Company *C. A.*

Regiment *Am. Rifles Regiment*

Approved _____

52
4
3
2
1

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co. State Printers, Atlanta.

Mrs. Laura J. Holcombe
C. J. [Signature] 10-31-99
218 [Signature]

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, T. J. Hoffman Ordinary of said County, do certify that I know Mrs. Lillian H. Holcomb the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know she is my clerk she is both truthful trust worthy and her statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 17th day of Oct 1914

(SEAL)

Ordinary,

County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God." 2. Additional affidavits may be attached if blank spaces are insufficient. 3. Only widows who married prior to January 1st, 1861, are entitled. 4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by said Ordinary. 5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton

Name Lillian H. Holcomb

Widow of H. H. Holcomb

Company C. A.

Regiment 1st Regt. Col. Regt.

Approved

J. W. LEMLEY

Ordinary of Fulton

Sworn before me on this day

17th day of Oct 1914

Mrs. Lillian H. Holcomb

Ch. J. Hoffman

Ordinary

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name, and where do you reside? Lillian H. Holcomb Atlanta Ga
2. How long and since when have you been a continuing resident of the State of Georgia? all my life
3. When, where and to whom were you married? Married to H. H. Holcomb in
William H. Holcomb
4. Have you married since the death of first and soldier husband? No
5. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service) July 22nd 1861 - at
Charley's Company S. C. Co. 2nd Regt. Light Artillery
6. When and where did the commands of your husband surrender or discharge from the army? Appomattox Va - April 9th 1865
7. Was your husband personally present at the time of the surrender or discharge of this command? No
8. If he was not present state clearly where he was Prisoner of war - Johnson Island
9. Where was his command when he left? 1st Regt. Light Artillery
10. For what cause did he leave his command? Discharge of war
11. By whose authority did he leave his command? Discharge of war
12. For how long was he granted leave of absence? None
13. What was his physical condition when he left his command? Good
14. What effort did he make to return to his command? None
15. In what way was he prevented from going back to Command? None
16. Was he captured by the enemy at any time? No
17. If so, when and where captured and where held as a prisoner, and when and for what cause released? Captured April 1st 1865 - Johnson Island - by Union Soldiers - released on June 1st 1865 - by Union Soldiers
18. When and where did you first husband die? Johnson Island June 1st 1865
19. Were you residing together when he died? Yes
20. If not, how long had you resided apart? None
21. Are you now a widow? Yes
22. Have you or your husband heretofore been paid a pension by the State? No
23. If so, when and for what cause were you or your husband placed on the roll? No

Sworn to and subscribed before me this the

17th day of Oct 1914

Lillian H. Holcomb Ordinary

of Fulton County.

(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF South Carolina

Oconee COUNTY.

Personally before me came W. J. McCall who, after being duly sworn, true answers to make to the following questions, answers as follows:

1. What is your name and where do you reside?
W. J. McCall - Walhalla, S. C.
2. How long and since when have you known James J. McCall applicant?
Many years
3. How long and since when has she continuously resided in this State? (Give date.)
about ten years and her wife
4. When and to whom was she married? James J. McCall. How do you know?
He is the name of her son.
5. How long and since when did you know W. J. McCall her husband?
about ten years and her son.
6. When and where did W. J. McCall the husband of applicant, die?
July 1, 1918, Walhalla, S. C.
7. Were the applicant and her husband living together as husband and wife at the date of his death?
yes
8. If not, how long did they live apart before his death?

Were they divorced? no
9. When, where and in what Company and Regiment did James J. McCall enlist?
Co. I, 1st Regiment, 1st S. C. Infantry, S. C. - July 20, 1916, C. A.

10. Were you a member of the same Company yes and in what Regiment?
1st Regiment, 1st S. C. Infantry

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

12. When and where did his Command surrender, and was discharged?
April 9, 1918, Appomattox, Va.

13. Were you personally present when it was surrendered? no. If not, where were you General of war and how came you there? Captain's son
Walhalla, Va. April 3, 1918

14. Was the husband of applicant personally present at surrender? no. If not where was he? was General of war. When, where and for what cause did he leave Command? (Give date.) April 9, 1918. By whose authority did he leave his Command? W. J. McCall. And how long was he granted leave?

How do you know all this?
was member of 1st S. C. Infantry, 1st Regiment, S. C. - July 20, 1916, C. A.

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

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

Sworn to and subscribed before me this
30th day of Sept 1918
W. J. McCall
Judge of Probate
Oconee County.
X W. J. McCall
Capt. 1st S. C. Infantry
6020

Marriage License

State of Georgia--Fulton County.

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to solemnize.

You are hereby authorized and permitted to join in the honorable
state of Matrimony William H. Holcombe

and Laura J. West
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.

REBURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 15 day of Nov. 1870 by
Daniel Pittman I. S.
ORDINARY.

I hereby certify that William H. Holcombe
and Laura J. West
were joined together in the HOLY BANS of MATRIMONY
on the 15 day of November 1870, by me. Wm. F. Harrison, Minister

State of Georgia,

Fulton County.

ORDINARY'S OFFICE

Atlanta Ga., March 20th 1919

I, CLAUDE C. MASON, Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

William H. Holcombe
and Laura J. West
as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.

C. C. ORDINARY

Marriage License

State of Georgia--Fulton County.

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to Solemnize,

*You are hereby authorized and permitted to join in the honorable
state of Matrimony*

William H. Holcombe

and

Laura J. West

According to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 15 day of Nov., 1870

Daniel Pittman

L. S.
ORDINARY.

I hereby certify that William H. Holcombe

and

Laura J. West

were joined together in the HOLY BANS of MATRIMONY

on the 15 day of November, 1870, by me. Wm. P. Harrison, Minister

State of Georgia,

Fulton County.

ORDINARY'S OFFICE

S. S.

Atlanta Ga., March 20th 1870

I, CLAUDE C. MASON, Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

William H. Holcombe

and

Laura J. West

at the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.

C. C. ORDINARY

Halcombe, Martin J.
Colleton County (S.C.)
27 Jan 1911

No. *1*
Indisputable

Widow's Application

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

✓

County *Colleton*

Name *Mrs Martha J. Halcombe*

Widow of *Elijah*
Halcombe

Approved _____

J. W. LINDSEY
Commissioner of Prisons

Chas. F. Eyre, State Printer, Atlanta.

9/24/10

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Tullahoma County.

Personally before me comes Martha J. Holcomb of said County, who, after being duly sworn, on oath says, that she is the widow of Elijah Holcomb to whom in the County of Washington State of Ga. she was married on the 10th day of July 1897 and that she remained his wife, and resided with him to the date of his death in March 1896 and that she has not since remarried. At the time of his death he was a resident of Tullahoma County, in Ga. said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$6.00 in Tullahoma County for 1896 per annum, on account of being a soldier in Company B, 9th Ga. Inf. Artillery (Volunteers of State Militia)

At the death of Elijah Holcomb was in the use and possession of the following property Nothing

of the cash value of \$ Nothing

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

Acres land Nothing \$

Horses and Mules Nothing \$

Hogs, Cows, etc. Nothing \$

Total Cash value of all property Nothing

That she is now a bona fide resident citizen of said County of Tullahoma and she has so continuously resided since 1898 day of Dec.

Sworn to and subscribed before me, this the 17th day of Sept. 1910 Martha J. Holcomb Ordinary, Marshall Williams of Tullahoma County.

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

STATE OF GEORGIA,

Tullahoma County.

Personally before me come Marshall Williams & O. Bagle 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 Martha J. Holcomb who made the foregoing affidavit, is the lawful widow of Elijah Holcomb who died in Tullahoma County in said State of Ga. on 10th day of March 1896 and that she has not since remarried. That she became the wife of Elijah Holcomb on the 10th day of July 1897 and that she and he had resided together as man and wife continuously since 10th day of July 1897 and that Elijah Holcomb was in the SAID man who was on the pension roll of said State Ga. from Tullahoma County Ga. when he died.

Sworn to and subscribed before me, this the 17th day of Sept. 1910 Marshall Williams Ordinary, O. Bagle of Tullahoma County.

Widow's Application

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

County Tullahoma

Name Mrs. Martha J. Holcomb

Widow of Elijah Holcomb

Holcomb

Approved

J. W. LINDSEY
Commissioner of Pensions

CHAS. F. BYRN, STATE PRINTER, ATLANTA.

9/15-1/10

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes J.W. Williams who after being sworn on oath says, that she is a freeholdery of said County, and that she knows Mrs. M. J. McLeone of said County and knew her said husband Elijah McLeone at his death on the 26th day of March 1896 that she and he were in the use, possession and control of the following property at his death to wit: Nothing

of the value of \$ Nothing That she is now in the use, possession and control of the following property to wit: Nothing

of the value of \$ Nothing

Sworn to and subscribed before me, this the

17th day of Sept 1910 J.W. Williams Ordinary,
of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

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

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

That the tax Books of Fulton County shows that she returned property to the amount of None for 1908 \$ None for 1909 \$ None for 1910 \$ None

Sworn under my hand and official seal of office this 26th day of Sept 1910
(SEAL) John Breckin Ordinary,
Fulton County.

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

GA.



THE MOST MODERN FUNERAL HOME IN THE UNITED STATES

Jan 25 - Lasket Box 50.00
 Police 12.00
 4 Caskets 24.00
 Hearse 10.00
 Total 96.00
 2-10-14
 Harry G. Poole

126

Application for Pension Due to a Deceased Pensioner

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

Georgia, Fulton County.

Personally before me, the Ordinary of said County, comes Harry G. Poole
Poole of said County, who, after being sworn, on oath says that
 he knew Martha J. Holcombe of said County, and that he was on
 the Oct 1910 Pension Roll of Fulton County at the
 time of her death, which occurred in Fulton County, in this
 State, on the 28th day of January 1914, and that
 a Pension of Sixty Dollars was due her and
 unpaid at the time of his death. That he left no widow or dependent children surviving him, and no
 estate of any value sufficient to pay his funeral expenses, which amounted to the sum of \$96.00
 Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me
 this 29 day of January 1914.
John R. Wilkerson Ordinary
Fulton County

Harry G. Poole

Georgia, _____ County.

John R. Wilkerson Ordinary of said County, do certify
 that I personally know Harry G. Poole who is a resident
 citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and
 credit.

I also knew Martha J. Holcombe while in life; that she
 was the same person whose name appears on the _____ Pension
 Roll of Fulton County, and was paid a Pension
 of Sixty Dollars in said County for 1914, and
 I now believe him to be dead.

Given under my hand and official seal, this 29 day of January 1914.

John R. Wilkerson Ordinary,
Fulton County.

Person's office
11/2-1913

This man is from
by the name of
the left hand
of the right hand
of the right hand
of the right hand
of the right hand
of the right hand
of the right hand

W. H. H. H.
A. H. H. H.

Confederate

Soldier's Application

CONFIDENTIAL

A. H. H. H.

A. H. H. H.

A. H. H. H.

A. H. H. H.

A. H. H. H.

A. H. H. H.

A. H. H. H.

A. H. H. H.

A. H. H. H.

A. H. H. H.

A. H. H. H.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

John W. Lindsey County *Wilkes*
 I, *John W. Lindsey*, of said State and County, hereby apply for the pension provided by Act of 1910, to Confederate Soldiers, and submit his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office)
John W. Lindsey Wilkes Co. Columbus Ga
2. How long and since when have you been a continuous resident citizen of this State?
From 1870 to 1912 22 years
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
No
4. What and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
Company D 12th Va Regt. William M. Wadsworth
5. How long did you remain in the actual military service with said Company and Regiment (Give date of discharge)?
From Oct 1 to 1865 Discharged in Washington D.C.
6. When and where was your Company and Regiment surrendered or discharged from the Service?
17th Apr 1865 Surrendered at Appomattox 1791665
7. Were you actually present with your Command when it was surrendered or discharged? *No*
8. If you were not actually present, state specifically and clearly where you were.
On parole at Appomattox
9. Where was your Command when you left it? *At Appomattox Va*
10. When did you leave the Command? *Was discharged for special medical discharge*
11. For what cause did you leave? *On parole for medical discharge*
12. By whose authority did you leave? *By authority of Capt. J. B. Ruff*
13. For how long was your leave granted? In what way? *For 60 days for medical discharge*
14. Why did you not return to your Command after leave expired? *Discharged*
15. In what way were you prevented? *Discharged*
16. What effort did you make to return? *No*
17. Were you captured during the war? *No*
18. If so, when, and where? In what prison were you held and when were you released? *No*
19. What property of any description now owned, in the use, possession and control of yourself and wife, and in cash value on the 1 Nov. 1906? (Make list by items and value)
None
20. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1906. To whom and for what price?
None
21. 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 in cash value? (Make itemized list)
None
22. What annual or monthly income or earnings of yourself and wife and the source derived have you?
None
23. Are you drawing a pension of any amount from this State or the United States? *No*
24. Have you ever applied for the Georgia Pension and had it refused, and for what cause it was not allowed?
No

Sworn to and subscribed before me, this 1st day of April 1913.

John W. Lindsey
John W. Lindsey
 County *Wilkes*

Approved

J. W. LINDSEY,
 Confederate Soldier.

CHAS. E. KIRK, Notary Public, Wilkes Co., Ga.

9/35-1813

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

16. Was applicant captured as a prisoner... no ... If so, when and where

...In what prison was he held?

Sworn to and subscribed before me, this the

4R pattern C-155-151-10

3. Exhibit 3 Exhibit 3 Exhibit 3
 6. Exhibit 6 Exhibit 6 Exhibit 6
 7. Exhibit 7 Exhibit 7 Exhibit 7

COUNTY

3

22

-1802-

[L. 8.]

W. L. Lundy
Care of Prison

No

Name A Biny Holquist
County Fulton
Co. 25 18th St Reg'm't _____
Approved _____ 1902

WARRANT HANDED TO

8/9/04.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

South Carolina
Hudson County.

J. F. Clardy of said State and County, having been presented as a witness in support of the application of *A. Perry Holland* for pension under Section 1254, Code, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *J. F. Clardy, Anderson S.C.*
2. Are you acquainted with *A. Perry Holland*, the applicant: If so, how long have you known him? *Chicago up to 1896.*
3. Where does he reside, and how long and since when has he been a resident of this State? *from information Atlanta Ga. since 1896.*
4. When, where and in what company and regiment did he enlist, and how do you know? *1862. Anderson S.C. Co. 48th Regt S.C.V. Quosonary.*
5. Were you a member of the same company and regiment? *I was.*
6. How long did he perform regular military duty? *Dec 1862 to 26th July 1864.*
7. When and where was his command surrendered? *On information - 9. day April 1865. at Appomattox Va.*
8. Were you present when it surrendered? *I was a prisoner of war.*
9. Was applicant present? *He was with me at Elmira. N.Y.*
10. If he was not present, where was he? *at Elmira prison N.Y.*
- When did he leave his command? *26 July 1864. For what cause? Captured.*
- By what authority he left? *as a prisoner of war. How do you know all of this? He was in Company with me. Captured in this "Blow up" at Petersburg Va. July 30 - 1864.*
11. What property, effects or income has the applicant? (Give your means of knowledge) *I do not know his standing since 1896.*
12. What property, effects or income did the applicant possess in 1868, 1869, 1870, 1889, 1900 and 1901, and what disposition, if any, did he make of same? *In 1876 he had 67 acres land sold to his sons E. M. and J. T. Holland.*
13. Has he conveyed away any of his property in the last four years or so, what was it, and to whom? *I do not know of any - do not think had any.*
14. What is the applicant's occupation and physical condition? *I cannot say since 1896. He was farming in this County. he was then tolerably stout.*

15. Is the applicant unable to support himself by labor of any sort, if so, why? *I do not know.*

16. How was he supported during the years 1868, 1869, 1900 and 1901? *I do not know*

17. What portion of his support for these four years was derived from his own labor or income? *I do not know*

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? *I can't do so -*

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

Sworn to and subscribed before me, this 28th day of Jan 1903

J. F. Clardy

Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me *J. T. Rensuff M.D.* and *R. H. Robard M.D.*, both known to me as reputable physicians

of said County, who, being severally sworn, say on oath that they have examined carefully *A. Perry Holland* applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

He has had right arm fractured three years ago which disables him from following his trade as blacksmith. He has also a weak heart which prevents him from performing any physical labor and is easily exhausted when working. Eyes are fairly clear and we have no interest in said pension being allowed.

Sworn to and subscribed before me, this 19th day of January 1903

John W. Rensuff Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, *John W. Rensuff* Ordinary in and for said County, hereby certify that the applicant *A. Perry Holland* resides in said County, and has been a bona fide resident of this State since the 8th day of Oct 1896 and that the witnesses, viz: *J. T. Rensuff*

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

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

I further certify that the tax digest of *Fulton* County show that applicant returned for taxation in his name in 1899 _____ Dollars of property, and in 1900 _____ Dollars of property.

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

Witness my hand and seal of office, this 19th day of Jan 1903 *John W. Rensuff* Ordinary, of *Fulton* County.

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

Georgia I In the application
Fulton County of ABey Holland for
persons I & J my att
a Minutes for him make the following
answers to questions Nos 11-12-13-
14-15-16-17 & 18

To No 11 he answers

None since 1898

To No 12 He answers

No efforts or income since 1898

To No 13 He answers

He made no conveyance of any kind

To No 14 He answers

He paddles when able

He is not able to do manual
labor is also deaf

To No 15 He is unable to do anything but
paddle when weather is good

To No 16. What he made by paddling
& contributions

To No 17 Nothing except what he
earned by paddling

To No 18 General debility and old age

To No 19 None whatever J, J. Wyatt
Sergeant & Subsergeant

before me 12th

July

1903

John R. Wilkinson

Ordinary

Fulton Co Ga

W. A. Holland enlisted as a private in Co. B, 44th Regt. Ga. Inf., 1st Div., 1862. Discharged at Manassas, Va., Sept. 25, 1862. Enlisted as a private in Pruden's Battery Ga. Light Artillery State Troops 1864. Discharged, Macon, Ga., May 1865.

William W. Braden
Director Confederate Records
Div.

Widow's Application

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

County Fulton
Name Mrs. A. T. Holland
Widow of James Adolphus Holland
Date of Marriage Mar. 3, 1888
Date of Husband's Death Sept. 27, 1917
Company B
Regiment H 4th Regt. Inf.
Approved DEC 27 1937 193
W. M. S. Holland
Director.

AUG 26 1937

STATE OF GEORGIA

Pulmon.....COUNTRY

THOMAS H. JEFFERIES, Ordinary of said County, do certify that I know **Mrs. A. P. Holland** the applicant for pension; that

citizens of said State since January 1st, 1920; that I also know **Monroe Phillips**

the witness who swears to the legitimacy of said 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 25 day of August, 1933.

(SEAL OF ORDINARY)

[Signature] Ordinary

of Fullton County.

INSTRUCTIONS

1. Before any man is awarded the Ordinary shall wear application and the witness in the following words: "For the ordinary service of your own estate make to each of the question asked you and the evidence you shall give will be as follows."
2. Additional questions may be asked if think queries are warranted.
3. After the answers are given the Ordinary shall say: "I have heard you and I have heard the evidence of the witnesses."
4. After the answers are given prior to January 1st, 1920, an affidavit may be made by the Ordinary in which the applicant or witness needed and must be certified by him. Ordinary.
5. A final written copy of marriage license is deliverable. If not, pure standing, by your person, or by general representation of the Ordinary.
6. The ordinary form of Marriage Certificate is upon throughout the State. A short, simple form is better to handling.
7. Do not take an application from any widow with a contrary reciting a question.

State Dept. Public Welfare,
Atlanta, Nov. 9, 1937.

Mrs. A. Holland enlisted as a private in Co. B, 44th Regt. Ca. near Wash. D. C., 1862. Discharged March 4, 1863. Re-enlisted in 1864. Re-enlisted in Sept. 25, 1864. Re-enlisted in Private in Pruden's Battery Co. Private in Artillery State Troops 1864. Married, Macon, Ga., May 1865.

Handwritten signature: A. T. Holland
Div.

RECORDED
Holland, A. T. m. 10/8/37
C. T. m. 10/8/37

Widow's Application

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

County... Fulton
Name... Mrs. A. T. Holland
Widow of James Adolphus Holland
Date of Marriage... Mar. 3, 1863
Date of Husband's Death... Sept. 27, 1917
Company... B
Regiment... 44th Regt. Inf.
Approved... DEC 27 1937
Decree...

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, THOMAS H. JEFFRIES, Ordinary of said County, do certify that I know Mrs. A. T. Holland 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. Phillips the witness who swears to the ~~several statements in 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 25 day of August, 1937.

(SEAL OF ORDINARY)

of Fulton County.

INSTRUCTIONS:

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

FULTON COUNTY.

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

SECTION I.

1. What is your name, and where do you reside? (Give Post Office and County) Mrs. A. T. Holland, 878 Queen St. S. W. Atlanta, Fulton Co., Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All my life.
3. (1) Where and (2) to whom were you married? Mar. 3, 1863, Jasper County, Ga. James Adolphus Holland.
- a. Have you married since the death of first and soldier husband? No.
- b. When and where did your first husband die? Sept. 27, 1917, Fulton County, Ga.
- c. Were you residing together when he died? Yes.
- d. If not, how long had you resided apart?
- e. Are you now a widow? Yes.
- f. Have you or your husband heretofore been paid a pension by the State? Yes, \$14, from Jasper Co., Ga.
- g. If so, when and for what cause were you or your husband placed on the roll? Soldier.

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 of Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.

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

Sworn to and subscribed before me, this the

25 day of August, 1937.
T. H. Jeffries Ordinary.
of Fulton County.

Mrs. A. T. Holland
Applicant

4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
8. Do not take an application from any widow who is already receiving a pension.

of Atlanta County.
 (SEAL OF ORDINARY)

August 2, 1937
Mr. A. T. Holland
 Applicant

August 2, 1937.

This is to certify that I, Dr. W. Beecher Duvall, have known Mrs. America T. Holland since 1917, and have been her family physician since that time. I can truthfully swear that she has never re-married since the death of her husband, James Adolphus Holland. Mr. Holland died in September of 1917.

W. Beecher Duvall MD

Sworn to and subscribed before me this 2nd day of August, 1937.

Julius M. Seltzer
 Notary Public, State of Ga.

STATE DEPARTMENT OF PUBLIC WELFARE
 HURT BUILDING
 ATLANTA

Hon. Thos. H. Jeffries, Ordinary,
 Fulton County,
 Atlanta, Georgia.

WHEREAS:

MRS. A. T. HOLLAND, WIDOW OF JAMES ADOLPHUS HOLLAND,

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

ORDERED:

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

This, the 27th day of December 19 37.

L. T. Gillen
 Director, Confederate Division
 State Department of Public Welfare

JASPER COUNTY DEPARTMENT OF PUBLIC WELFARE
MONTICELLO, GA.

JASPER COUNTY BOARD OF
PUBLIC WELFARE

DR. L. F. FITTARD, CHAIRMAN, MONTICELLO
O. H. FAURE, MONTICELLO
HOWARD BLACKWELL, PARHAM
J. T. THOMASON, MONTICELLO
C. G. HENDERSON, HILLANDALE

MRS. REUBEN D. JORDAN
COUNTY DIRECTOR

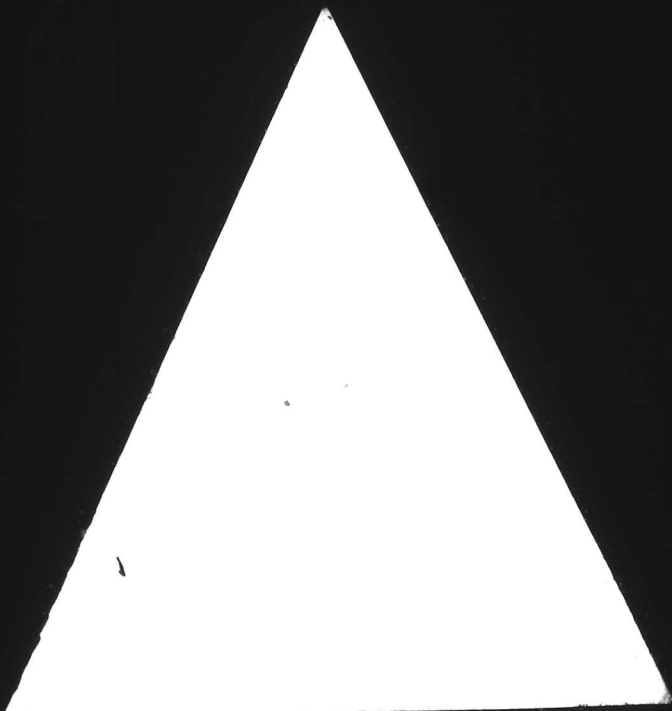
State of Georgia
County of Jasper

Personally appeared before me Monroe Phillips who on oath says that he knew James Adolphus Holland and America T. Kinard as man and wife for more than forty years. They were residents of Jasper County and lived on an adjoining farm to me and all their children were born there. The above stated facts are true to the best of my knowledge and belief, so help me God.

Monroe Phillips

Shown to and sub-
scribed before me
this the 29 day of
July, 1937

Engine Middlebrook
Ordinary
Jasper Co.



Pension office
Mar 3 - 1910

Applicant fails
to state from
any interest
of husband in
any criminal
or confidential
cases army
is required by
law to authorize
the Pension

Mr. Lindsey
Care of Ben

Holland, CHARITY, E. C. (Mar 3)
Widow
No. 3-1910

No. _____

Widow's Pension

✓ UNDER ACT 1910.

County Holt

Name Charity F. Holland

Widow of Mr. A. D. Holland

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

9/12/10

*Person of the
the 8-1910
applicant's father
to this office
and returned
of widow (in
and command)
of the army
to be awarded by
the court
for this purpose
the widow
of the army
the widow
of the army*

*Holland (A. M.)
F. M. (A. M.)
the 8-1910*

Widow's Pension

UNDER ACT 1910.

County *Bullton*

Name *Charity J. Holland*

Widow of *Geo. A. Holland*

J. W. LINDSEY,
Commissioner of Pensions

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

STATE OF GEORGIA,

County.

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

1. What is your name, and where do you reside? *Mrs Charity J. Holland City about 58 years*
2. How long and since when have you been a continuing resident in the State of Georgia?
3. When, where and to whom were you married? *1865*
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.)
5. When and where did the Commands of your husband surrender or discharge from the army? *Citronelle Ala. May 4, 1865 and was bonded at division May 10, 1865*
6. Was your husband personally present at the time of the surrender or discharge of this Command? *He was present*
7. If he was not present state clearly where he was?
8. Where was his Command when he left?
9. For what cause did he leave his command?
10. By whose authority did he leave his Command?
11. For how long was he granted leave of absence?
12. What was his physical condition when he left his Command?
13. What effort did he make to return to his command?
14. In what way was he prevented from going back to Command?
15. Was he captured by the enemy at any time? *No*
16. If so, when and where captured and where held as a prisoner, and when and for what cause released?

17. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? *Married yes*

18. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) *a small home worth five hundred dollars*

19. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) *Not any*

20. What property of any description of any value have you now? *The same home \$500 per hundred dollars*

21. What are your annual earnings or income and their value? *rent \$240.00*

22. Have you heretofore been paid a pension by the State? *NO*

If so, when and for what cause were you struck from the Roll?
I then to and subscribed before me this the *17th* day of *July* 1910 at *Bullton* Ordinary. *Mrs C J. Holland* County.

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA,

County.

Personally before me comes... who after being duly sworn true answers to make, to the following questions, answers as follows:

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

North County.

County.

I, W. B. McManis Ordinary of said County do certify that, I know Charles S. Halland 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 W. B. McManis the witness who swears to the service of husband, and W. B. McManis who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavit and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns W. B. McManis Returned for Tax is for 1908 \$ 6.11 for 1910 \$ 0.00

Sworn under my hand and official seal of office this 8th day of September

1910

SEAL.

(SEAL.)

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

State of Georgia
Fulton County
I, John Brockman, Ordinary of said County, hereby certify that I know Charles S. Halland. She is a bona fide resident of Fulton County who has been a bona fide resident of Fulton County since no property purchased 1908-1909-1910-1911-1912-1913-1914-1915-1916-1917-1918-1919-1920-1921-1922-1923-1924-1925-1926-1927-1928-1929-1930-1931-1932-1933-1934-1935-1936-1937-1938-1939-1940-1941-1942-1943-1944-1945-1946-1947-1948-1949-1950-1951-1952-1953-1954-1955-1956-1957-1958-1959-1960-1961-1962-1963-1964-1965-1966-1967-1968-1969-1970-1971-1972-1973-1974-1975-1976-1977-1978-1979-1980-1981-1982-1983-1984-1985-1986-1987-1988-1989-1990-1991-1992-1993-1994-1995-1996-1997-1998-1999-2000-2001-2002-2003-2004-2005-2006-2007-2008-2009-2010-2011-2012-2013-2014-2015-2016-2017-2018-2019-2020-2021-2022-2023-2024-2025-2026-2027-2028-2029-2030-2031-2032-2033-2034-2035-2036-2037-2038-2039-2040-2041-2042-2043-2044-2045-2046-2047-2048-2049-2050-2051-2052-2053-2054-2055-2056-2057-2058-2059-2060-2061-2062-2063-2064-2065-2066-2067-2068-2069-2070-2071-2072-2073-2074-2075-2076-2077-2078-2079-2080-2081-2082-2083-2084-2085-2086-2087-2088-2089-2090-2091-2092-2093-2094-2095-2096-2097-2098-2099-2100-2101-2102-2103-2104-2105-2106-2107-2108-2109-2110-2111-2112-2113-2114-2115-2116-2117-2118-2119-2120-2121-2122-2123-2124-2125-2126-2127-2128-2129-2130-2131-2132-2133-2134-2135-2136-2137-2138-2139-2140-2141-2142-2143-2144-2145-2146-2147-2148-2149-2150-2151-2152-2153-2154-2155-2156-2157-2158-2159-2160-2161-2162-2163-2164-2165-2166-2167-2168-2169-2170-2171-2172-2173-2174-2175-2176-2177-2178-2179-2180-2181-2182-2183-2184-2185-2186-2187-2188-2189-2190-2191-2192-2193-2194-2195-2196-2197-2198-2199-2200-2201-2202-2203-2204-2205-2206-2207-2208-2209-2210-2211-2212-2213-2214-2215-2216-2217-2218-2219-2220-2221-2222-2223-2224-2225-2226-2227-2228-2229-2230-2231-2232-2233-2234-2235-2236-2237-2238-2239-2240-2241-2242-2243-2244-2245-2246-2247-2248-2249-2250-2251-2252-2253-2254-2255-2256-2257-2258-2259-2260-2261-2262-2263-2264-2265-2266-2267-2268-2269-2270-2271-2272-2273-2274-2275-2276-2277-2278-2279-2280-2281-2282-2283-2284-2285-2286-2287-2288-2289-2290-2291-2292-2293-2294-2295-2296-2297-2298-2299-2300-2301-2302-2303-2304-2305-2306-2307-2308-2309-2310-2311-2312-2313-2314-2315-2316-2317-2318-2319-2320-2321-2322-2323-2324-2325-2326-2327-2328-2329-2330-2331-2332-2333-2334-2335-2336-2337-2338-2339-2340-2341-2342-2343-2344-2345-2346-2347-2348-2349-2350-2351-2352-2353-2354-2355-2356-2357-2358-2359-2360-2361-2362-2363-2364-2365-2366-2367-2368-2369-2370-2371-2372-2373-2374-2375-2376-2377-2378-2379-2380-2381-2382-2383-2384-2385-2386-2387-2388-2389-2390-2391-2392-2393-2394-2395-2396-2397-2398-2399-2400-2401-2402-2403-2404-2405-2406-2407-2408-2409-2410-2411-2412-2413-2414-2415-2416-2417-2418-2419-2420-2421-2422-2423-2424-2425-2426-2427-2428-2429-2430-2431-2432-2433-2434-2435-2436-2437-2438-2439-2440-2441-2442-2443-2444-2445-2446-2447-2448-2449-2450-2451-2452-2453-2454-2455-2456-2457-2458-2459-2460-2461-2462-2463-2464-2465-2466-2467-2468-2469-2470-2471-2472-2473-2474-2475-2476-2477-2478-2479-2480-2481-2482-2483-2484-2485-2486-2487-2488-2489-2490-2491-2492-2493-2494-2495-2496-2497-2498-2499-2500-2501-2502-2503-2504-2505-2506-2507-2508-2509-2510-2511-2512-2513-2514-2515-2516-2517-2518-2519-2520-2521-2522-2523-2524-2525-2526-2527-2528-2529-2530-2531-2532-2533-2534-2535-2536-2537-2538-2539-2540-2541-2542-2543-2544-2545-2546-2547-2548-2549-2550-2551-2552-2553-2554-2555-2556-2557-2558-2559-2560-2561-2562-2563-2564-2565-2566-2567-2568-2569-2570-2571-2572-2573-2574-2575-2576-2577-2578-2579-2580-2581-2582-2583-2584-2585-2586-2587-2588-2589-2590-2591-2592-2593-2594-2595-2596-2597-2598-2599-2600-2601-2602-2603-2604-2605-2606-2607-2608-2609-2610-2611-2612-2613-2614-2615-2616-2617-2618-2619-2620-2621-2622-2623-2624-2625-2626-2627-2628-2629-2630-2631-2632-2633-2634-2635-2636-2637-2638-2639-2640-2641-2642-2643-2644-2645-2646-2647-2648-2649-2650-2651-2652-2653-2654-2655-2656-2657-2658-2659-2660-2661-2662-2663-2664-2665-2666-2667-2668-2669-2670-2671-2672-2673-2674-2675-2676-2677-2678-2679-2680-2681-2682-2683-2684-2685-2686-2687-2688-2689-2690-2691-2692-2693-2694-2695-2696-2697-2698-2699-2700-2701-2702-2703-2704-2705-2706-2707-2708-2709-2710-2711-2712-2713-2714-2715-2716-2717-2718-2719-2720-2721-2722-2723-2724-2725-2726-2727-2728-2729-2730-2731-2732-2733-2734-2735-2736-2737-2738-2739-2740-2741-2742-2743-2744-2745-2746-2747-2748-2749-2750-2751-2752-2753-2754-2755-2756-2757-2758-2759-2760-2761-2762-2763-2764-2765-2766-2767-2768-2769-2770-2771-2772-2773-2774-2775-2776-2777-2778-2779-2780-2781-2782-2783-2784-2785-2786-2787-2788-2789-2790-2791-2792-2793-2794-2795-2796-2797-2798-2799-2800-2801-2802-2803-2804-2805-2806-2807-2808-2809-2810-2811-2812-2813-2814-2815-2816-2817-2818-2819-2820-2821-2822-2823-2824-2825-2826-2827-2828-2829-2830-2831-2832-2833-2834-2835-2836-2837-2838-2839-2840-2841-2842-2843-2844-2845-2846-2847-2848-2849-2850-2851-2852-2853-2854-2855-2856-2857-2858-2859-2860-2861-2862-2863-2864-2865-2866-2867-2868-2869-2870-2871-2872-2873-2874-2875-2876-2877-2878-2879-2880-2881-2882-2883-2884-2885-2886-2887-2888-2889-2890-2891-2892-2893-2894-2895-2896-2897-2898-2899-2900-2901-2902-2903-2904-2905-2906-2907-2908-2909-2910-2911-2912-2913-2914-2915-2916-2917-2918-2919-2920-2921-2922-2923-2924-2925-2926-2927-2928-2929-2930-2931-2932-2933-2934-2935-2936-2937-2938-2939-2940-2941-2942-2943-2944-2945-2946-2947-2948-2949-2950-2951-2952-2953-2954-2955-2956-2957-2958-2959-2960-2961-2962-2963-2964-2965-2966-2967-2968-2969-2970-2971-2972-2973-2974-2975-2976-2977-2978-2979-2980-2981-2982-2983-2984-2985-2986-2987-2988-2989-2990-2991-2992-2993-2994-2995-2996-2997-2998-2999-3000-3001-3002-3003-3004-3005-3006-3007-3008-3009-3010-3011-3012-3013-3014-3015-3016-3017-3018-3019-3020-3021-3022-3023-3024-3025-3026-3027-3028-3029-3030-3031-3032-3033-3034-3035-3036-3037-3038-3039-3040-3041-3042-3043-3044-3045-3046-3047-3048-3049-3050-3051-3052-3053-3054-3055-3056-3057-3058-3059-3060-3061-3062-3063-3064-3065-3066-3067-3068-3069-3070-3071-3072-3073-3074-3075-3076-3077-3078-3079-3080-3081-3082-3083-3084-3085-3086-3087-3088-3089-3090-3091-3092-3093-3094-3095-3096-3097-3098-3099-3100-3101-3102-3103-3104-3105-3106-3107-3108-3109-3110-3111-3112-3113-3114-3115-3116-3117-3118-3119-3120-3121-3122-3123-3124-3125-3126-3127-3128-3129-3130-3131-3132-3133-3134-3135-3136-3137-3138-3139-3140-3141-3142-3143-3144-3145-3146-3147-3148-3149-3150-3151-3152-3153-3154-3155-3156-3157-3158-3159-3160-3161-3162-3163-3164-3165-3166-3167-3168-3169-3170-3171-3172-3173-3174-3175-3176-3177-3178-3179-3180-3181-3182-3183-3184-3185-3186-3187-3188-3189-3190-3191-3192-3193-3194-3195-3196-3197-3198-3199-3200-3201-3202-3203-3204-3205-3206-3207-3208-3209-3210-3211-3212-3213-3214-3215-3216-3217-3218-3219-3220-3221-3222-3223-3224-3225-3226-3227-3228-3229-3230-3231-3232-3233-3234-3235-3236-3237-3238-3239-3240-3241-3242-3243-3244-3245-3246-3247-3248-3249-3250-3251-3252-3253-3254-3255-3256-3257-3258-3259-3260-3261-3262-3263-3264-3265-3266-3267-3268-3269-3270-3271-3272-3273-3274-3275-3276-3277-3278-3279-3280-3281-3282-3283-3284-3285-3286-3287-3288-3289-3290-3291-3292-3293-3294-3295-3296-3297-3298-3299-3300-3301-3302-3303-3304-3305-3306-3307-3308-3309-3310-3311-3312-3313-3314-3315-3316-3317-3318-3319-3320-3321-3322-3323-3324-3325-3326-3327-3328-3329-3330-3331-3332-3333-3334-3335-3336-3337-3338-3339-3340-3341-3342-3343-3344-3345-3346-3347-3348-3349-3350-3351-3352-3353-3354-3355-3356-3357-3358-3359-3360-3361-3362-3363-3364-3365-3366-3367-3368-3369-3370-3371-3372-3373-3374-3375-3376-3377-3378-3379-3380-3381-3382-3383-3384-3385-3386-3387-3388-3389-3390-3391-3392-3393-3394-3395-3396-3397-3398-3399-3400-3401-3402-3403-3404-3405-3406-3407-3408-3409-3410-3411-3412-3413-3414-3415-3416-3417-3418-3419-3420-3421-3422-3423-3424-3425-3426-3427-3428-3429-3430-3431-3432-3433-3434-3435-3436-3437-3438-3439-3440-3441-3442-3443-3444-3445-3446-3447-3448-3449-3450-3451-3452-3453-3454-3455-3456-3457-3458-3459-3460-3461-3462-3463-3464-3465-3466-3467-3468-3469-3470-3471-3472-3473-3474-3475-3476-3477-3478-3479-3480-3481-3482-3483-3484-3485-3486-3487-3488-3489-3490-3491-3492-3493-3494-3495-3496-3497-3498-3499-3500-3501-3502-3503-3504-3505-3506-3507-3508-3509-3510-3511-3512-3513-3514-3515-3516-3517-3518-3519-3520-3521-3522-3523-3524-3525-3526-3527-3528-3529-3530-3531-3532-3533-3534-3535-3536-3537-3538-3539-3540-3541-3542-3543-3544-3545-3546-3547-3548-3549-3550-3551-3552-3553-3554-3555-3556-3557-3558-3559-3560-3561-3562-3563-3564-3565-3566-3567-3568-3569-3570-3571-3572-3573-3574-3575-3576-3577-3578-3579-3580-3581-3582-3583-3584-3585-3586-3587-3588-3589-3590-3591-3592-3593-3594-3595-3596-3597-3598-3599-3600-3601-3602-3603-3604-3605-3606-3607-3608-3609-3610-3611-3612-3613-3614-3615-3616-3617-3618-3619-3620-3621-3622-3623-3624-3625-3626-3627-3628-3629-3630-3631-3632-3633-3634-3635-3636-3637-3638-3639-3640-3641-3642-3643-3644-3645-3646-3647-3648-3649-3650-3651-3652-3653-3654-3655-3656-3657-3658-3659-3660-3661-3662-3663-3664-3665-3666-3667-3668-3669-3670-3671-3672-3673-3674-3675-3676-3677-3678-3679-3680-3681-3682-3683-3684-3685-3686-3687-3688-3689-3690-3691-3692-3693-3694-3695-3696-3697-3698-3699-3700-3701-3702-3703-3704-3705-3706-3707-3708-3709-3710-3711-3712-3713-3714-3715-3716-3717-3718-3719-3720-3721-3722-3723-3724-3725-3726-3727-3728-3729-3730-3731-3732-3733-3734-3735-3736-3737-3738-3739-3740-3741-3742-3743-3744-3745-3746-3747-3748-3749-3750-3751-3752-3753-3754-3755-3756-3757-3758-3759-3760-3761-3762-3763-3764-3765-3766-3767-3768-3769-3770-3771-3772-3773-3774-3775-3776-3777-3778-3779-3780-3781-3782-3783-3784-3785-3786-3787-3788-3789-3790-3791-3792-3793-3794-3795-3796-3797-3798-3799-3800-3801-3802-3803-3804-3805-3806-3807-3808-3809-3810-3811-3812-3813-3814-3815-3816-3817-3818-3819-3820-3821-3822-3823-3824-3825-3826-3827-3828-3829-3830-3831-3832-3833-3834-3835-3836-3837-3838-3839-3840-3841-3842-3843-3844-3845-3846-3847-3848-3849-3850-3851-3852-3853-3854-3855-3856-3857-3858-3859-3860-3861-3862-3863-3864-3865-3866-3867-3868-3869-3870-3871-3872-3873-3874-3875-3876-3877-3878-3879-3880-3881-3882-3883-3884-3885-3886-3887-3888-3889-3890-3891-3892-3893-3894-3895-3896-3897-3898-3899-3900-3901-3902-3903-3904-3905-3906-3907-3908-3909-3910-3911-3912-3913-3914-3915-3916-3917-3918-3919-3920-3921-3922-3923-3924-3925-3926-3927-3928-3929-3930-3931-3932-3933-3934-3935-3936-3937-3938-3939-3940-3941-3942-3943-3944-3945-3946-3947-3948-3949-3950-3951-3952-3953-3954-3955-3956-3957-3958-3959-3960-3961-3962-3963-3964-3965-3966-3967-3968-3969-3970-3971-3972-3973-3974-3975-3976-3977-3978-3979-3980-3981-3982-3983-3984-3985-3986-3987-3988-3989-3990-3991-3992-3993-3994-3995-3996-3997-3998-3999-4000-4001-4002-4003-4004-4005-4006-4007-4008-4009-4010-4011-4012-4013-4014-4015-4016-4017-4018-4019-4020-4021-4022-4023-4024-4025-4026-4027-4028-4029-4030-4031-4032-4033-4034-4035-4036-4037-4038-4039-4040-4041-4042-4043-4044-4045-4046-4047-4048-4049-4050-4051-4052-4053-4054-4055-4056-4057-4058-4059-4060-4061-4062-4063-4064-4065-4066-4067-4068-4069-4070-4071-4072-4073-4074-4075-4076-4077-4078-4079-4080-4081-4082-4083-4084-4085-4086-4087-4088-4089-4090-4091-4092-4093-4094-4095-4096-4097-4098-4099-4100-4101-4102-4103-4104-4105-4106-4107-4108-4109-4110-4111-4112-4113-4114-4115-4116-4117-4118-4119-4120-4121-4122-4123-4124-4125-4126-4127-4128-4129-4130-4131-4132-4133-4134-4135-4136-4137-4138-4139-4140-4141-4142-4143-4144-4145-4146-4147-4148-4149-4150-4151-4152-4153-4154-4155-4156-4157-4158-4159-4160-4161-4162-4163-4164-4165-4166-4167-4168-4169-4170-4171-4172-4173-4174-4175-4176-4177-4178-4179-4180-4181-4182-4183-4184-4185-4186-4187-4188-4189-4190-41

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

STATE OF GEORGIA,

Paulsen County.

Personally before me comes Charity S. Halland of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act of 1910, and submit testimony to make out the same, true answers makes to the following questions to-wit:

1. What is your name, and where do you reside? Charity S. Halland Altman St. Paul, Minn. 1896

2. How long and since when have you been a continuing resident of the State of Georgia? Since 1896

3. When, where and to whom were you married? Samuel B. Halland 1860

4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) May 1861

5. When and where did the Commands of your husband surrender or discharge from the army? May 4, 1865 at Morrisville, N.C.

Was your husband personally present at the time of the surrender or discharge of this Command? Yes

7. If he was not present state clearly where he was? Yes

8. Where was his command when he left? Yes

9. For what cause did he leave his Command? Yes

10. By whose authority did he leave his Command? Yes

11. For how long was he granted leave of absence? Yes

12. What was his physical condition when he left his Command? Yes

13. What effort did he make to return to his Command? Yes

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

15. Was he captured by the enemy at any time? Yes

16. If so, when and where captured and where held as a prisoner, and when and for what cause released? July 4, 1865 at Morrisville, N.C. Exchanged

17. When and where did your husband die? Dec. 11, 1897, Morrisville, N.C.

18. Were you residing together when he died? Yes

19. If not, how long had you resided apart? Yes

20. What property of any description did you own, hold or control for your use and its cash value Nov. 4, 1908? (State same by items.) 20 Acres of land in Paulsen County, Ga. worth \$1200

21. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None

22. What property of any description of any value have you now? 20 Acres of land

23. Give list and cash value. \$1200

24. What are your annual earnings or income and their value? What must I get from plan \$200

25. Have you heretofore been paid a pension by the State? No

If so, when and for what cause were you struck from the Roll? No

Subscribed and subscribed before me this the 21st day of Sept 1911

Macellum Ordinary,

of Paulsen County.

Widow's Pension

UNDER ACT 1910

County Paulsen

Name Charity S. Halland

Widow of Samuel B. Halland

Paulsen

J. W. LINDSEY,

Commissioner of Pensions

11/8/11

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA,

Hunt County.

Personally before me comes A. J. McMillan 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? A. J. McMillan, in McIntosh Co.
2. How long and since when have you known Shanty F. Holloman applicant? Since 1860
3. How long and since when has she continuously resided in this State? (Give date.) Since 1860

4. When and to whom was she married? Nov. 1860 How do you know? Married at home
5. How long and since when did you know Wm. A. Holloman her husband?

6. When and where did William A. Holloman the husband of Applicant die? Dec. 1877, Hartsville, Ga.

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

8. If not, how long did they live apart before his death? None

9. When, where and in what Company and Regiment did Wm. A. Holloman enlist? at Mobile, Ala. Nov. 1860 in Co. C, 2nd Ala. Inf. Wm. A. Holloman

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

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from Nov. 1860 until surrender

12. When and where did his Command surrender, and was discharged? May 4th 1864

13. Were you personally present when it was surrendered? No If not where were you? and how came you there?

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

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

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

Sworn to and subscribed before me this the 15th day of August 1861 by A. J. McMillan

Ordinary. of Ordinary County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Hunt County.

Personally before me comes Wm. A. Holloman who on oath says that they are freeholders of said County and that they know Shanty F. Holloman of said County and know what property she owned on 4th Nov. 1860, and its cash value to be as set out by Schedule (A) as follows: 20 acres of land \$1200

Personal property \$0
Notes and accounts due \$0
Total \$1200

Schedule (B). We know the property sold or given away since Nov. 4th, 1860, its cash value to be as follows:

Personal property \$0
Money, Notes and Accounts None \$0

Schedule (C). We also know what property she has now in her possession, use and control to-wit:

Acres of land worth \$1200
Horses and Mules \$0
Cows and Hogs \$0
Other Property \$0
Income and Earnings \$0
Total Value of all property and effects \$1200

Sworn and subscribed before me this the 15th day of August 1861 by Wm. A. Holloman Ordinary. Wm. A. Holloman of Ordinary County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Hunt County.

I, A. J. McMillan Ordinary of said County do certify that, I know Shanty F. Holloman the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th Nov., 1860.

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

That the Tax Return Shanty F. Holloman Returned for Tax is for 1860 \$ 510 for 1861 \$ 500

Sworn under my hand and official seal of office this 15th day of August 1861

(SEAL) A. J. McMillan Ordinary, Hunt County.

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

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.

John R. McKinnon Ordinary of said County do certify that, I know Charity Holland 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 _____ who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns of Fulton Co Returned for Tax for 1908 \$ none for 1910 \$ none

Sworn under my hand and official seal of office this 1st day of Aug 1911

SEAL. John R. McKinnon Ordinary, Fulton County

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

ATLANTA GA. Oct. 10 1928, 192

For funeral expenses of Mrs. Charity Holland.

J. AUSTIN DILLON COMPANY

FUNERAL DIRECTORS

502 PRYOR STREET - S. W.

PHONE MAIN 4880

MAIN 4881

PRIVATE ANNUANCE

Sept. 26 1928

Casket
Embalming & Services..
Dress
Steel Vault.
Funeral Notices.
Hearse.

\$ 385.00

Georgia
Fulton County.

Personal appeared before me J. Austin Dillon, who after being sworn says the above account is just, true, due and unpaid and was for the funeral expenses of Mrs. Charity Holland.

J. Austin Dillon
Notary Public (Fulton Co. Ga.)

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 18, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes J. Austin Dillon of said County, who, after being sworn, on oath says that he knew Charity Holland of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Fulton County, in this State, on the 26 day of Sept 1928 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 \$385. per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
Arthur R. Whitaker Ordinary
Fulton County
(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos. H. Jeffries Ordinary of said County, do certify that I personally know J. Austin Dillon, 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 Charity Holland while in life and that this was the same person whose name appears on the Pension Roll of Fulton County, and was said a Pension of 37 Dollars in said County for 1928, 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 19 day of Oct 1928
(Seal of Ordinary) Thos. H. Jeffries Ordinary
Fulton County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid, etc.")
- "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____, who died without leaving sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached thereto 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.

Georgia
Fulton County.

Personal appeared before me J. Austin Dillon, who after being sworn says the above account is just, true, due and unpaid and was for the funeral expenses of Mrs. Charity Holland.

J. Austin Dillon

A. T. Newman
Notary Public (Fulton Co. Ga.)

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

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

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

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

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

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

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

Holland, Charity (Mrs.)
Dillon

For *Fulton* County.

1928

**Application for Pension
Due Deceased Pensioner.**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Thos H. Jeffries Ordinary
For *Mrs. Charity Holland*

Date of Death *Sept 26* 1928

Amount *\$100.00*

Approved and ordered paid *Dec 20 1928*

JOHN W. CLARE,
Commissioner of Pensions.

Ordinary: Fill out above in full and send the 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.

Georgia, Hart County.

Personally appeared before me the undersigned citizens of said county, who, on oath, says that they are personally acquainted with Charity F. Holland, who was a citizen of said County, until recently, but who is a citizen of Fulton County, and that they know of their own knowledge that Charity F. Holland is the widow of William A. Holland and that she has not married again since the death of her former husband, William A. Holland.

Sworn to and subscribed before me, this 12th day of April, 1930.

W. H. Richardson
J. W. Williams
Ordinary of Hart County.

Georgia, Hart County.

To any Minister of the Gospel, Judge, Justice of the Peace, or Judge of the Inferior Court; You are hereby authorized to join Mr. William A. Holland and Miss, C. F. Fulton in the Holy state of Matrimony according to the laws of this state and for so doing this shall be your sufficient License, Given under my hand and official signature this 4th, day of January, 1865.

P. B. Hodges, Ordinary.

I hereby certify that the above named couple were duly joined in Matrimony by me this 5th, day of January 1865.

H. Tyler, M. G.

Georgia Hart County.

I, W. B. McMullan, Ordinary of Hart County do certify that the above is a true and correct copy of the Marriage license of William A. Holland and Miss C. F. Fulton as found on record in this office in book "A" page 330 of records of Marriage, licenses of said County.

This 22th, day of April, 1910.

W. B. McMullan
Ordinary of Hart County Georgia.

STATE OF GEORGIA

COUNTRY

ordinary of said County, do certify

and was on the 4th November 1908, that I also know *John McQuinn* ~~was~~ a bona fide continuing resident citizen of said County

the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavit and that their statements are true.

"On any, such statements are entitled to full faith and credit

(SBAT)

17 day of Dec

Ordinary

County

NOTES: 1. Before the Ordinary shall meet, applicant and the witness in the following words: "You do solemnly swear that you will answer the questions asked you and the witness you shall give to the truth. So help you God." 2. The witness must make to each of the questions asked you and the witness 3. Additional affidavits may be attached if blank spaces are insufficient. 4. All affidavits must be sworn prior to January 1st, 1931, are entitled. 5. Affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by him. 6. Affidavits certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Under Act 1910—as Amended by Act of 1919.

County Fulton
Name Elizabeth C. Holland
Widow of John Holland
Company 14
Regiment 30 Mass.
Approved _____

Approved _____
430-8970
Mr. [unclear]
lost over again
420-4000

J. W. LINDSEY,
Commissioner of Pensions.

Ryrd Printing Co., State Printers, Atlanta

6/23-1920
10-31-1919.

J. Sid Holland
Fulton Co.

Pension Office,
Feb., 18, 1920.

Applicant must ascend and state where was her husband from Feb., 1864. Record accounts for him to this date to the close of the war and how come him to be away and for what cause, accounting for his honorably to end of the war. Then prove all statements to be true by someone that knows they are true.

J. H. Lindsey,

Dom. of Pensioners

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY,

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

Sworn under my hand and official seal of office this 22 day of Oct 1919 (SEAL) T. H. Jeffries Ordinary, Fulton County.

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

Widow's Pension

Under Act 1908-90 Amended by Act of 1919.

County Fulton
Name Elizabeth C. Holland
Widow of Wm. Ely B. Holland
Company K

Residence 30 N. W. 1/2 Sec. 16, T. 12 N., R. 10 E., S. 10
Date of marriage 1908-10-20
Date of death 1908-10-20
Cause of death 1/20-1908

J. W. LINDSEY,
Commissioner of Pensions

Pension Office,
Feb. 18, 1920.

J. S. Holland
Fulton Co.

Applicant must amend and state where was her husband from Feb. 1, 1908; where accounts for him to the date to the close of the war and how came him to be away and for what cause, accounting for his absence to end of the war. Then prove all statements to be true by someone that knows that are true.

J. W. Lindsey
Comm. of Pensions.

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY,

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

1. What is your name, and where do you reside? Elizabeth C. Holland, 411 E. Fair St.
2. How long and since when have you been a continuing resident of the State of Georgia? ALL MY LIFE
3. When, where and to whom were you married? Dec. 16, 1867, Atlanta, Ga., to Wm. Ely B. Holland
4. Have you married since the death of first and soldier husband? No
5. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service). 1861 Carrollton, Miss. Co. K, 36th Miss. Reg. Inf.
6. When and where did the commands of your husband surrender or discharge from the army? Greenboro, N. C., April 1, 1865
7. Was your husband personally present at the time of the surrender or discharge of this command? No
8. If he was not present state clearly where he was? In hospital at Macon, Ga.
9. Where was his command when he left? Kennesaw Mountain, Ga., June 27, 1864
10. a. For what cause did he leave his command? Severely wounded
- b. By whose authority did he leave his command? Commanding officers
- c. For how long was he granted leave of absence? During period of disability
- d. What was his physical condition when he left his command? Severely wounded
- e. What effort did he make to return to his command? Unable on account of wounds
- f. In what way was he prevented from going back to Command? "
- g. Was he captured by the enemy at any time? No
- h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- i. When and where did your first husband die? July 22, 1911, Atlanta, Ga.
- j. Were you residing together when he died? Yes
- k. If not, how long had you resided apart? Never resided apart
- l. Are you now a widow? Yes
- m. Have you or your husband heretofore been paid a pension by the State? No
- n. If so, when and for what cause were you or your husband placed on the roll? Never applied.

Sworn to and subscribed before me this 22 day of Oct, 1919 Mrs. E. C. Holland Ordinary, Fulton County. (SEAL)

Applicant must amend and state where was her husband from Feb. 1864. Several accounts for him to this date to the close of the war and how come him to be away and for what cause. Accounting for him honorably to end of the war. Then prove all statements to be true by someone that knows they are true.

J. W. Lindsay

Sec. of Pensioners

Never applied

Sworn to and subscribed before me this the

21 day of Oct. 1919

Charles Macdonald Ordinary

of Fulton County

(SEAL)

Wm. E. C. Holland

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now Elizabeth C. Holland, who upon oath says: That she is the widow of J. Sid Holland, who was "K", 30th. Miss Reg. of Inf. and served with said Regt from 1861 to June 27, 1864, when he was severely wounded at New Mountain, Ga. and was sent to hospital at ... was never able to rejoin his command. That she has ... to locate some member of his company and regiment and has been unable to do so and now knows of no living member of said company and regiment.

Affiant attaches her to letter received from a deceased member of said company and regiment, said letter having been written to her husband many years before his death, and asks that same be accepted in the nature of proof of the service of her husband in the Confederate Army.

Sworn to and subscribed before me this October 21, 1919.

Charles Macdonald
C. C. ORDINARY FULTON CO., GA.

Wm. E. C. Holland

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes C. W. MANGUM, who upon oath says:

That he knows Mrs. Elizabeth C. Holland and knew her husband, J. Sid Holland, deceased; that the said J. Sid Holland, according to affiant's best recollection and belief, was a member of a Mississippi Regiment and served with said regiment as a Confederate Soldier; that the said J. Sid Holland was generally recognized as a Confederate Veteran and was, for a number of years, Commander of Camp W.H.T. Walker, U.C.V., and held other offices in said Camp.

Affiant further states that he knows of his own personal knowledge that the said J. Sid Holland and the said Mrs. Elizabeth C. Holland lived together as man and wife continuously for many years before the death of said J. Sid Holland in 1911; that the said Mrs. Elizabeth C. Holland has not remarried since the death of her husband and is now his lawful widow.

Sworn to and subscribed before me this October 22, 1919.

William R. Mangum
C. C. ORDINARY FULTON CO., GA.

W. H. Mangum

MARRIAGE LICENSE

State of Georgia--Fulton County.

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized in this manner.

You are hereby authorized and permitted to join in the honorable state of Matrimony

Mr. J. S. Holland

and

Miss E. C. Reid

According to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 19th day of Dec. 1867

Daniel Pittman

L. S.
Ordinary.

I hereby certify that

Mr. J. S. Holland

and

Miss E. C. Reid

were joined together in the HOLY BANS OF MATRIMONY

on the 19th day of Dec. 1867, by me. W. M. Crumley M. G.

State of Georgia,
Fulton County.

ORDINARY'S OFFICE

S. S.

ATLANTA, GA., October 21st 1919

ARTHUR R. MARSH

Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

Mr. J. S. Holland

and Miss E. C. Reid

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.

Arthur R. Marsh

Clerk Court of Ordinary.

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.

Arthur R. Moulton
Clerk Court of Ordinary.

Paul, May 18-61
 Joseph Henry Penn. Recs.
 23. Sup. F. H. Rich, prison
 17/55 (21.2)

Holland, Nathan D.
 On Apr 1924
 Fulton County
 No.

Widow's Pension
 Under Act 1910—as Amended by Act of 1919.

County Fulton
 Name Mrs. Nathan Holland
 Widow of M. D. Holland
 Company U.S. Army, 1st Cavalry
 Regiment 8th
 Approved

J. W. LINDSEY,
 Commissioner of Pensions.
 Byrd Printing Co., State Printer, Atlanta.

NOTES: 1. Before any questions are answered the Ordinary shall examine the returns in the following order:
 a. The return of the applicant for pension.
 b. The return of the applicant for pension.
 c. The return of the applicant for pension.
 d. The return of the applicant for pension.
 e. The return of the applicant for pension.
 f. The return of the applicant for pension.
 g. The return of the applicant for pension.
 h. The return of the applicant for pension.
 i. The return of the applicant for pension.
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 r. The return of the applicant for pension.
 s. The return of the applicant for pension.
 t. The return of the applicant for pension.
 u. The return of the applicant for pension.
 v. The return of the applicant for pension.
 w. The return of the applicant for pension.
 x. The return of the applicant for pension.
 y. The return of the applicant for pension.
 z. The return of the applicant for pension.

STATE OF GEORGIA.
 Ordinary's Certificate.

I, W. D. Spivey County Fulton
 do hereby certify that I know Mrs. Nathan Holland the applicant for pension. She
 is the person she represents herself to be and she is a bona fide, non-resident citizen of said County
 and was on the 4th November 1908, Mar. 1-1908
 the return of the applicant for pension; that she is a bona fide, non-resident citizen of said County and
 was duly sworn before signing the foregoing affidavits and that the same are true and correct.
 Given under my hand and official seal of office this 19th day of April 1924.
 (SEAL) W. D. Spivey Ordinary, Fulton County.

STATE OF GEORGIA,

Ordinary's Certificate

Fulton COUNTY.

I, T. H. J. J. J. Ordinary of said County, do certify that I know Mrs. Hattie L. Holland the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I know the witness who swears to the service of husband; that she is a residents of said County and were duly sworn by her before signing the foregoing affidavits and that they are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 19th day of Oct 1919

(SEAL)

Ordinary.

County.

NOTE: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. No help you did." 2. Additional affidavits may be attached if blank spaces are inserted. 3. Only widows who married prior to January 1st, 1861, are entitled. 4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary. 5. Attach certified copies of marriage licenses if obtainable. If not, prove marriage, by some person or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton
Name Mrs. Hattie L. Holland
Widow of M. D. Holland
Company Birmingham
Regiment 1st
Approved T. H. J. J.

J. W. LINDSEY
Commissioner of Pensions
Bryd Postoffice Co. State Prison, Atlanta.

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name, and where do you reside? Mrs. Hattie L. Holland, 35 Highland Ave., Atlanta
2. How long and since when have you been a continuing resident of the State of Georgia? All my life except 10 months in Birmingham, Ala.
3. When, where and to whom were you married? June 25, 1879, Atlanta, Ga., to M. D. Holland
4. Have you married since the death of first and soldier husband? No
5. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army of Georgia Militia? (State the arms and class of Service). 1861, Rome, Ga., Rome Light Guards, 9th Ga. Reg.
6. When and where did the commands of your husband surrender or discharge from the army? Appomattox Court House, April 9, 1865
7. Was your husband personally present at the time of the surrender or discharge of this command? No
8. If he was not present state clearly where he was? At home, wounded
9. Where was his command when he left to Virginia
10. For what cause did he leave his command? Wounded
11. By whose authority did he leave his command? Commanding officer
12. For how long was he granted leave of absence? During period of disability
13. What was his physical condition when he left his command? Wounded
14. What effort did he make to return to his command? Unable on account of wound
15. In what way was he prevented from going back to Command? No
16. Was he captured by the enemy at any time? No
17. If so, when and where captured and where held as a prisoner, and when and for what cause released?
18. When and where did your first husband die? Nov. 13, 1864, Birmingham, Ala.
19. Were you residing together when he died? Yes
20. If not, how long had you resided apart? Never resided apart
21. Are you now a widow? Yes
22. Have you or your husband heretofore been paid a pension by the State? No
23. If so, when and for what cause were you or your husband placed on the roll? Never applied

Sworn to and subscribed before me this the 20 day of October 1919 Hattie L. Holland Ordinary of Fulton County.
(SEAL)

Holland, Hattie L. (Widow)
Fulton County
No.

Cal. May 18-61
Joseph Henry Hamilton
63 yrs. F. Hamilton
Mar. 7/1861

Personally before me comes James M. Smith who after being duly sworn true answers to make, to the following questions, answers as follows:

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County,

I, _____ Ordinary of said County do certify that, I know _____ the applicant for pension. She is the person she represents herself to be and she is a bonafide 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 _____ who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns _____ Returned for Tax is for 1908 \$ _____ for 1909 \$ _____ Sworn under my hand and official seal of office this _____ day of _____

SEAL

Ordinary.

(SEAL)

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

1. What is your name and where do you reside? *Jas. M. Moon on Rome Ga.*
2. How long and since when have you known *Do not know* applicant?
3. How long and since when has she continuously resided in this State? (Give date.) _____

4. When and to whom was she married? How do you know? _____
 5. How long and since when did you know _____ her husband? *Married Matthew B. Holland of his life*
 6. When, where and in what Company and Regiment did *he* enlist? *in the Rome High Land Company (Ct) 8th Georgia Regiment May 1861*

7. Were you a member of the same Company? *I was*
 8. How long within your personal knowledge did he perform actual military service with his Company and Regiment? *No. Over 7 yrs 1864. At same date & the same*

9. When, where and where did his Command surrender, and was discharged? *Approximately April 9, 1865 from Mississippi*

10. Were you personally present when it was surrendered? *It was not* If not where were you *at Rome Ga* and how came you there? *It was brought by three balls the 1st of the 1864 and had not returned*

11. Was the husband of applicant personally present at surrender? *Do not know* If not where was he? *Do not know* when, where and for what cause did he leave Command? (Give date.) _____

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

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

Sworn to and subscribed before me this the _____ day of _____ 1910 *J. S. Moon Sr*

John C. Bowers Ordinary.

County of *Polk* Georgia

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA, *Polk* County.

Personally before me comes *William W. Wright* who on oath says that they are freeholders of said County and that they know *Nathaniel Strickland*

of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows

Personal property *None* \$ _____

Notes and accounts due \$ _____

Total \$ _____

Schedule (B). We know the property sold or given away since Nov. 1st 1908, its cash value to be as follows:

Personal property *None* \$ _____

Money, Notes and accounts \$ _____

Schedule (C). We also know what property she has now in her possession, use, and control to wit:

Acres of land worth *100* \$ _____

Horses and Mules *100* \$ _____

Cows and Hogs *100* \$ _____

Other property *None* \$ _____

Income and earnings *None* \$ _____

Total Value of all property and effects \$ _____

Sworn to and subscribed before me this the _____ day of _____ 1910 *J. S. Moon Sr*

John C. Bowers Ordinary.

County of *Polk* Georgia

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA, *Polk* County.

Personally before me comes *William W. Wright* who on oath says that they are freeholders of said County and that they know *Nathaniel Strickland*

of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows

Personal property *None* \$ _____

Notes and accounts due \$ _____

Total \$ _____

STATE OF GEORGIA.

COUNTY OF

Personally before the undersigned authority now comes Mrs. Hattie L. Holland, who upon oath says:
That she is the widow of M. B. Holland, who served with the 8th Ga. Reg. from 1861 until the later part of the war; that she was wounded; that she has made every effort to locate the company and regiment who would make affidavit to the service of her husband in the Confederate Army and has been unable to do so and now knows of no living member of said company and regiment.

She attaches hereto the affidavit of J. T. Moore, Sr., now deceased, and asks that same be accepted as proof of the service of her husband in the Confederate Army.

Sworn to and subscribed before me
this October 20, 1919.

Charles H. Mason
C-C ORDINARY FULTON CO., GA.

STATE OF GEORGIA.

COUNTY OF FULTON.

Personally before the undersigned authority now comes MRS. W. M. NICHOLS, who upon oath says:

That she knows Mrs. Hattie L. Holland and knew her husband, M. B. Holland; that she knows of her own personal knowledge that the said Mrs. Hattie L. Holland and the said M. B. Holland lived together as man and wife for many years before the death of the said M. B. Holland, who died Nov. 13, 1884; that the said Mrs. Hattie L. Holland has not remarried since the death of her husband and is now his lawful widow,

Sworn to and subscribed before me
this October 20 1919.

Charles H. Mason
C-C ORDINARY FULTON CO., GA.

N

Atlanta Ga.

Aug. 27 - 1919 -

Capt. Jas. T. Moore.

Rome Ga.

Dear Sir -

Several years ago
I sent you a blank in
applying for a widows
pension, which you very
kindly filled out. At
that time we found the
application void as it did

not come within the marriage
time limit. At the last session
of legislature this date was
changed and I find that we
were married at the time the
law allows our application.

I am writing to ask if I
send blank will you please
fill out for me, so that I may
send in again.

You don't know how much it
will be appreciated.

Very truly yours

Mrs. Walter H. Holland.

935 Highland Ave

Rome, Ga. Sept. 11, 19--

My dear Mrs. Holland: The inclosed
letter which you have written my
grandfather Capt. Jas. I. Moore
came to me, as my grandfather
has been dead over two years

Rome, Ga. Sept. 11, 19-

My dear Mrs. Holland: The inclosed letter which you have written my grandfather Capt. Jas. I. Moore came to me, as my grandfather has been dead over two years.

I would love to be of any assistance to you, as the cause is one near and dear to my heart. I have referred the matter to the Floyd Camp Veterans and they suggest you take up the matter with Atlanta Camp 159. - I think is the number. Hoping this will prove some help, I am

Sincerely,

Miss Bessie A. Moore
40 Rome News

MARRIAGE LICENSE

State of Georgia--Fulton County.

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to Solemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony M. D. Halland and Hattie Lester

According to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 25 day of June 1899
Samuel C. Patton L. J.
Ordinary.

I hereby certify that M. D. Halland and Hattie Lester

were joined together in the HOLY BANS OF MATRIMONY

on the 26 day of June 1899, by me. M. D. Halland

State of Georgia,
Fulton County.

ORDINARY'S OFFICE

ATLANTA, GA., Oct 17 1919

Samuel C. Patton Clerk of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

M. D. Halland and Hattie Lester as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day and year aforesaid.

Samuel C. Patton
Clerk Court of Ordinary.

and *Walter Lester*
as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.

Walter Lester
Clerk Court of Ordinary.

No. _____

INDIGENT PENSION.

1900

Name Edith H. H. H.

County Richmond

Co. H-30-Mass Regt.

Approved 100

JOHN W. LINDBERGH
Commissioner of Pensions

WARRANT HANDED TO

Ordinary will verify names of Applicants, Company
and Regiments and send to Adjutant General.

One of the names of the Applicants is

Marjor

STATE OF GEORGIA.

POWER OF ATTORNEY.

CONSENT

to certify and verify the names of the persons named and signed here by the said

Persons of said and only the

Respect to persons of

[C. H.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

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

Witness my hand and seal, this _____ day of _____ 1900.

[L. S.]

Executed in presence of

INDIGENT PENSION.

1900.

JOHN W. LINNEY

WARRANT HANDLED TO

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

I, Sullivan of said State and County, desiring to avail myself of the Pension Act (Section 1284, Code), hereby submit the proofs, and after being duly sworn true answers to make to the following questions, depose and swear as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.)

Sullivan Wm. East Point

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

Over about 45 years

3. When and where were you born? Georgia, Chambers Co. 1842-

4. Where and where and at what company and regiment did you enlist or serve?

U.S. 30th Mississippi Regt. - Civil

5. How long did you remain in such company and regiment?

From 20th day of May till Surrender

6. When and where was your company and regiment surrendered and discharged?

Chattanooga, Tenn. Gordon. April 26th 1865-

7. Were you present with your company and regiment when it was surrendered? No

8. If not present, state briefly and clearly when you were, when you left your command, for what cause and by whose authority? Left my command of Chambers Co. 1864-

Wounded by artillery of Confederates

9. How much can you earn (gross) per annum by your own exertions or labor? Very little

10. What has been your occupation since 1865? None, farmer and blacksmith

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

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

12. If upon the first ground, state how long you have been in such condition that you could not earn your support.

If upon the second, give a full and complete history of the infirmity and its extent.

If upon the third, state whether you are totally blind and when and where you lost your sight.

First condition for a number of years. I am

unable to perform any work sufficient to earn support

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

14. What property, real or personal, did you possess in 1861, 1862, 1863, 1864, 1865, 1866 and 1867, and what disposition, if any, by sale or gift, have you made of same? None

None but to dispose of.

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

Sullivan Co. None

16. How were you supported during the years 1861, 1862, 1863, 1864, 1865, 1866 and 1867?

By my family

17. How much did you support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About 100 dollars every year

18. What was your employment during 1861, 1862, 1863, 1864, 1865, 1866 and 1867? What pay did you receive in each year? None

19. Have you a family? If so, who composes such family? Give their means of support. Have they a household, or other property? Their age and how employed? I have wife and 3 children

My wife is a home

20. Are you receiving any pension? If so, what amount and for what disability? None

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

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

Subscribed and subscribed before me this 1st day of _____ 1900.

Sullivan Wm. East Point

John W. Linney Notary

Warrant Handled To

John W. Linney Notary

Warrant Handled To

John W. Linney Notary

Warrant Handled To

John W. Linney Notary

INDIGENT P
1900
JOHN W. ALLEN
WARRANT MAN
7/1/01

11. Have you ever made an application for position before? No
12. How many applications have you ever made and under what time? None
Served in and discharged before on this day 25 April 1900
John W. Allen Ordinary
Franklin County



QUESTIONS FOR WITNESS

STATE OF Georgia
Franklin County

as a witness in support of the application of John W. Allen for position under section 1254, Code, and after being duly sworn this witness is sworn to make the following statement, answers and answers as follows:

1. What is your name and where do you reside? N. C. Rattner, Dallas Texas
2. Are you acquainted with John W. Allen the applicant? if so, how long have you known him? Since 1861
3. Where does he reside, and how long and since what has he been a resident of this State? State of Georgia - City of Atlanta, since he has been
4. When, where and in what company did he enlist, and how do you know? About 1862 - Breckinridge Mass. Company 2d Mass. Cavalry 1st Regt.
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? From 1862 to Sep of 1865
7. When and where was his command surrendered? Breunburg Mass. Apr 26 - 1865

8. Were you present when it surrendered? Yes
 9. Was applicant present? Don't remember
 10. If he was not present, where was he? Don't remember
- When did he leave his company? Don't remember For what cause? Don't remember
By what authority he left? Don't remember How do you know about this?
By seeing him in Company 2d Mass. Cavalry

11. What property, effects or income has the applicant? (Give your means of knowledge.) Don't know
12. What property, effects or income did the applicant possess in 1891, 1893, 1895, 1897, 1899, 1900 and 1901? Don't know
13. Has he conveyed away any of his property in the last four years? If yes, what was it, and to whom? Don't know
14. What is the applicant's occupation and physical condition? Don't know
15. Is the applicant unable to support himself by labor of any sort? If yes, to what? Don't know
16. How long is he married during the years 1891, 1893, 1895, 1897, 1899, 1900 and 1901? Don't know
17. What portion of his support for these four years has been derived from his wife's earnings? Don't know
18. How much of the support of the applicant is derived from his wife's earnings? Don't know

AFFIDAVIT OF PHYSICIANS

STATE OF GEORGIA
Franklin County

Ordinary and Justice J. P. Hall and M. C. Watson
Both known to me as reputable physicians of said County, who being personally sworn, say on oath that they have examined carefully

John W. Allen applicant for position under Section 1254, Code, and after such personal examination say that his general physical condition is as follows: Physically unable to perform military duty

and that we have no reason to doubt the truth of the above.
Served in and discharged before on this day 25 April 1900
John W. Allen Ordinary

ORDINARY'S CERTIFICATE

STATE OF GEORGIA
Franklin County

Ordinary, in and for said County, hereby certify that the applicant John W. Allen resides in said County, and has been a bona fide resident of this State since the 25 day of April 1899 and that the witness, viz:

John W. Allen and that their statements are entitled to full faith and credit.
I further certify that before answering the foregoing questions the applicant and both witnesses took the oath having subscribed, and that the full text of the affidavit was read to the applicant and witnesses when sworn was signed.

I further certify that the tax listed or County shows that applicant returned for taxation in his name in 1901 None Dollars of property, and in 1902 None Dollars of property; in 1903 None Dollars of property; in 1904 None Dollars of property; in 1905 None Dollars of property; in 1906 None Dollars of property; in 1907 None Dollars of property.



ST. LOUIS SOUTHWESTERN RAILWAY COMPANY OF TEXAS.

OFFICE OF COMMERCIAL AGENT.
320 MAIN STREET.

J. H. WADLEIGH,
Commercial Agent.
F. O. WELLS,
Traveling Freight Agent.
D. L. PALMER,
Soliciting Freight Agent.

DALLAS, TEXAS, Jan 27 1903.

My Dear old Friend & Comrad
Atlanta

As I have just learned through Chief T. H. Ball that you was living in Atlanta. So much more you I thought you was dead long ago. Joe Hough has just moved to Dallas and in speaking of the old boys I spoke of you and he said that you was living in Atlanta last heard of so. Since caused me to see if I could find out if you was yet this side of the rock. Well did you don't know I am glad I was when I heard you was living as I love so often spoke of you and your remarks while with old Co. K. I never will forget you; when at the Memphis reunion I saw most of the remnant of our grand old brig and remembering 24 and since have gotten the names now living near 100 & have the roll of the brig by Co. K. Regt now living; old Co. K. after the Memphis reunion and Ed and John Reynolds went down Mississippi visiting the old Capt. Ray & his brother-in-law meeting many of the old comrades and returning back by Memphis called on Mrs. Ross Sen. Halthred's daughter and asking her if she could find out a flag and send one to Dallas. Reunion and have presented to the old command which I



ST. LOUIS SOUTHWESTERN RAILWAY COMPANY OF TEXAS.

OFFICE OF COMMERCIAL AGENT.
320 MAIN STREET.

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Commercial Agent.
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Traveling Freight Agent.
D. L. PALMER,
Soliciting Freight Agent.

DALLAS, TEXAS.

did at Dallas Reunion by Miss Marian Buchanan left Buchanan; daughter of the 24. and expected by old Ed & his Street of Black Hawk Miss the 2 branches is ground so becoming and fitting. I am going to have the 2 branches made in book form with the restra of the old command now living; I saw Ed at St. Louis at Memphis and Dallas reunion also. Custodian of the flag it is the finest flag you ever saw; and every one says the same; so you must be sure and be on hand at New Orleans if you fail to answer to roll call I will send a detail of you; so did you must come and come as all the old remnant of our grand old brig will be there so you will meet some that you thought was dead. where did you leave the command; the first time I had met old Joe Hough since he was was at Dallas Reunion only after reunion since has moved to Dallas so when I saw him the other day we had it up and down for half day. Well did I believe I have wrote you I can think of at present write me a good long letter and whether you will be at New Orleans or not. May 14 old Ed Hoge is still living in old Oxford Miss and many other that you will be surprised when you see the roll of now living. I am sure I will

Marietta, Ga. June _____ 1920.

STATE OF GEORGIA

COUNTY OF COBB.

Personally before the undersigned authority now comes Mrs. Emma H. Ruff who upon oath says;

That she is a sister of J. Sid Holland who was a member of Company "K" 30th. Mississippi Regiment of Infantry and served the said Company and Regiment from 1861 to June 27th. 1864, when he was severely wounded at Kennesaw Mountain, Georgia, and was sent to Hospital at Macon, Ga. and who was later moved to his home at Griffin, Ga., on account of his severe wounds he was never able to rejoin his command.

Sworn to and Subscribed, before

me This June 14th, 1920

Mrs Emma H Ruff
_____ Seal.

J. M. Gann
Ordinary Cobb County Ga.

Georgia Cobb County:

I J. M. Gann, Ordinary of said County,

Certify that Mrs. Emma H. Ruff, is a Citizen of said County, well known to me, and that her statements are entitled to full faith and Credit. In witness thereof I have hereunto signed my name, Officially, and placed the seal of my Office.

J. M. Gann
Ordinary Cobb County Ga.

to me, and that her statements are entitled to full faith and credit.
In witness thereof I have hereunto signed my name, Officially, and
placed the seal of my Office.

J. M. Gamm
Ordinary, Cobb County Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY, }

herby authorize

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

at

by

Witness my hand and seal, this _____ day of _____, 1905.

[L. S.]

Executed in the presence of _____

Hollenshead, P. V.
Fulton County

CODR SECTION 1204.

(FOR THOSE ALREADY ENROLLED.)

No. *42*

INDIGENT
SOLDIER'S PENSION
1905.

Name *P. V. Hollenshead*

County *Fulton*

Co. *I* Regiment *22*

WARRANT ISSUED

118 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1905.

[L. S.]

Executed in the presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1906.

[L. S.]

Executed in the presence of _____

Hollenshed, P. V.
Fulton County
CROSS SECTION 1254.
(FOR THOSE ALREADY EMPLOYED.)
No. 42

INDIGENT
SOLDIER'S PENSION
1905.

Name *P. V. Hollenshed*
County *Fulton*
Co. *I* Regiment *22*

WARRANT ISSUED

1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. J. R.

no date

Hollenshed, P. V.
Fulton Co.

CROSS SECTION 1254.
(FOR THOSE ALREADY EMPLOYED.)

No. 130

INDIGENT
SOLDIER'S PENSION
1906.

Name *P. V. Hollenshed*
County *Fulton*
Co. *I* Regiment *22*

WARRANT ISSUED

1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. J. R.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton.

County.

Personally appears P. V. Hollenshead of Fulton.

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 18th 18 ; that he is 62 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 4 yrs in Company 9 of 22nd Regiment of Ga; that his physical condition is as follows:

age & poverty

that his property consists of the following items:

of the value of

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Fulton County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the day of JAN 2, 1905, 1905.

Ordinary.

STATE OF GEORGIA.

Fulton.

County.

I, P. V. Hollenshead Ordinary of said County,

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

Given under my official signature and seal, this JAN 2 1905 day of 1905.

Ordinary

Fulton.

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton.

County.

Personally appears P. V. Hollenshead of Fulton.

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 all day of his life 18 ; that he is 63 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 4 yrs in Company 22nd of Gath Regiment of Georgia Volunteers; that his physical condition is as follows: crippled with rheumatism

that his property consists of the following items: no property

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 Fulton County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the day of JAN 1 1905, 1905.

Ordinary.

State of Georgia,

Fulton.

County.

I, P. V. Hollenshead Ordinary of said County,

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

Given under my official signature and seal, this JAN 1 1905 day of 1905.

Ordinary

Fulton.

County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

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

by _____
Witness my hand and seal, this _____ day of _____, 1907.

[L. S.]

Executed in presence of _____

Hollenshead, P. W.
Fulton Co.

Class Service 1864.
(FOR THESE ALREADY ENROLLED)

No. 153

INDIGENT
SOLDIER'S PENSION
1907.

Name *P. W. Hollenshead*

County

Co. I Regiment *22d*

See record!
WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

284
Chas. W. H. _____, FULTON COUNTY, GEORGIA.

2-20-07

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears P. V. Hollensted of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen

and resident of said County and State, and has resided in said State continuously ever since the 1st day of 1848, that he is 68 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 4 yrs in Company 2, of 7th Regiment of Ga Volts; that his physical condition is as follows:

ability
in record present

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 10th day of Jan, 1907. P. V. Hollensted

John R. Wilkinson Ordinary.

State of Georgia,

Fulton County.

I, John R. Wilkinson Ordinary of said County,

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

Given under my official signature and seal this 10th day of JAN, 1907.

John R. Wilkinson

Ordinary County.



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

do certify that I am well acquainted with P. V. Hollensted 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 JAN 2 1907.

John C. Tolson

Ordinary _____ County.

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

No. 246

Forre & Davies Co., Printers, Atlanta.

Georgia, Bob County.

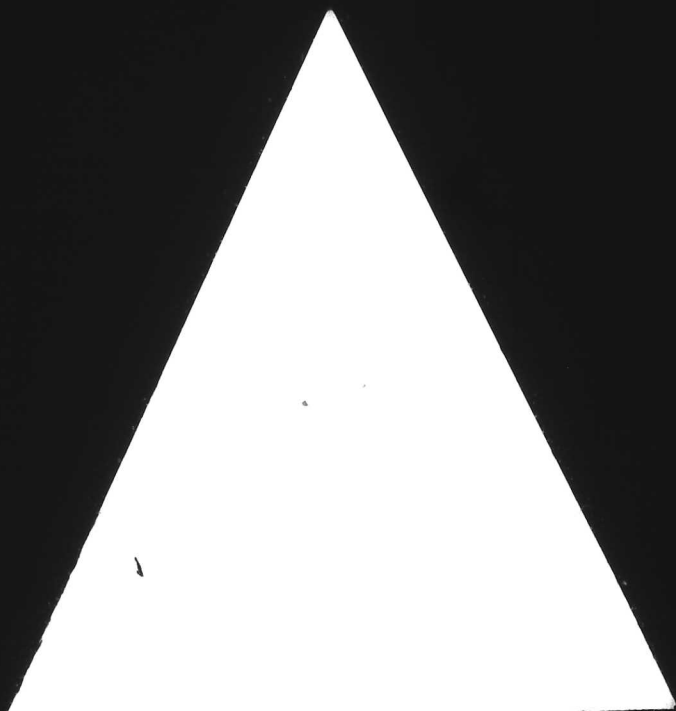
I, the undersigned do certify that P. V. Hollensted now of the
County Hulton is the same person who as
an Indigent
pensioner was on the pension rolls of this county, and has been allowed a pension
for 1905, and the bearer is same person draw a pension of _____ dollars

Given under my hand and official seal of office January 9th 1905

[SEAL]

[L. S.]

John C. Tolson
Ordinary



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

_____ hereby authorize

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

at _____

by _____ day of _____ 1907.

Executed in presence of

[L. S.]

Halliday, J. C.
Fulton Co

ISSUED JANUARY 1894.
(FOR THOSE ALREADY ENROLLED)

31 March 22 1916

INDIGENT SOLDIER'S PENSION 1907.

Name *J. C. Halliday*
County *Fulton*
Co. *St.* Regiment *48th Ga*

WARRANT ISSUED

46 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

466
Gen. W. H. HARRIS, State Printer, ATLANTA.

No date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County,

Personally appears J. A. Holliday of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18____; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of _____ in Company No. of 48th Regiment of Ga.; that his physical condition is as follows: Age & poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the _____ day of JAN 2- 1907. J. A. Holliday
John R. Wilkinson Ordinary.

State of Georgia,

Fulton County,

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with J. A. Holliday the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 2- 1907.

John R. Wilkinson
Ordinary Fulton County.



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

do certify that I am well acquainted with J. C. Halliday
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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. 2- 1907.

John R. Wilkinson
Ordinary Fulton County.

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



GEORGIA, Dekalb County.

I, the undersigned, do certify that J. A. Holliday
now Indigent Pensioner of this county, is on the Pension roll and draws
a pension of Sixty Dollars for 1906. The bearer is the same man
of H Company 48th Id Regiment, who enlisted on _____ day of _____
1867, and was discharged on the _____ day of _____ 186____, was granted a
pension \$ 60.00 for Age & Poverty

Proven by R. J. J. J. as witnesses.

Given under my hand and official seal this

the 8 day of January 1907

James R. George
Ordinary's G. S.

(SEAL)

POWER OF ATTORNEY, STATE OF GEORGIA.

County, *Fulton* Know all Men by these Presents, That I, *Mrs. Nancy Holliday*

of *Fulton County, my con-*
of *Fulton County, Georgia*

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

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

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

DIRECTIONS.

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



Holliday, Nancy (Mrs)
Fulton County
1891.

No. *3703*

Widows' Pension

PAID TO

Mrs. Nancy Holliday
Fulton COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Gen. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

Fulton

County.

Know all Men by these Presents, That I,

Mrs. Nancy Holliday

of Fulton County

do hereby appoint W. M. Holliday, my son,

of Fulton County, Georgia

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

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

Executed in the presence of us:

[L. 8.]

DIRECTIONS.

If allowed, send amount by

me at _____

and oblige,

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of Fulton

In person came before me, the undersigned Ordinary

in and for the County of Fulton

Mrs. Nancy Holliday, who being sworn according to law, says under oath that she is the widow of Edward Bruce Holliday, who was a soldier in the service of the Confederate States, and served as a member of Company B, of the

24th Regiment of Georgia Volunteers; that he enlisted in said service on or about the 17th day of May, 1862, and was in the Confederate Army up to last part of Sept. 1862. That while in the

Army, he was on the _____ day of _____ 1862, (See Note No. 1)

That he died in the army of sickness or disease contracted in the service, in the latter part of September, 1862

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the 1st day of November, 1857, and that she has resided in Georgia continuously since the about 1858; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this the 17th day of Sept., 1891.

W. M. Holliday
Ordinary.

Nancy Holliday
Widow

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.

Warrant Issued

\$100.00.

W. M. Holliday

Widow's Pension

AND TO

W. M. Holliday

Widow's Pension

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1891.

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of Jackson } In person came before me, the undersigned Ordinary
Benjamin C. Vols } in and for said County, witnesses H. D. Bennett
R. M. Wilson } (each known to said Attesting Officer as truthful,
and Nancy Arday } reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
Mrs. Nancy Arday } of the County of Bull
State of Georgia, is the widow of David C. Holiday, who was a soldier in
Company E of the 34 Regiment of Georgia Volunteers.
That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the 17 day of May 1862. That while in said service, or by
reason of said service in the Army, he lost his life as follows:

He died at a private home near Frankfort, Ky
about last Sept 1862 from sickness

One of the witnesses to his death was the Captain
of the 34th Company, and knew David was entitled to him
has having him as that David was never been any more
Then witnesses were also members of same Company with
him and know he was entitled to having him as that
he and was never heard from after that.

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

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

H. D. Bennett
Ordinary.
Jackson Co Ga

J. A. T. Bennett
Dr. J. J. Vols
R. M. Wilson

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

Form No. 3.

STATE OF GEORGIA,

County of Bull

I, M. L. Calhoun Ordinary
in and for said County of Bull

State of Georgia, hereby certify that I am acquainted with Mrs. Nancy Holiday
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 witnesses to read or hear read the proofs they signed.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
17 day of Sept 1891.

SEAL

M. L. Calhoun
Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

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

No widow is entitled unless she was the wife of the soldier during the war, and has never
remarried.

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

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

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

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

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

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

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

By order of the Governor.

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

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

Form No. 8.

STATE OF GEORGIA, County of WILTON
 I, W. L. GALHOUN Ordinary in and for said County of
WILTON State of Georgia, hereby certify that I am acquainted with Mrs.
Nancy Holliday 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
David Reese Holliday deceased, and as such has heretofore been allowed a
 pension for the year ending February 15th 1892.
 In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
31st day of January 1893.
W. L. Galhoun Ordinary.

POWER OF ATTORNEY.

Form No. 8.

STATE OF GEORGIA, Fulton County.
 Know all Men by these Presents, That I, Nancy Holliday
 of Fulton
 County, in said State, do hereby appoint
 of David Reese Holliday my true and lawful attorney in fact, for
 me and in my name, to receive and receipt for whatever amount of money I may be entitled to
 from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affi-
 davit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be
 issued by the Governor, or for any sum of money which may be coming to me for the reason
 aforesaid.
 In Witness Whereof, I have hereunto set my hand and seal, this first
 day of February 1893.

Executed in the presence of as:
J. H. Caldwell
J. M. B. Caldwell

DIRECTIONS.

Send amount by N. W. Holliday to
 me at West End Ga and oblige

Nancy Holliday

Widow's Pension,
 for year ending February 15th, 1892.
 — PAID TO —
Nancy Holliday
 — OF —
WILTON COUNTY.
 Warrant Issued
 AND HANDED TO
Applicant
 1893

FOR THESE HEREFORE PAID.
1893
Feb 19 1893
210. 41.31
W. L. Galhoun
Ordinary

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally comes Mrs.

Sammy Holliday

who being sworn, says on oath, that she is a bona fide resident of said County of
FULTON State of Georgia, and that she has resided in said State

continuously ever since about 1846 That she is the Widow of
David Reese Holliday who was a Soldier in Company
C of the 34th Regiment of Georgia

Volunteers, that he enlisted in said Regiment on or about the month of May
1862 and served in the Army up to last part of Sept 1862 That he lost his
 life on the _____ day of September 1862. (State here

full particulars of the husband's death, when, where and from what cause.) (That
he died from sickness while in the
Army near Frankfort Kentucky

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 1847; 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

31st day of January 1893.W. C. Calhoun Ordinary.

Sammy Holliday
Sub
 Post-office Frankfort Ky

in the year 1882; 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

21st day of January, 1893.

W. B. Calhoun Ordinary.

for
Wm. H. Calhoun
Post-office *Wm. H. Calhoun*

POWER OF ATTORNEY.

STATE OF GEORGIA.

CERTIFICATE

I, _____, hereby authorize

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

Witness my hand and seal this _____ day of _____

at _____

by _____

Executed in presence of _____

190 _____

[SEAL]

Hallingsworth, E. M. M.
Fulton Co.
P. K. Lee, Clerk

ACT DEC. 16, 1901.

No. _____

WIDOW'S PENSION,

190 _____

Mrs. *E. M. Hallingsworth*

County of *Fulton*

Widow of *E. M. Hallingsworth*

Warrant issued _____ 190 _____

and handed to _____

J. W. LINDSEY,
Commissioner of Pensions.

Geo. W. Harrison, State Printer.

9/24/03

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY,

I, _____, hereby authorize

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

_____ at _____ by _____

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

Executed in presence of _____

[SEAL]

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Personally came Mrs.

COUNTY OF Fulton

widow of W. H. HOLLINGSWORTH

Newton

State of Ga

18th day of July

1849

day of Feb

1903

At the time of his death he was a resident of Fulton

County, in said State of

Georgia, and was on the Indigent

pension roll of the State of Georgia, having been allowed

a pension of \$ 60.00 per annum on account of being a soldier in Company B

18th Regiment, Ga

Volunteers or State Ga

What affliction have you and how does it effect you? old age not able to

work

What have you been doing to earn a support since 1st of January, 1900? Nothing

What property or effects had you on 1st January, 1900? Nothing

What have you acquired since, and what income have you now? Nothing

What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose?

None

Deponent further says that she is now a resident of Fulton

County and has

continuously resided in the State of Georgia since the _____ day of Feb

1834

She applies for the pension provided by Act of the General Assembly, approved December 18, 1901.

Sworn to and subscribed before me this 17th day of August 1903

by me Hollingsworth John R. Wixom

Ordinary of Fulton County.

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

No.

WIDOW'S PENSION,

190

Mrs. E. M. Hollingsworth

County of Fulton

Widow of W. H. Hollingsworth

Warrant issued

and handed to

190

J. W. LINDSEY,

Commissioner of Pensions.

Geo. W. Harrison, State Printer

9/24/03

Hollingsworth to E. M. Mrs.
Fulton Co
W. H. Holl

ACT DEC. 18, 1901

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, } Personally came Joseph Hollingsworth
COUNTY OF Fulton } J M Butler and
knows me to be reputable and truthful person who says
on oath that from his own personal knowledge Mrs. J M Hollingsworth
who made the foregoing affidavit is the widow of J M Hollingsworth
who died in Fulton County and State of Georgia on the
4th day of July 1903, and that she has not since married, that she became his
wife on the 18th day of July 1888, and so remained up to the time of his death,
and that she has resided in this State continuously since the 18th day of July 1888,
With what affliction does she suffer? Old age & rheumatism
What property or income had she on 1st January, 1900? Nothing
What has she in her possession and control now? Nothing
How was she supported in 1900 and 1901? By her children
I have no personal interest in the pension asked for Joseph Hollingsworth
Sworn to and subscribed before me this 17th day of August 1903
John R Wilkinson
Ordinary Fulton County, Georgia.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA, } Personally came before me
COUNTY OF Fulton } J O Bassor M D
and J O Carmichael M D, both of whom are known to me to be reputable
physicians, who say on oath that they personally know Mrs J M Hollingsworth
mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her
earning a support) Old age and Feeble. Not able to work
Sworn to and subscribed before me this 2nd day of September 1903
J O Bassor M D John R Wilkinson
J O Carmichael M D
Ordinary of Fulton County.

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

STATE OF GEORGIA, } I, John R Wilkinson Ordinary,
COUNTY OF Fulton } in and for said County of Fulton
State of Georgia, hereby certify that I am acquainted with Mrs. J M Hollingsworth
the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me
by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia continuously
since the 18th day of July 1888, and has not lived out of the
State since that date. I also certify that the witnesses, to-wit: Joseph Hollingsworth
J M Butler and John R Wilkinson, whose testimony she
presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith and credit as such,
and that the full text of the affidavit was read to and understood by them before same was signed. I am fully
satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses to read or hear
read the proofs they sign.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 24
day of Sept 1903
John R Wilkinson
Ordinary.

NOTES.

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

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

Affidavits must be made in presence of the Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Putton COUNTY.

I, EM Hollingsworth hereby authorize
AMN Hollingsworth of Atlanta Ga
to receive and receipt for the pension paid hereon, and request that he remit same to
me by check at Atlanta Ga

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

Executed in presence of
E. A. Dillingham NT
Hutton Lee Jr

Mr. C. V. W. W. W. W. W.

Fulton.

County,

Widow of

Co. B 18-74

JOHN W. LINDSEY.

Commissioner of Pensions.

WARRANT ISSUED

1/22 2, 1904.

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Am. Ind. 10

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I, _____, hereby authorize _____ of _____

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

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

[L. S.]

Executed in presence of

Hollingsworth, E. M. Esq.
To Those ~~Acetone~~ Society

1905.

No. 122

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1905.

PAID TO

Mrs C. M. Hollingsworth

OF

Fulton. . . . County,

Widow of G. H. Hollingsworth
Co. B. 18th Ca. Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/20 1905

AND HANDED TO

This Publisher Printing and Publishing Co., ATLANTA
 One W. Peachtree Street, S.E. 30303
 Tel. 404-525-1111

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

E. M. Hollingsworth

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

Fulton, State of Georgia, and that she has RESIDED in said State

continuously ever since 1854

That she is the Widow of

E. M. Hollingsworth

who was a soldier in Company

B. of the 18th

Regiment of Ga

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

186 and served in the Army up to

186

That he died

on the 14th day of Feb

1903

Indigent

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 49 18-July

I have been allowed an Indigent pension as a resident of

Fulton.

County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this JAN 22 1904 day of JAN 22 1904

Post Office

E. M. Hollingsworth

State of Georgia

Fulton County.

I, John P. Wilkinson

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

day of 18 34

Given under my official signature and seal, this JAN 22 1904 day of JAN 22 1904 1904.

Official Seal

John P. Wilkinson
Ordinary of Fulton County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

E. M. Hollingsworth

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

Fulton, State of Georgia, and that she has RESIDED in said State

continuously ever since all her life

That she is the Widow of

E. M. Hollingsworth

who was a soldier in Company

B. of the 18th

Regiment of Georgia

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

186 and served in the Army up to

Blue War

186

That he died on

the 14th day of Feb

1903

(Indigent Pensioner)

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 Fulton.

County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905

Sworn to and subscribed before me,

this JAN 22 1905 day of JAN 22 1905

Post Office

E. M. Hollingsworth

State of Georgia

Fulton County.

I, John P. Wilkinson

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

day of 18

Given under my official signature and seal, this JAN 22 1905 day of JAN 22 1905 1905.

Official Seal

John P. Wilkinson
Ordinary of Fulton County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ }
COUNTY.

I, _____, 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 _____ 1906.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ }
COUNTY.

I, _____, hereby authorize

_____ of _____

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

_____ at _____

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

day of _____ 1907.

[L. S.]

Executed in presence of _____

Hallingsworth, E. M. Jr.
Fulton County
To Those Herebefore

1906.

No. 138

INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1906.

PAID TO
Mrs. M. Hallingsworth

Fulton of *Fulton* County,
Widow of E. M. Hallingsworth
Co. A, 15th Regt.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
419 1906.

AND HANDLED TO
[Signature]

THE FAVORITE PRINTING AND PUBLISHING CO., ATLANTA, GA.

Hallingsworth, E. M. Jr.
Fulton Co.

To Those Herebefore Paid.

1907.

No. 133

INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1907.

PAID TO
Mrs. M. Hallingsworth

Fulton of *Fulton* County,
Widow of E. M. Hallingsworth
Co. A, 15th Regt.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
419 1907.

AND HANDLED TO
[Signature]

THE FAVORITE PRINTING AND PUBLISHING CO., ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES Mrs.

E. M. HollingsworthFulton.

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

1830

That she is the Widow of

G. W. Hollingsworth

who was a soldier in Company

of the

18th

Regiment of

Cal.

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

1861, and served in the Army up to1865

That he died on

the

day of

Aug 3(Indigent Pensioner)

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1849

I have been allowed an Indigent pension as a resident of

Fulton.

County, under Act 1900, for the year 1900, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me

this day of JAN 1 1906 1906.E. M. Hollingsworth

Post Office

State of Georgia,

Fulton.

County.

Ordinary of said County, certify that I am well

acquainted with Mrs. E. M. Hollingsworth 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 1830

Given under my official signature and seal, this

day of JAN 1 1906 1906.

Official Seal

John R. Wilkinson

Ordinary of

Fulton.

County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

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

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Fulton.

County, under Act 1900, for the year 1900, and now apply for the pension provided by law for the year ending December 31, 1907.

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this day of JAN 2 1907.John R. Wilkinson, Ordinary.

Post Office

State of Georgia,

Fulton.

County.

Ordinary of said County, certify that I am well

acquainted with Mrs. E. M. Hollingsworth 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 1830

Given under my official signature and seal, this

day of JAN 2 1907.

Official Seal

John R. Wilkinson

Ordinary of

Fulton.

County.

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

Georgia, To any Minister of the Gospel,
Fulton County, I, Judge, Justice of the Inferior
Court, or Justice of the Peace.

You are hereby
authorized to join George W. Hallingworth
and Tennessee Knight in the Holy State of Mat-
rimony, according to the Constitution and
Laws of this State, and for so doing, this
shall be your sufficient license.

Given under my hand and seal, this
16th day of July 1849.

Wm D Luckie, C.C. (78)

Georgia,
Fulton County, I certify that George
W. Hallingworth and
Tennessee Knight were duly joined in
Matrimony by me this 18th day of July 1849.
Joseph B. Stevens,
Minister of the Gospel.

Recorded Sept 5th 1903.

Geo B Davis, Clerk of Ct.
Circuit Clerk of Ordinary.

Georgia Office of Ordinary of
Knox County Ga. said County.

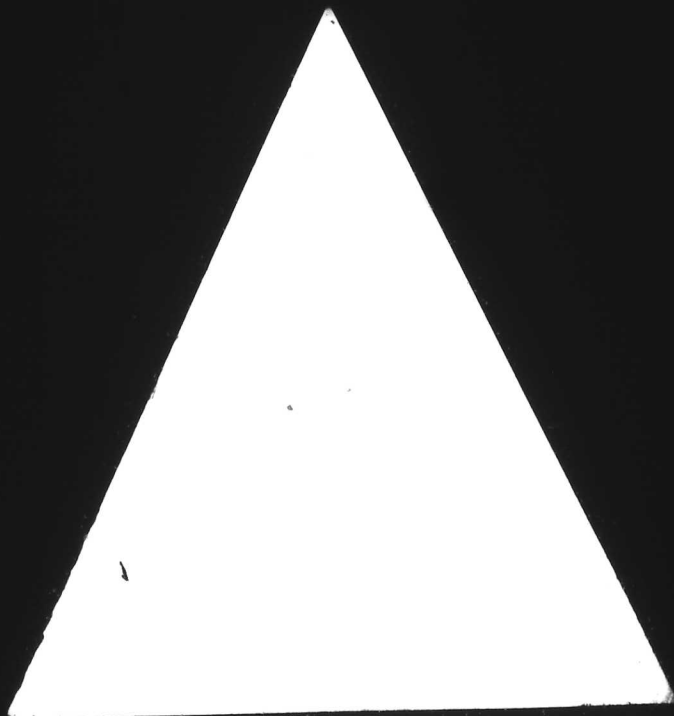
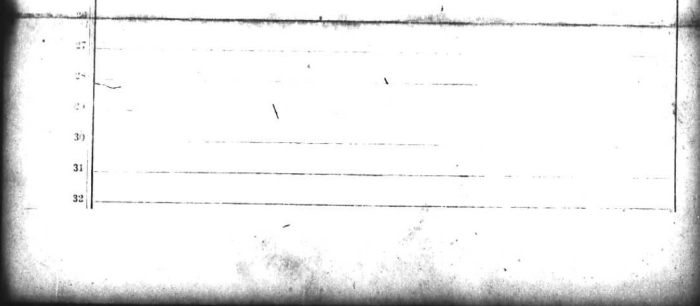
I, Geo B Davis, Clerk
of Superior Court of said County, and ex off.
Clerk of Ct of Ordinary (because of fact
of death of Ordinary of said County, and
no election having as yet been held to
fill vacancy caused by said death) do
Certify that the within is a true and
correct transcript from Marriage
Records of said County, as appears
on page 384, of said Record, now
in this office.

Given under my hand and the Seal
of said office. This 5th day of Sept 1903.

Geo B Davis, Clerk Supr Court
ex off. Clerk Ct of Ordinary.

Now returned
to
Fulton Co

Filed
9/16/03



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

before me,

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

by _____ day of _____ 1897.

Witness my hand and seal this _____

Executed in presence of _____

248 Highway
Hollingsworth, Geo. W.
No. 2281.

INDIGENT PENSION
1897.

Name, Geo W. Hollingsworth
County, Tulsa

Approved 7/9 1897.

WARRANT HANDED TO

appet.

Geo. W. HARRIS, STATE PRINTER, ATLANTA.

Aug 8 1897

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of _____

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

at _____

by _____

Witness my hand and seal this _____ day of _____ 1897.

Executed in presence of _____

INDIGENT PENSION

1897.

Geo. W. Hollingsworth

County Telfair

Approved 7/9 1897.

WARRANT HANDED TO

app.

Jan 8 1897

Questions for Applicant.

STATE OF GEORGIA,

County.

I, Geo. W. Hollingsworth of said State and County, desiring to avail himself of the Pension Act approved December 10th, 1864, 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) Geo. W. Hollingsworth Fulton Co Georgia P.O. Atlanta
2. Where did you reside on January 1st, 1864, and how long have you been a resident of this State? Fulton Co Georgia thirty six years
3. When and where were you born? Tamworth Ga year 1829
4. When and where and in what company and regiment did you enlist or serve? June 1st 1862, Company B, 18th Regt
5. How long did you remain in such company and regiment? About 2 years & 10 months

6. For how long a period did you discharge regular military duty? Two years & 10 months
7. When, where and under what circumstances were you discharged from service? April 9th 1868 at the surrender of Lee's Army

8. What is your present occupation? Farming
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? Same
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? Age and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? About five years

13. What property, effects or income do you possess and its gross value? None
14. What property, effects or income did you possess in 1864, 1865 and 1866 and what disposition, if any, did you make of same? None

15. In what County did you reside during those years and what property did you then return for taxation? Fulton County None
16. How were you supported during the years 1865 and 1866? By my children

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Nothing
18. What was your employment during 1865 and 1866? What pay did you receive in each year? Nothing
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Wife & wife. No Homestead
20. Are you receiving any pension, if so what amount and for what disability? None

Sworn to and subscribed before me this the _____ day of _____ 1897.

Geo. W. Hollingsworth Applicant.
W. H. Murray Ordinary, Fulton County.
Geo. W. Hollingsworth the county.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

County.

James M Butler of said State and County, having been presented as a witness in support of the application of Geo W Hallingsworth for pension under the Act approved December 16th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? James M Butler
Central DeKalb Co Georgia
2. Are you acquainted with Geo W Hallingsworth, the applicant, is of how long have you known him? Eight years
3. Where does he reside, and how long has he been a resident of this State? Fulton Co Ga
Eight years
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? He has belonged to some Company
that
5. When, where and in what company and regiment did he enlist? June 1862 Company G
18th Georgia Regiment
6. Were you a member of the same company and regiment? I was
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? From June 1862
until Dec 1864
He was
discharged as a Soldier
8. What property, effects or income has the applicant? (Give your means of knowledge.) None
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? None
10. What is the applicant's occupation and physical condition? None
His condition is such that he is not competent
to perform any manual or mental labor
11. Is the applicant unable to support himself by labor of any sort, if so, why? Yes
Age & infirmity
12. How was he supported during the years 1895 and 1896? By his children
13. What portion of his support for these two years was derived from his own labor or income? None
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 16th, 1894? Age & Poverty
15. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this

the 6th day of July 1897.

Witness.

Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally came before me A J Ring M D and

J. C. Rasser, both known to me as reputable physicians

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

applicant for pension under the Act of 1894, and after

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

Old & infirm His mental
Physical condition is such as to render
him unable to make a living
(to perform manual or mental labor)

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this

the 6th day of July 1897.

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, W. H. Rasser, Ordinary in and for said County, hereby certify that

the applicant Geo W Hallingsworth is a resident in said County, and was a bona

fide resident of this State on the first day of January, 1894, and that the witnesses, viz:

A J Ring M D J. C. Rasser James M Butler

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

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

I further certify that the tax digests of Fulton County show that applicant

returned for taxation in his name in 1895, None dollars

of property, and in 1896, None dollars of property.

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

Witness my hand and seal of office, this 6th day of July 1897.

W. H. Rasser Ordinary

of Fulton County.

NOTE.

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

Additional affidavits may be attached if blank spaces are insufficient.

POWER OF ATTORNEY.

State of Georgia,

Fulton County.

I, Geo. W. Hollingsworth, hereby authorize A. M. Hollingsworth of Atlanta Ga to receive and receipt for the pension paid hereon and request that he remit same to me by cash at Atlanta Ga.

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

Executed in presence of

W. J. Campbell
L. A. Lacroix
W. R. L. Fulton

Hollingsworth Geo. W.

Fulton Co.

NOT OF 11 DEC. 1894.

(For These Already Enrolled.)

NO. 366

INDIGENT

SOLDIER'S PENSION,

1898.

Name Geo. W. Hollingsworth

County Fulton

WARRANT ISSUED

1/12 1898

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

Atty

Geo. W. HARRISON, STATE PRINTER, ATLANTA.

No date

Hollingsworth Geo. W.
Fulton Co.

(For These Already Enrolled.)

No. 475

INDIGENT

SOLDIER'S PENSION,

1899.

Name Geo. W. Hollingsworth

County FULTON

WARRANT ISSUED

1/23 1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

A. M. H.

Geo. W. HARRISON, STATE PRINTER, ATLANTA.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, Geo. W. Hollingsworth, hereby authorize Admiral M. Hollingsworth to receive and receipt for the pension allowed, and request that he remit same to me at Atlanta Ga.

Witness my hand and seal this 23 day of January 1899.

Executed in presence of

W. J. Campbell } Geo. W. Hollingsworth (L. S.)
W. R. L. Fulton

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Geo. H. Hollingsworth of Fulton

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of 1828; that he is 67 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 years in Company B, of 18th Regiment of Georgia; that his physical condition is as follows:

Old and infirm - General debility

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 1898. I have heretofore as a resident of Fulton county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, 12th day of Jan, 1898. G. W. Hollingsworth Ordinary.

State of Georgia,

Fulton County.

I, H. H. Hulsey

Ordinary of said County,

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

Given under my official signature and seal, this 12th day of Jan, 1898.

Ordinary Fulton County.



NOTE.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County.

Personally appears Geo. H. Hollingsworth of FULTON

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of 1828; that he is 68 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of GA) during the war between the States, and served for the term of 2 years in Company B, of 18th Regiment of Georgia; that his physical condition is as follows:

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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 1898. I have heretofore as a resident of FULTON county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, 23rd day of Jan, 1898. Geo. H. Hollingsworth Ordinary.

State of Georgia,

FULTON County.

I, W. H. HULSEY

Ordinary of said County,

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

Given under my official signature and seal, this 23rd day of Jan, 1898.

Ordinary FULTON County.



NOTE.—The blank spaces must be filled.
NOTE.—A Affidavit should not be attested before January 1st, 1899.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, Geo. W. Hollingsworth hereby authorize
my son Geo. W. Hollingsworth of Atlanta Ga
to receive and receipt for the pension allowed, and request that he remit same to
me at Atlanta Ga
by Geo. W. Hollingsworth

Witness my hand and seal, this 17th day of January 1900.

Geo. W. Hollingsworth S.]

Executed in presence of

J. K. Ewing Notary Public
Fulton County
Ga

CODE SEC. 1984.

(For These Already Enrolled.)

NO. 562

INDIGENT

SOLDIER'S PENSION,

1900.

Name Geo. W. Hollingsworth
County FULTON

WARRANT ISSUED

January 17 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Geo. W. Hollingsworth
Geo. W. Hollingsworth, State Printer, Atlanta.

At Late

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize
_____, of _____
to receive and receipt for the pension allowed and request that he remit same to
_____ at _____
by _____

Witness my hand and seal, this _____ day of _____ 1901.

_[L. S.]

Executed in presence of

CODE SECTION 1984.

(For These Already Enrolled.)

No. 563

INDIGENT

SOLDIER'S PENSION.

1901.

Name Geo. W. Hollingsworth
County Bullitt

WARRANT ISSUED

Jan 14 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Geo. W. Hollingsworth
Geo. W. Hollingsworth, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON

County,

Personally appears Geat H. Hollingsworth of FULTON

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 _____ 1828; that he is 69 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Geo) during the war between the States, and served for the term of 2 years in Company B, of 15 th Regiment of Georgia; that his physical condition is as follows: Old & infirm

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 1900. I have heretofore as a resident of Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this 17 day of June 1900. J. W. Hollingsworth Ordinary.

State of Georgia,

FULTON

County,

I, W. H. HULSEY,

Ordinary of said County,

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

Given under my official signature and seal, this 17 day of June 1900.

Ordinary FULTON County.



Note.—The blank spaces must be filled.

Note.—Affidavits should not be returned before January 1st, 1901.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton

County,

Personally appears Geat H. Hollingsworth of Fulton

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 _____ 1828; that he is 70 years old and by occupation a _____; that he enlisted in the military service of the Confederate States (or of the State of Geo) during the war between the States, and served for the term of 2 yrs in Company B, of 15 th Regiment of Geo; that his physical condition is as follows: Old & infirm

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 1901. I have heretofore as a resident of Fulton county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this 17 day of June 1901. J. W. Hollingsworth Ordinary.

STATE OF GEORGIA,

Fulton

County,

I, John R. Wilkinson

Ordinary of said County,

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

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

Ordinary Fulton County.



Note.—The blank spaces must be filled.

Note.—Affidavits should not be returned before January 1st, 1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of

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

at

by

Witness my hand and seal, this

day of

1901.

[L. S.]

Executed in presence of

(For Those Already Enrolled)

No. 223

INDIGENT

SOLDIER'S PENSION.

1901.

Name John W. Lindsey
County Bull

WARRANT ISSUED
Jan 16 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

[Signature]
John W. Lindsey, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, John W. Lindsey hereby authorize

of

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

at

by

Witness my hand and seal, this 23 day of Jan 1903.

Executed in presence of

John W. Lindsey
Ordinary

(FOR THOSE ALREADY ENROLLED)

No. 223

INDIGENT

SOLDIER'S PENSION

1903.

Name John W. Lindsey

County Fulton

Co. B Regiment 18th

WARRANT ISSUED

Jan 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

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

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally appears

Fulton County, G. W. Hollingsworth
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 _____ 1825; that he is 70 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 2 yrs in Company 15, of 15th Regiment of _____; that his physical condition is as follows:

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Fulton county been allowed a pension for the year 1900

Sworn to and subscribed before me, this _____ day of _____ 1901, G. W. Hollingsworth
John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 12

day of Jan 1901.
John R. Wilkinson
Ordinary. Fulton County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears G. W. Hollingsworth of Fulton 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 _____ 1825; 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 2 yrs in Company 15, of 15th Regiment of Fu; that his physical condition is as follows:

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Fulton county been allowed a pension for the year 1901.

Sworn to and subscribed before me, this _____ day of JAN 20 1903.
John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with G. W. Hollingsworth the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 20 1903.
John R. Wilkinson
Ordinary. _____ County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, Geo. H. Hollingsworth hereby authorize
Mrs. E. M. Hollingsworth of Atlanta Ga
to receive and receipt for the pension allowed, and request that he remit same to
me at Atlanta Ga
by E. M. Hollingsworth

Witness my hand and seal, this 7th day of January 1900.

Geo. W. Hollingsworth [L. S.]

Executed in presence of

J. K. Ewing Notary Public
Fulton County
Ga.

CODE SEC. 1264.

(For Those Already Enrolled.)

NO. 362

INDIGENT

SOLDIER'S PENSION,

1900.

Name Geo. H. Hollingsworth
County FULTON

WARRANT ISSUED

1900.

JOHN. W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. H. Hollingsworth

Geo. W. Hollingsworth, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, Mrs. E. M. Hollingsworth hereby authorize
Geo. H. Hollingsworth of Atlanta Ga
to receive and receipt for the pension allowed and request that he remit same to
me at Atlanta Ga
by Geo. H. Hollingsworth

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

Geo. H. Hollingsworth [L. S.] +

Executed in presence of

John R. Williamson
Ewing

CODE SEC. 1264.

(FOR THOSE ALREADY ENROLLED.)

No. 349

INDIGENT

SOLDIER'S PENSION

1902.

Name Geo. H. Hollingsworth
County Fulton
Co. B Regiment 8th

WARRANT ISSUED

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. H. Hollingsworth

Geo. W. Hollingsworth, State Printer, Atlanta.

Geo. H. Hollingsworth
no date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

ON

County,

Personally appears Geo. H. Hellingworth of FULTON

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 1828; that he is 69 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 2 years in Company B, of 18th Regiment of Georgia; that his physical condition is as follows: Old & infirm

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 1900. I have heretofore as a resident of Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, the

17 day of June 1900.

Ordinary.

State of Georgia,

FULTON

County.

I. W. H. MULSEY,

Ordinary of said County,

do certify that I am well acquainted with Geo. H. Hellingworth the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 June 1900.

Ordinary

FULTON

County.

NOTE.—The blank spaces must be filled.

NOTE.—Affidavit should not be attested before January 1st, 1900.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County,

Personally appears Geo. W. Hellingworth of Fulto.

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 1828; 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 Ga.) during the war between the States, and served for the term of 2 yrs in Company B, of 18th Regiment of Ga.; that his physical condition is as follows: Old & infirm

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 Fulton county been allowed a pension for the year 1 901.

Sworn to and subscribed before me, this the

day of JAN 1902.

Ordinary.

STATE OF GEORGIA,

FULTON

County.

I. John R. Wilkinson,

Ordinary of said County,

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

Given under my official signature and seal, this

day of JAN 1902.

Ordinary

FULTON

County.

NOTE.—The blank spaces must be filled.

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

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

Given under my official signature and seal, this 17
day of July 1900.



Ordinary FULTON County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1900.

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

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



Ordinary FULTON County.

Note.—The blank spaces must be filled.

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

William J. Hall
1861-1910

**Confederate
Soldier's Application.**

☒ UNDER ACT 1910.

County *Willcox*
Name *James Hall*
Cemetery *7*
Residence *and 1/2 R.R. 1*
Signature *James Hall*

81458
J. W. LEBERT
Department of Records
1861

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

I, William C. Anderson, of said State and County, hereby apply for the pension provided by Act of 1910, as Confederate Soldier, and submit his sworn statement, with his testimony to make out the same, and after being duly sworn the answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and when do you reside? (Give County and Post-office.)
William C. Anderson, Ga. Atlanta, Ga.
2. How long and since when have you been a continuous resident citizen of this State?
All my life
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
Yes
4. Where and when, and in what Company and Regiment did you enlist? (Give the arm and class of Service.)
Spring 1864, Co. H, 2nd Ga. Inf., 2nd Regt.
5. How long did you serve in the actual military Service with said Company and Regiment? (Give date of discharge.)
Until about April 1, 1865.
6. When and where was your Company and Regiment surrendered or discharged from the Service?
Atlanta, Ga. May 3, 1865.
7. Were you actually present with your Command when it was surrendered or discharged?
No
8. If you were not actually present, state specifically and clearly where you were.
Four hundred miles to go home April 1st on account of sickness.
- a. Where was your Command when you left it?
Andersonville, Ga.
- b. When did you leave the Command?
About April 1st, 1865.
- c. For what cause did you leave?
Sickness.
- d. By whose authority did you leave?
Commanding Officer.
- e. For how long was your leave granted? In what way?
200 for duty. Until physically able for duty.
- f. Why did you not return to your Command after leave expired?
Was not well.
- g. In what way were you prevented?
Sickness.
- h. What effort did you make to return?
None.
- i. Were you captured during the war?
No.
- j. If so, when, and where? In what prison were you held and when were you released?

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.)

None at all.

10. What property of any kind have you or your wife disposed of and for what price since 4 Nov. 1908. To whom and for what price?

None at all.

11. What property of any description of your 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).

None.

12. What annual or monthly income or earnings of yourself and wife and the source derived have you?

Nothing.

13. Are you drawing a pension or any amount from this State or the United States?

No.

14. Have you ever applied for the Georgia Pension and been refused and for what cause, if was not allowed?

Never applied.

Sworn to and subscribed before me, this the _____ day of _____, 1910.
William C. Anderson Ordinary.
William C. Anderson County.

Confederate Soldier's Application.

UNDER ACT 1910.

County Fulton
Name William C. Anderson
Company H Co 2d Ga Inf
Regiment 2d Regt
Approved by J. W. Lindsey
Secretary

J. W. LINDSEY,
Com. Secretary of Pension

GRANT & FERRY, STATE PRINTER, ATLANTA.

*Buffer 101-1073
Indexing*

NAME **Hollingsworth Joseph** YEAR **1911** COUNTY **Fulton**

WHERE AND WHERE BORN? **Resident of Georgia all of life; does not state when born.**

ENLISTED WHEN AND WHERE? **Spring 1864, Conyers, Georgia.**

RANK

COMPANY AND REGIMENT? **Co. F, 2nd Georgia Regiment, Infantry.**

GRADE OF CAPTAIN AND COLONEL?

DIED? **April 1st 1865, sick with measles, furloughed to go home.**

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? **Command surrendered; May 2nd 1865, Albany, Georgia.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? **At home, on furlough on account of sickness.**

DIED, WHEN AND WHERE?

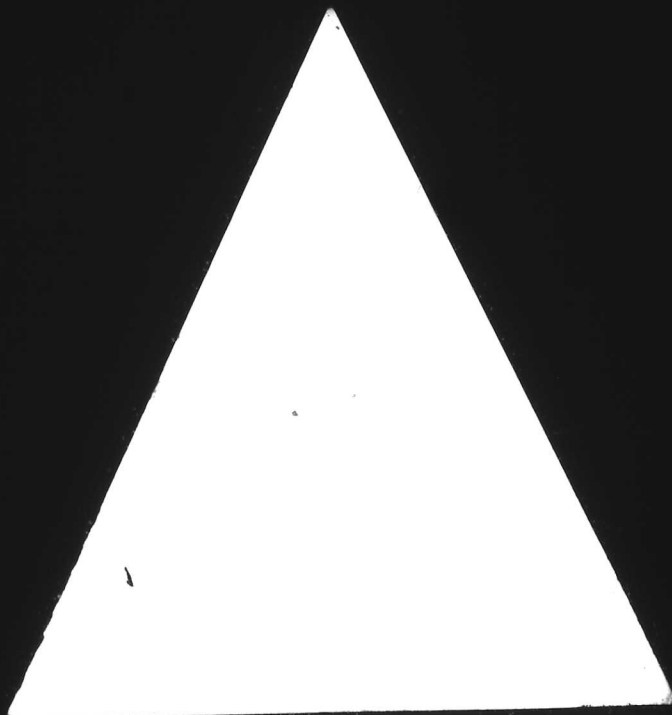
BURIED.

WITNESSES. **B. F. Botler - Co. F, 2nd Ga. Reserves. No data.
G. J. Hollingsworth - Co. F, 2nd Ga. Reserves.**

BURIED,

WITNESSES.

B. P. Settle - Co. F, 2nd Ga. Reserve. No date.
G. J. Hollingsworth - Co. F, 2nd Ga. Reserve.



STATE OF GEORGIA,

County.

herby authoris

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

remains who intend to file all _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190_____

Executed in presence of

Ordinary

County.

REAL.

Name Mrs. L. A. Hollingsworth
County Fulton
Widow of Jos. A. Hollingsworth
RD 30 6A
Approved _____ 1904

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

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

Witness my hand this _____ day of _____ 190 _____

Executed in presence of

Ordinary,

L. S.

County,

SEAL

QUESTIONS FOR APPLICANT,

STATE OF GEORGIA,

County,

Mrs. T. H. Hollingsworth of said State and County, desiring to
avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
passed 1905, hereby submits the facts, and after being duly sworn true answers to make to the
following questions, deposes and swears as follows:

1. What is your name and where do you reside? (Give State, County and Post-Office)
Mrs. T. H. Hollingsworth, No 122 Randolph St. Atlanta, Ga.

2. How long and since when have you been a resident of this State? Born in Hard
Co. Ga, resided in Ga. all of my life

3. When and where were you born? Hard Co. Ga. 1845

4. When and where was your husband born—state his full name, and when were you and he married?
(Attach your marriage license if every one.) Hard Co. Ga. on 1856 Joseph A
Hollingsworth married in Hard Co. Ga.

5. When and where and in what Company and Regiment did your husband serve or serve during the
war between the States? Hard Co. May 1862 Co. D 34th Regt

6. How long did your husband serve in said Company and Regiment? Full close of war

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

8. Was your husband present at the time and place which his Company and Regiment surrendered?
No. He was in prison.

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? Captured in the battles around
Nashville in 1864

10. When and where did your husband die? 1903 in Birmingham
Ala.

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

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?

13. What has been your occupation since your husband's death? No occupation
Living with children

14. How much can you earn gross, by your own exertion or labor? Nothing whatever

15. What property, real or personal, or income do you have or possess, and its gross value?
Nothing except my clothing

16. What property, real or personal, did you receive from death of husband or he left you, and of the
years 1899, 1900, 1901, 1902, 1903, 1904, and what disposition, if any, by sale or gift, have you made of the same?
Nothing consequently made no disposition

17. In what county did you reside in 1899, 1900, 1901, 1902, 1903, 1904, and what property did you
return for taxation? Hard Co. Ga. no property for taxation

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

19. How much did you support cost for each of these years, and how much did you contribute by your
own labor or income? Don't know the cost, I contribute nothing

20. What was your employment during 1899, 1900, 1901, 1902 and 1903—how much did you receive
for each year? No employment, received no wages

21. Have you a family? If so, who composes such family? Give their means of support? Have they
any lands or other property? My children, who are their homes

22. Have you ever made application for pension before? I have not

23. How many applications have you made for a pension, and under what claim? First application

Sworn to and subscribed before me, this the
24 day of August 1905
John W. Lindsey Ordinary,
of Hard Co. County.

WIDOW'S

INDIGENT PENSION.

1904.

JOHN W. LINDSEY,

ORDINARY, HANDED TO

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA.

County, }
 3 N. Walker

been presented as a witness in support of the application of Mrs. E. H. Halliwell for a Pension under the Act of 1900, and after being duly sworn to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? E. H. Walker, Heard County, Georgia

2. Are you acquainted with the applicant, Mrs. E. H. Halliwell?

If so, how long have you known her? I have known her all her life

3. Where does she reside, and how long and since when has she been a resident of this State?

She resides in Atlanta for some a resident of State since birth

4. When and where was she born? She was born in Georgia about 1840

5. Were you ever acquainted with her husband? I was

6. Where did she reside in 1861? In Georgia

7. When and to whom was he married? He married J. H. Mosley 1860

8. When and where was he born? He was born in Georgia about 1840

9. How long have you known him? From August 1861

10. When and where did he die? He died in Georgia

11. Were you a member of the same Company and Regiment? I was

May 1861 at Woodstock in Co. K 3rd Regt. Ga. Inf.

12. How long did he perform regular military duty? from date of his enlistment

13. When and where was he discharged? He was discharged in April 1865

14. Were you with the Command when it surrendered? Yes, I was in person

15. Was he the husband of applicant present? Yes

16. If not present, where was he? He was in prison in Ohio

17. When and where did he leave his command? was captured at the

For what cause? both of Nashville Tenn. from memory

By whose authority he left? captured

How do you know all this? (State fully and clearly.) I was with him in the

Army Captured at same time and in same place

18. When and where did he die? He died in Georgia

19. Where did he die? He died in Georgia

20. Do you of your own knowledge know that applicant is the legal widow of Mr. Halliwell?

I do

21. Has she remained unmarried since her soldier husband's death, and is now his widow?

Yes

22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? I don't know

23. What property, effects or income did applicant possess in 1860, 1900, 1901, 1902 and 1903, and what disposition did she make of it? I don't know

24. Has applicant conveyed any property in last two years or given away, if so, what was it, and to whom? I don't know

25. What is applicant's physical condition and her chances and ability to earn a support? I don't know

26. Is applicant able to earn a support at labor of any sort, if not, why not? I don't know

27. How was she supported for 1860, 1900, 1901, 1902 and 1903? I don't know

28. How much did applicant contribute to her support for last two years? I don't know

29. Give a full and complete statement of applicant's physical condition? I don't know

30. What interest have you in the recovery of this pension by the applicant? None

Sworn to and subscribed before me this 24

day of March 1905

Robt. G. New Ordinary,

Heard County.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

County, }
Spauld

Personally before me comes Dr. M. Powell and

Dr. S. S. S. S. both known to me to be reputable

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

Dr. S. S. S. S. applicant for a Pension under act of 1900, and after

such personal examination say that her physical condition is this She is unable to earn

a living being a constant sufferer of Rheumatism which affects

the nerves in the small of the back completely disabling her at

times her general condition is bad. Her very feeble

and in a general condition.

Sworn to and subscribed before me this 24

day of August 1904

John B. Williamson Ordinary,

Spauld County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County, }

I, Robt. G. New Ordinary, in and for said County, hereby certify

that the applicant, Mrs. E. H. Halliwell resides in said County,

and has been a bona fide resident of this State since the 24 day of

1861, and that the witnesses, Mr. Robt. G. New and

Dr. S. S. S. S. are of trustworthy character, and that their statements

are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the

oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before she came

was signed and subscribed.

I further certify that the tax digest of

returned for taxation in her own name in 1869

of property, and in 1900

in 1901

in 1902

in 1903

in 1904

in 1905

in 1906

in 1907

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POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1906.

[L. S.]

Executed in presence of _____

To Those Heretofore Paid

1906.

No. 104

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

Mrs. C. W. Hallingworth
Widow of *Jas. C. Hallingworth*
Coch. 34th Regt.

County,

of _____

County,

of _____

County,

of _____

County,

of _____

County,

of _____

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County,

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1907.

[L. S.]

Executed in presence of _____

To Those Heretofore Paid

1907.

No. 666

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

Mrs. C. W. Hallingworth
Widow of *Jas. C. Hallingworth*
Coch. 34th Regt.

County,

of _____

County,

of _____

County,

of _____

County,

of _____

County,

of _____

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of _____

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of _____

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of _____

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of _____

County,

of _____

County,

of _____

County,

of _____

County,

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

L. H. Hollingsworth

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

Fulton.

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

continuously ever since 1844.

That she is the Widow of

James A. Hollingsworth who was a soldier in Company

1st of the 34th Regiment of Cal.

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

1862, and served in the Army up to Prisoner 1865. That he died on

the 5 day of July 1865.

Age and poverty.

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

I have been allowed an Indigent pension as a resident of Fulton.

County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me

this 1 day of JAN 1 1906.

J. R. Wilkinson Ordinary.

L. H. Hollingsworth

Post Office 182 Randolph St

State of Georgia,

Fulton County.

I, J. R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. L. H. Hollingsworth 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 1844.

Given under my official signature and seal, this 1 day of JAN 1 1906.

Official Seal

J. R. Wilkinson

Ordinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

L. H. Hollingsworth

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

Fulton.

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

continuously ever since

That she is the Widow of

James A. Hollingsworth who was a soldier in Company

1st of the 34th Regiment of Cal.

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

1862, and served in the Army up to lost in prison 1865. That he died on

the 5 day of July 1865.

Age and poverty

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

I have been allowed an Indigent pension as a resident of Fulton.

County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me

this 2 day of JAN 2 1907.

John R. Wilkinson Ordinary.

L. H. Hollingsworth

Post Office 182 Randolph St

State of Georgia,

Fulton County.

I, John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. L. H. Hollingsworth 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 1844.

Given under my official signature and seal, this 2 day of JAN 2 1907.

Official Seal

John R. Wilkinson

Ordinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

H. M. PATTERSON

ESTABLISHED 1886

FRED W. PATTERSON

H. M. PATTERSON & SON**FUNERAL DIRECTORS**

94 NORTH FORSYTH STREET

ADJOINING CARROLL LIBRARY

Atlanta, Ga. April 9, 1917.

Funeral expenses of Mrs. L. H. Hollingsworth

✓ Casket and Box
 Embalming and dressing
 Rote
 Hose
 Constitution notices
 Journal notice
 Express for box
 Long distance
 Motor hears

Personality of deceased L. H. Hollingsworth who in each case the above
 account has been paid by Mrs. Patterson
 Servants to be located before the 19th day of April
 1917
 Arthur R. Wadsworth C. O.

152 40

Application for Pension Due to a Deceased Pensioner

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

Georgia, Fulton County.

Personally before me, the Ordinary of said County, comes.

H. M. Patterson of said County, who, after being sworn, on oath says that
 he knew Mrs. L. H. Hollingsworth of said County, and that she was on
 the Union Service Pension Roll Fulton County at the
 time of her death, which occurred in Fulton County, in this
 State, on the 9 day of April 1917, and that
 a Pension of Seven Dollars was due her and
 unpaid at the time of her death. That she left no widow or dependent children surviving him, and no
 estate of any value sufficient to pay his funeral expenses, which amounted to the sum of \$157.40

Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me
 this 19 day of April 1917
Arthur R. Wadsworth Ordinary
Fulton County

Georgia, Fulton County.

I, Thos. H. Jeffers Ordinary of said County, do certify
 that I personally know H. M. Patterson, who is a resident
 citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and
 credit.

I also knew Mrs. L. H. Hollingsworth while in life; that he
 was the same person whose name appears on the Union Service Pension
 Roll of Fulton County, and was paid a Pension
 of Seven Dollars in said County for 1917, and
 I now believe him to be dead.

Given under my hand and official seal, this 19 day of April 1917
Thos. H. Jeffers Ordinary
Fulton County.

POWER OF ATTORNEY, STATE OF GEORGIA.

County)

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

Executed in the presence of us:

[L.S.]

DIRECTIONS.

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



Hollingsworth, Mary
Fulton Co. Miss

1891.

No. 2010

Widows' Pension

— PAID TO —

Mrs. Mary A. Hollingsworth
or
Fulton COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

Executed in the presence of us:

[L. S.]

DIRECTIONS.

If allowed, I send amount by _____ me at _____

and oblige,



Widow's Pension

PAID TO

Mrs. Mary A. Hollingsworth

of Fulton County

\$100.00

Warrant Issued

AND HANDED TO

1891

1891.

No. 2010

Hollingsworth, Mary A.
Widow of William A. Hollingsworth

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of Fulton

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

Mrs. Mary A. Hollingsworth, who being sworn according to law, says under oath that she is the widow of William A. Hollingsworth, who was a soldier in the service of the Confederate States, and served as a member of Company B, of the 18 Regiment of Georgia Volunteers; that he enlisted in said

service on or about the 13 day of March 1862, and was in the beginning Army up to 6 day of May 1864. That while in the Army, he was on the 6 day day of May 1864, (See Note No. 1)

Wounded in right arm near shoulder on 6 day of May 1864 in battle at the Wilderness in the State of Va. His arm being amputated from said wound from which he died on the 9 day of June 1864 at Lynchburg Va. at Hospital

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 4 day of October 1865, and that she has resided in Georgia continuously since the 4 day of October 1865; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the 6 day of June 1891.
M. B. Leal
Ordinary.

Mary A. Hollingsworth

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.

Form No. 6.

STATE OF GEORGIA,

County of Rockdale in and for said County, witnesses
J. M. Howard J. S. Stewart
H. C. Pearson (each known to said Attesting Officer as truthful,
 reliable and reputable citizens), who severally say, under oath, that, from their own personal knowledge,
 Mrs. Mary A. Hollingsworth, of the County of Fulton,
 State of Georgia, is the widow of William Hollingsworth, who was a soldier in
 Company B of the 18th Regiment of Georgia Volunteers.
 That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
 about the 13th day of March 1862. That while in said service, or by
 reason of said service in the Army, he lost his life as follows:

On the 6th day of May 1864 at or during the
 Battle on the Wilderness he was wounded in the arm
 near the shoulder his arm was amputated after
 which he died in the Hospital at Lynchburg
 Virginia on the 6th day of June 1864

I hereby certify that the witnesses whose names
 are hereunto attached are truthful & reputable men and
 worthy of Credit
 Given under my hand and seal of office
 this 15th day of May 1891

O. Seaman
 Ordinary

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

Sworn to and subscribed before me, this, the

15th day of April 1891.
O. Seaman J. A. Stewart
 Ordinary. John Hollingsworth Esq
H. B. Jones

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

Form No. 17.

STATE OF GEORGIA,

County of Fulton in and for said County of Fulton

I, W. L. Leachman Ordinary
 State of Georgia, hereby certify that I am acquainted with Mrs. Mary A. Hollingsworth
 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 am~~
~~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 ~~and~~ signed

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

2nd day of June 1891.

(SEAL)

W. L. Leachman
 Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

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

No widow is entitled unless she was the wife of the soldier during the war, and has never
 remarried.

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

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

Widows who have married since the service of their husbands in the army are not entitled.
 There is no need of employing a lawyer or other agent to attend to these claims. The
 Department will furnish full and specific instructions, and give ample opportunity to every claimant.

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

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

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

By order of the Governor.

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

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

Form No. 2.

STATE OF GEORGIA, County of Fulton
 I, M. L. Calhoun Ordinary in and for said County of Fulton State of Georgia, hereby certify that I am acquainted with Mrs. Mary A. Hollingsworth the applicant for a pension in this case, and know, from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1860, and has not lived out of the State since that date. That she is the widow of William A. Hollingsworth 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 6th day of February 1894.
M. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

County in said State, do hereby appoint

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

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

Executed in the presence of us:

[L. S.]

DIRECTIONS.

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

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

Form No. 2.

STATE OF GEORGIA, County of Fulton

I, M. L. Calhoun

Ordinary in and for said County of Fulton State of Georgia, hereby certify that I am acquainted with Mrs. Mary A. Hollingsworth the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1860, and has not lived out of the State since that date. That she is the widow of William A. Hollingsworth deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1864.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 6th day of February 1894.
M. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of Fulton County in said State, do hereby appoint

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

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

[L. S.]

Executed in the presence of us:

DIRECTIONS.

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

1894.
 WIDOW'S PENSION,
 for year ending February 15th, 1894.
 PAID TO —
Mary A. Hollingsworth
Fulton County
 Warrant Issued
 AND HANDED TO
Applicant
 1894.

1895.
 WIDOW'S PENSION,
 for year ending February 15th, 1895.
 PAID TO —
Mary A. Hollingsworth
Fulton County
 Warrant Issued
 AND HANDED TO
Applicant
 1895.

For Widows' Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,

County of *Mullin*

Personally comes Mrs.

Henry A. Hollingsworth

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

Mullin

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

continuously ever since

Barth

18

That she is the Widow of

William A. Hollingsworth who was a Soldier in Company

B

of the

18th

Regiment of

Georgia

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

March

1862 and served in the Army up to

May 6th

1864

That he lost his

life on the

6th

day of

June

1864

(State here

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

May 6th 1864 was wounded in the Battle of the Wilderness and died therefrom at Lynchburg, Va., on the 6th June 1864

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

6th

day of *Feb*

1894.

M. L. Cochran Ordinary.

Post-office

M. A. Hollingsworth

For Widows' Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,

County of *Fulton*

Personally comes Mrs.

Mary A. Hollingsworth

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

Fulton

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

continuously ever since

Barth

18

That she is the Widow of

William A. Hollingsworth

who was a Soldier in Company

B

of the

18th

Regiment of

Georgia

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

March

1862 and served in the Army up to

May 6th

1864

That he lost his

life on the

6th

day of

June

18

64 (State here

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

May 6th 1864 was wounded in the Battle of the Wilderness and died therefrom

at Lynchburg, Va., on the 6th June 1864

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

Sworn to and subscribed before me, this

10th

day of

Feb

1895.

M. L. Cochran Ordinary.

Post-office

Mary A. Hollingsworth

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

Form No. 2

STATE OF GEORGIA, County of Fulton
 I, W. H. Hulse Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Mary A. Hollingsworth Applicant for a pension in this case, and
 know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she resides in
 this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the
 State since that date. That she is the widow of Wm. A. Hollingsworth
 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 17th
 day of July 1897.
W. H. Hulse Ordinary.

POWER OF ATTORNEY.

Form No. 3

STATE OF GEORGIA, Fulton County.
M. A. Hollingsworth hereby authorize M. H. Hollingsworth
Fulton of Fulton to receive and receipt for the pension paid herein and request
 that he remit same to me at Atlanta
 In Witness Whereof, I have hereunto set my hand and seal, this 17
 day of July 1897.
M. A. Hollingsworth [L. S.]

Executed in the presence of
Rich. Johnson

Wm. A. Hollingsworth, 270 Central Avenue, Atlanta, Ga.

AND RETURNED TO

WARRANT ISSUED

1897.

RICHARD JOHNSON,

Commissioner of Prisons.

widow of

M. A. Hollingsworth

County.

PAID TO

for year ending February 15th, 1897.

QUIDOU'S PENSION,

No. 3701

1897

PAID TO

Wm. A. Hollingsworth

270 Central Avenue, Atlanta, Ga.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of *Fulton*

Personally Comes Mrs.

Mary A. Hollingsworth

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 *Sept 7* 1856 That she is the Widow of

William A. Hollingsworth who was a Soldier in Company

of the *Eighteenth* Regiment of *Georgia*

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

1862 and served in the Army up to *Sept 7* 1864 That he lost his

life on the *Sept 7* day of *Sept* 1864 (State here

full particulars of the husband's death, when, where, and from what cause. *was wounded
in battle at Millen in Ga on the
sixth day of May, and died in
hospital at Lynchburg Va on the
6 day of June 1864*

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, that she became his wife in the year 1855, that Georgia is her
home and she resided in this State 23rd 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 *Rockdale* 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

17th day of *Dec* 1897.
M. A. Hollingsworth Ordinary.

M. A. Hollingsworth
Post-office *Atlanta*

Sworn to and subscribed before me, this

17th day of Feb 1897.

M. H. Hollingsworth Ordinary.

Post-office

M. H. Hollingsworth
Atlanta

POWER OF ATTORNEY.
STATE OF GEORGIA.

Form No. 5.

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

Executed in the presence of us: _____ [L. S.]

DIRECTIONS.

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



Hollingsworth, Matilda
Fulton County

1891.
To Rockdale Co 1893

No. *587*

Widows' Pension

— PAID TO —
Mrs. Matilda Hollingsworth

— OF —
Fulton COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Gen. W. Harrison, State Printer Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

Executed in the presence of us: _____ [L. S.]

DIRECTIONS.

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



Warrant Issued

AND HANDED TO

1891

\$1000.00.

COUNTY.

Widow's Pension

— PAID TO —

No. 287

1891

To Be Paid to her 1893

Matilda Hollingsworth

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of Fulton

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

Mrs. Matilda Hollingsworth, who being sworn according to law, says under oath that she is the widow of A.C. Hollingsworth, who was a soldier in

the service of the Confederate States, and served as a member of Company D, of the

4th Georgia Battalion Volunteers; that he enlisted in said

service on or about the _____ day of March 1861, and was in the

Confederate Army up to October 9th 1861. That while in the

Army, he was on the _____ day of October 1861, (See Note No. 1),

at Santa Rosa Island, mortally wounded from which wound he died on the 10th day of that month, at the hospital in Pensacola Florida

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 6th day of October 1863, and that she has resided in Georgia continuously since the 20th day of April 1874; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the _____ day of _____ 1891.

15th day of April 1891.

W. L. Hollingsworth
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.

Form No. 3.

STATE OF GEORGIA,

County of Duval } In person came before me, the undersigned Ordinary
Mrs. J. P. Wiley, Jerry Wright, E. L. Connally - } in and for said County, witnesses Wm. McCannell
(each known to said Attesting Officer as truthful,
reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
Mrs. Mahinda Hollingsworth, of the County of Duval,
State of Georgia, is the widow of A. C. Hollingsworth, who was a soldier in
Company D of the Arch Wagon Battalion Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the day of March 1861. That while in said service, or by
reason of said service in the Army, he lost his life as follows: He was mortally
wounded at the battle of Santa Rosa de
land and died from said wound a
few days after said battle.

Mrs. Wiley says she does not know the
particulars concerning the wound, but at-
tended the funeral of Mr. A. C. Hollingsworth,
E. L. Connally, and
Jerry Wright only knows that A. C. Hollings-
worth was wounded and died as above
stated.

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

Sworn to and subscribed before me, this, the
16th day of April 1891.

W. H. Harrison
Ordinary.

W. H. Harrison
J. P. Wiley
J. P. Wright

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

Form No. 4.

STATE OF GEORGIA,

County of Duval

I, W. H. Harrison Ordinary
in and for said County of Duval

State of Georgia, hereby certify that I am acquainted with Mrs. Mahinda Hollingsworth
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
16th day of April 1891.

SEAL

W. H. Harrison
Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.
Those whose husbands were killed in service.
Those whose husbands died in the army of wounds or disease contracted in the service.
Those whose husbands went to the army and have never been heard from since the war.
Those whose husbands were wounded in the army and have since died from the direct effects
of the wounds.

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

No widow is entitled unless she was the wife of the soldier during the war, and has never
remarried.

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

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

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

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

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

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

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

By order of the Governor.

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

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

Form No. 8.

STATE OF GEORGIA, County of **FULTON**
 I, **W.L. CALHOUN**, Ordinary in and for said County of **FULTON** State of Georgia, hereby certify that I am acquainted with Mrs. **Mabletta Hollingsworth** the applicant for a pension in this case, and know, from my own knowledge, (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of **A.C. Hollingsworth** deceased, and as such has heretofore been allowed a pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, **10th** day of **January**, 1892.
W.L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 8.

STATE OF GEORGIA, County

KNOW ALL MEN BY THESE PRESENTS, That I, _____ of _____ County in said State, do hereby appoint

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

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

Executed in the presence of us:

[L. S.]

DIRECTIONS.

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

FOR THOSE HERETOFORE PAID.
1893.
 No. **1432**
Widow's Pension,
 for year ending February 15th 1893.
PAID TO —
Mabletta Hollingsworth
 OF —
FULTON COUNTY.
Warrant Issued
1893
 AND HANDED TO
Applicant
 Wm. W. Fulton—Deputy Sheriff, Atlanta.

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

Form No. 8.

STATE OF GEORGIA, County of **Fulton**
 I, **W.L. Calhoun**, Ordinary in and for said County of **Fulton** State of Georgia, hereby certify that I am acquainted with Mrs. **Mabletta Hollingsworth** the applicant for a pension in this case, and know, from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of **A.C. Hollingsworth** 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, **18th** day of **February**, 1894.
W.L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 8.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I, _____ of _____ County in said State, do hereby appoint

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

In WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1894.

Executed in the presence of us:

[L. S.]

DIRECTIONS.

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

FOR THOSE HERETOFORE PAID.
1894.
 No. **1531**
WIDOW'S PENSION,
 for year ending February 15th 1894.
PAID TO —
Mabletta Hollingsworth
 OF —
FULTON COUNTY.
WARRANT ISSUED
1894
 AND HANDED TO
Applicant
 Wm. W. Fulton—Deputy Sheriff, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally comes Mrs.

Mabel H. Hollingsworth

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

FULTON

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

continuously ever since

Birth

18

That she is the Widow of

A. L. Hollingsworth

who was a Soldier in Company

D of the *1st Georgia* Regiment of *Georgia*

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

March

1861 and served in the Army up to

9th Oct

1861

That he lost his

life on the

15th

day of

October

1861 (State here

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

Was mortally wounded at Santa Rosa Island on 9th Oct 1861 from which he died on said 15th Oct 1861

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 for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

30th day of *January*, 1893.*M. L. Walker* Ordinary.

Mabel H. Hollingsworth
Post-office *Atlanta*

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally comes Mrs.

Mabel H. Hollingsworth

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

FULTON

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

continuously ever since

Birth

18

That she is the Widow of

A. L. Hollingsworth

who was a Soldier in Company

*D*of the *1st Georgia*

Regiment of

Georgia

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

March

1861 and served in the Army up to

9th Oct

1861 That he lost his

life on the

*15th*day of *October*

1861 (State here

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

Was mortally wounded at Santa Rosa Island on 9th Oct 1861 from which he died on said 15th Oct 1861.

He died on said 15th Oct 1861.

He died on said 15th Oct 1861.

He died on said 15th Oct 1861.

He died on said 15th Oct 1861.

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He died on said 15th Oct 1861.

He died on said 15th Oct 1861.

He died on said 15th Oct 1861.

He died on said 15th Oct 1861.

He died on said 15th Oct 1861.

He died on said 15th Oct 1861.

He died on said 15th Oct 1861.

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

Form No. 2.

STATE OF GEORGIA, County of Fulton

I, W. L. Calhoun Ordinary in and for said County of Fulton State of Georgia, hereby certify that I am acquainted with Mrs. Matilda Hollingsworth the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of A. C. Hollingsworth deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 11th day of February, 1895.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I, _____ of _____

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

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

Executed in the presence of:

DIRECTIONS.

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

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

Form No. 2.

STATE OF GEORGIA, County of Fulton

I, W. L. Calhoun Ordinary in and for said County of Fulton State of Georgia, hereby certify that I am acquainted with Mrs. Matilda Hollingsworth the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of A. C. Hollingsworth deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 11th day of February, 1895.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____, 1896. [L. S.]

Executed in the presence of

[L. S.]

FOR THOSE HERETOFORE PAID.

1896.

No. 7305

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Matilda Hollingsworth

OF

Fulton

County.

widow of A. C. Hollingsworth

WARRANT ISSUED

AND PAID TO Matilda 1896.

W. L. Calhoun

Ord. of Georgia, Fulton County.

FOR THOSE HERETOFORE PAID.

1895.

No. 569

WIDOW'S PENSION,

for year ending February 15th, 1895.

PAID TO

Matilda Hollingsworth

OF

Fulton

County.

widow of A. C. Hollingsworth

WARRANT ISSUED

AND PAID TO Matilda 1895.

W. L. Calhoun

Ord. of Georgia, Fulton County.

For Widows' Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,
County of Fulton

Personally Comes (Mrs.
Matilda Hollingsworth

who being sworn, says on oath, that she is a bona fide resident of said county of Fulton State of Georgia, and that she has resided in said State continuously ever since birth 18 That she is the Widow of A. C. Hollingsworth who was a Soldier in Company D of the 1st Georgia Battalion Regulars of Georgia Volunteers, that he enlisted in said Regiment on or about the month of March 1861 and served in the Army up to 9th Oct 1861 That he lost his life on the 15th day of October 1861 (State here full particulars of the husband's death, when, where and from what cause.) (Was mortally wounded at Santa Rosa Island on 9th Oct 1861 from which he died on said 15th Oct 1861

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 for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this 1st day of Feb'y 1895. Matilda Hollingsworth
W. L. Leach Ordinary. Post-office

For Widows Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.
Matilda Hollingsworth

who being sworn, says on oath, that she is a bona fide resident of said county of Fulton State of Georgia, and that she has resided in said State continuously ever since birth 18 That she is the Widow of A. C. Hollingsworth who was a Soldier in Company D of the 1st Ga Battalion Regulars of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1861 and served in the Army up to 9th Oct 1861 That he lost his life on the 15th day of October 1861 (State here full particulars of the husband's death, when, where and from what cause.) (Was mortally wounded at Santa Rosa Island on 9th Oct 1861 from which he died on said Oct 15th, 1861

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 Fulton 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 5th day of Feb'y 1896. Matilda Hollingsworth
W. L. Leach Ordinary. Post-office

Form No. 2.

1. *H. H. Kelley* Ordinary in and for said County of

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
the 2 day of June 1897.

SEAL *Richardson* Ordinary

Veren No. 5

_____ 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
day of _____ 1897.

Executed in the presence of

State of Georgia,

County

I, _____ 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 _____ 1898.

[L. S.]

Executed in presence of

_____ 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
day of _____ 1897.

Executed in the presence of

Hollingsworth, Matilda
Fulton, County
For Those Heretofore Paid.

Best.

NO. 2136

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mr. M. Hollingsworth

County

Fullon

Widow of *C. C. Hollingsworth*

RICHARD JOHNSON

Contributor of Pensions

WARRANT ISSUED

1898

AND HANDLED TO

W. W. HARRISON, STATE PRINTER, ATLANTA.

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

And. Pabellada Polleosa n. sp.

Trickton
County

widow of *A. E. Holtzworth*

RICHARD JOHNSON

Commissioner of Pensions.

WARRANT ISSUED

2/2

AND HANDLED TO

aphid

W. H. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

State of Georgia,

County, }

I, _____ hereby authorize _____

of _____

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

at _____

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

day of _____ 1899.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

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

at _____

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

day of _____ 1900.

[L. S.]

Executed in presence of _____

Hallingsworth, M. M.

Fulton Co.

For Those Hereofore Paid.

1899.

NO. 819

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

M. M. Hallingsworth

OF

FULTON

County

Widow of *R. C.*

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

211 1899.

AND HANDS TO

appch

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

Hallingsworth, M. M.

Fulton County

For Those Hereofore Paid.

1900.

NO. 1725

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

M. M. Hallingsworth

OF

Fulton

County,

Widow of

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

211 1900.

AND HANDS TO

appch

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FULTON

Personally Comes Mrs.

M. Hallingsworth

FULTON

who, being sworn, says on oath, that she is a bona fide resident of said county of
State of Georgia, and that she has RESIDED in said State

continuously ever since.

18

That she is the Widow of

A. C. Hallingsworth

who was a soldier in Company

*D*of the *1st Ga. Bat*Regiment of *Ga.*

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

1861

and served in the Army up to *9th Oct*

1861

That he lost his

life on the

15th

day of

Oct

1861

(State here

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

*Wounded at Santa Rosa Island
on 9th Oct. 1861 from which wound
he died Oct 15th 1861*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 *63*

I have been allowed a pension as a resident of

FULTON

County for the year ending

February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this

*1*day of *July*

1899.

*M. Hallingsworth**M. Hallingsworth* Ordinary.

Post-Office

State of Georgia,
FULTON County.

I W. H. HULSEY.

Ordinary of said County, certify that I am well acquainted

with Mrs. *M. Hallingsworth* 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 *23rd* day of *Dec* 18 *90*Given under my official signature and seal this the *1* day of *July* 1899.*W. H. Hulsey*

Ordinary of FULTON

County.



For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FULTON

Personally Comes Mrs.

*M. Hallingsworth**Fulton*

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

continuously ever since

18

That she is the Widow of

A. C. Hallingsworth

who was a soldier in Company

*D.*of the *1st Ga. Bat.*Regiment of *Ga.*

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

1861

and served in the Army up to *9th Oct*

1861

That he lost his

life on the

15th

day of

*Oct*18 *61*

(State here

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

*Wounded at Santa Rosa
Island on 9th Oct. 1861
from which wound he died
Oct 15th 1861*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 *63*

I have been allowed a pension as a resident of

FULTON

County for the year ending

February 15th, 1899, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this

*15*day of *July*

1900.

*M. Hallingsworth**M. Hallingsworth* Ordinary.

Post Office

State of Georgia,

FULTON County.

I W. H. HULSEY.

Ordinary of said County, certify that I am well acquainted

with Mrs. *M. Hallingsworth*, 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 *23rd* day of *Dec* 18 *90*Given under my official signature and seal, this the *15* day of *July* 1900.*W. H. Hulsey*

Ordinary of FULTON County.



BOARD OF TOLLOMEX

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of _____

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1901.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of _____

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

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

[L. S.]

Executed in presence of _____

To Those Herebefore Paid.

1901.

No. 226

WIDOW'S PENSION,

For year ending February 16th, 1901.

PAID TO

Mrs. M. Hollingsworth

of

Fulton Co. County.

Widow of A. C. Hollingsworth

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1901,

AND HANDED TO

cm

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

To Those Herebefore Paid.

1902.

No. 73

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. M. Hollingsworth

Fulton.

County,

Widow of A. C. Hollingsworth

Co. Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDED TO

cm

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

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

M. Hallingworth

Fulton who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since 1835

That she is the Widow of

W. C. Hallingworth who was a soldier in Company 1st of the 1st Regiment of Vol.

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

1861 and served in the Army up to 9th Oct 1861. That he lost his life on the 15th day of Oct 1861 (State here

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

Wounded at Santa Rosa Island on 9th Oct 1861
which wound he died with it 1861

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 52

I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1890, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 15th day of Jan 1901.

John R. Wilkinson Ordinary.

M. Hallingworth
Post Office Atlanta Ga

State of Georgia,

County of Fulton

Ordinary of said County, certify that I am well acquainted

with Mrs. M. Hallingworth, 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 23rd day of Dec 1890

Given under my official signature and seal, this 15th day of Jan 1901.

Official Seal.

John R. Wilkinson
Ordinary of Fulton County.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

M. Hallingworth

Fulton who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since 1835

That she is the Widow of

A. C. Hallingworth who was a soldier in Company 1st of the 1st Regiment of Vol.

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

1861, and served in the Army up to 9th Oct 1861. That he lost his life on the 15th day of Oct 1861 (State here

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

Wounded at Santa Rosa Island on 9th Oct 1861

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 52

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1901, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me, this 13th day of JAN 1902.

John R. Wilkinson Ordinary.

M. Hallingworth
Post Office

State of Georgia,

County of Fulton

Ordinary of said County, certify that I am well

acquainted with Mrs. M. Hallingworth, 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 23rd day of Dec 1890

Given under my official signature and seal, this 13th day of JAN 1902.

Official Seal.

John R. Wilkinson
Ordinary of Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

of _____

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

at _____

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

day of _____, 1903.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

of _____

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

at _____

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

day of _____, 1904.

[L. S.]

Executed in presence of _____

Hollingsworth Matilda

Fulton Co

To Those Hereofore Paid.

1903.

No. *100*

WIDOW'S PENSION,

For year ending Dec 31, 1903.

PAID TO

Mrs. M. Hollingsworth

OF

Fulton. County,

Widow of *A. C.*

Co. *D.* Regiment *1st Ga*

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

123 1903

AND HANDED TO

100

JOHN W. LINDSEY, 1903. PENSION, GEORGIA, GA.

Hollingsworth Matilda

Fulton County

TO THOSE HERETOFORE PAID.

1904.

No. *163*

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. M. Hollingsworth

OF

Fulton. County,

Widow of *A. C.*

Co. *D.* Regiment *1st Ga*

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

123 1904

AND HANDLED TO

100

JOHN W. LINDSEY, 1904. PENSION, GEORGIA, GA.

Widows Heretofore Allowed Pensions

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton. } M. Hollingsworth
who, being sworn says on oath, that she is a bona fide resident of said County of
Fulton State of Georgia, and that she has RESIDED in said State
continuously ever since 1835. That she is the Widow of
A. C. Hollingsworth who was a soldier in Company
D of the 1st Regiment of Ga
Volunteers, that he enlisted in said regiment on or about the month of
1861 and served in the Army up to 9th Oct 1861. That he lost his
life on the 15th day of Oct 1861. (State here
particulars of the husband's death, when, where and from what cause.)

Wounded at Santa Rosa Island on 9th
Oct 1861

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 1852

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

Sworn to and subscribed before me,
this day of JAN 22 1903. M. Hollingsworth
Ordinary. Post Office _____

State of Georgia, } I, John R. Williamson,
County of Fulton. } Ordinary of said County, certify that I am well
acquainted with Mrs. M. Hollingsworth, who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18 35

Given under my official signature and seal, this day of JAN 22 1903, 1903.



John R. Williamson
Ordinary of _____ County.

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

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton. } M. Hollingsworth
who, being sworn, says on oath that she is a bona fide resident of said County of
Fulton State of Georgia, and that she has RESIDED in said State
continuously ever since 1835. That she is the Widow of
A. C. Hollingsworth who was a soldier in Company
D of the 1st Regiment of Ga
Volunteers, that he enlisted in said regiment on or about the month of
1861 and served in the Army up to 9th Oct 1861. That he lost his
life on the 15th day of Oct 1861. (State here
particulars of the husband's death, when, where and from what cause.)

Wounded at Santa Rosa Island on 9th
Oct 1861

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 1852

I have been paid a pension as a resident of _____ County for the
year ending December 31, 1902, and now apply for the pension provided by law for the year ending
December 31, 1904.

Sworn to and subscribed before me,
this day of JAN 22 1904. M. Hollingsworth
J. R. Williamson Ordinary. Post Office _____

State of Georgia, } I, John R. Williamson,
County of Fulton. } Ordinary of said County, certify that I am well
acquainted with Mrs. M. Hollingsworth, who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18 35

Given under my official signature and seal, this day of JAN 22 1904, 1904.



John R. Williamson
Ordinary of _____ County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, 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 _____ 1905.

[L. S.]

Executed in presence of

Hollinsworth, Milleda
Fulton County
To Those Hereofore Paid.

1905.

No. 107

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs. Milleda Hollinsworth
OF

Fulton County,
Widow of *A. C. Hollinsworth*
Co. *D.* Regiment *1st* *Ca.*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/20 1905.
AND HANDLED TO
CH

This document is subject to the provisions of the Act of March 1, 1901, relating to the Pensions of the Soldiers and Sailors of the United States.

WIDOWS HERETOFORE ALLOWED PENSIONS

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

of

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

at

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

day of _____ 1906.

[L. S.]

Executed in presence of

Hollinsworth, Milleda
Fulton County
To Those Hereofore Paid.

1906.

No. 107

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO
Mrs. Milleda Hollinsworth
OF

Fulton County,
Widow of *A. C. Hollinsworth*
Co. *D.* Regiment *1st* *Ca.*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/2 1906.
AND HANDLED TO
CH

This document is subject to the provisions of the Act of March 1, 1901, relating to the Pensions of the Soldiers and Sailors of the United States.

WIDOWS HERETOFORE ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

Matilda Hollinsworth

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since all of life. That she is the Widow of A. C. Hollinsworth who was a soldier in Company D of the 1st Regiment of Cal. Inf. Volunteers, that he enlisted in said regiment on or about the month of March 1861, and served in the Army up to 9 mos. That he lost his life on the day of Oct 1861. (State here particulars of the husband's death, when, where and from what cause.)

Died wounds Pensacola Hospital

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852.

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this 1 day of Jan 1905.

Post-Office

State of Georgia,
Fulton County.

I, John R. Wier Ordinary of said County, certify that I am well acquainted with Mrs. Matilda Hollinsworth 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 all of life. Given under my official signature and seal, this 1 day of JAN 2 1905.

Official Seal.

Ordinary of Fulton County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

Matilda Hollinsworth

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since all of life. That she is the Widow of A. C. Hollinsworth who was a soldier in Company D of the 1st Regiment of Cal. Inf. Volunteers, that he enlisted in said regiment on or about the month of March 1861, and served in the Army up to Oct. That he lost his life on the day of Oct 1861. (State here particulars of the husband's death, when, where and from what cause.)

Died Wounds Pensacola Hospital
Oct. 1861

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 1852.

I have been paid a pension as a resident of Fulton County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me, this 1 day of JAN 1 1906.

Post-Office

State of Georgia,
Fulton County.

I, John R. Wier Ordinary of said County, certify that I am well acquainted with Mrs. Matilda Hollinsworth 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 all of life. Given under my official signature and seal, this 1 day of JAN 1 1906.

Official Seal.

Ordinary of Fulton County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1906.

POWER OF ATTORNEY

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

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

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

day of _____ 1907.

[L. S.]

Executed in presence of _____

Hollingsworth, Matilda (Mrs)

Fulton Co

To Those Hereofore Paid.

1907.

No. 54

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO

Mrs. Matilda Hollingsworth

OF

Fulton.

County,

Widow of A. B. Hollingsworth

Q. D.

Regiment 1st Va

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

1907.

AND HANDLED TO

John W. Lindsey

John W. Lindsey, Commissioner of Pensions, Atlanta.

STATE OF GEORGIA

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

Hollingsworth, Matilda (Mrs)
a la

For _____ County

1926

Application for Pension
Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Thos. H. Jaffee Ordinary

For Matilda Hollingsworth

Date of Death Apr 1 1926

Amount \$ 100.00

Approved and ordered paid

John W. Clark
22 July 26 JOHN W. CLARK,
Commissioner of Pensions

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

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

Matilda Hollingsworth

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

Fulton

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

continuously ever since 1834 That she is the Widow of

G. C. Hollingsworth who was a soldier in Company

D of the 1st Regiment of Pa

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

1861, and served in the Army up to 1861 That he lost his

life on the 1 day of Oct 1861 (State here

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

Died wounds, Pensacola Hospital

Oct. 1861

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 1866

I have been paid a pension as a resident of Fulton County, for the year ending December 31, 1906, and now apply for this pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 1 day of JAN 2 1907.

John R. Wilkinson Ordinary.

Post Office.

State of Georgia,

Fulton County,

I, John R. Wilkinson,

Ordinary of said County, certify that I am well

acquainted with Mrs. Matilda Hollingsworth, who made the above affidavit, and

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

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

day of 18 34

Given under my official signature and seal, this 1 day of JAN 2 1907.

Official Seal

John R. Wilkinson

Ordinary of Fulton County.

NOTE—All blanks must be filled. Verifications and affidavits must be taken before January 1, 1907.

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 18, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes J. W. Avery of Avery & Howards & Co of said County, who, after being sworn, on oath says that he knew Mrs. Matilda Hollingsworth of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Fulton County, in this State, on the 1 day of April 1926, and that a Pension of 8 Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$11.25, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

William B. Mansueti Ordinary Fulton County

(Seal of Ordinary)

J. W. Avery

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Theo H. Jeffries Ordinary of said County, do certify that I personally know J. W. Avery 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 know Matilda Hollingsworth while in life and that this was the same person whose name appears on the Pension Roll of Fulton County, and was paid a Pension of Eight hundred forty (\$400) Dollars in said County for 1927, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 1 day of April 1926.

(Seal or Ordinary)

Theo H. Jeffries Ordinary Fulton County

INSTRUCTIONS:

- 1st. Requiring 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 cash date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unpaid," etc.) "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without owning sufficient property to pay this bill."
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval, and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. The Ordinary must pay out, as Ordinary, for the pension and then deliver the money himself and take receipts.
- 6th. Return this application, and attached bills, with your final settlement to the Pension Department.
- 7th. Ordinary should see that the back of this blank, when folded, is filled out.

Ordinary of said County, certify that I am well acquainted with Mrs. Matilda Hollingsworth, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 30

Official Seal

Given under my official signature and seal, this the 21 day of JAN 21 1907.
John R. Wilkinson
 Ordinary of Hulton County.

NOTE.—All blanks must be filled.
 Voucher must accompany present check date when January 1st, 1907.

Given under my hand and official seal, this 21 day of Jan, 1907.
 (Seal or Ordinary)
Wm. H. Rogers, Ordinary
Emilia, County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unpaid," etc.)
 "The above and foregoing account is rendered for services in the last illness for funeral expenses, as the case may be of _____ who died without owning sufficient property to pay this bill."
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as follows.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval, and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.
- 6th. Return this application, and attached bills, with your final settlement to the Pension Department.
- 7th. Ordinary should see that the back of this blank, when folded, is filled out.

JOB W. AWTRY, Pres. & Treas.

FRANK B. LOWNDES, Vice-Pres. & Mgr.

Atlanta, Ga., 4-21-26 192

M. J. A. Hollingsworth

Bellon Rd.

TO AWTRY & LOWNDES CO., DR.
 FUNERAL DIRECTORS

Phone City 5813
 Phone City 5814

AUTO AMBULANCE
 17 WEST CAIN STREET

Funeral expense of Mrs. Matilda Hollingsworth 4-1-26

Casket	\$150.00
Burial case & dray	12.00
Embalming & hearse	25.00
Gr. to city grave	7.50
F. B. Gloves	2.00
Constitution (12 lines)	1.60
Journal (12 lines)	1.95
Georgian (12 lines)	7.95
Funeral Car	81.25
	<u>\$312.00</u>

Personally appeared J. W. Awtry who swears the above bill is true and was for funeral expenses of Mrs. Matilda Hollingsworth
 sworn to and subscribed before me
 this April 21st 1926
Arthur R. Marshall C. C. O.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

before me,

do hereby certify that the person whose name is written below is the person who has executed the foregoing instrument.

at

Witness my hand and seal this _____ day of _____, 1901.

Executed in presence of

[SEAL]

ACT DEC. 16, 1901.

No. _____

WIDOW'S PENSION,

1902

Mrs. M. P. Hollingsworth

County of Fulton

Widow of Robt
Co. B - 1st Ga

Warrant issued _____ 1901

and handed to

J. W. LINDSEY,
Commissioner of Pensions.

Gen. W. Harrison, State Printer

8/4-1902

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

I, _____ hereby authorize

of _____

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

at _____ by _____

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

Executed in presence of _____

[SEAL]

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA, }
COUNTY OF Hulton }

Personally came Mrs. Nancy R. Hallingworth, who says on oath she is the

widow of Robt. Hallingworth to whom, in the County of

Newton State of Georgia, she was married on the

10 day of Dec 1868, that she remained his wife up to the 28th day of April 1901, at which time he died, and that she has not since married.

At the time of his death he was a resident of Rockdale County, in said State of

Georgia, and was on the Wounded pension roll of the State of Georgia, having been allowed a pension of \$ 50⁰⁰ per annum on account of being a soldier in Company B, 8th Ga. Regiment, Volunteers or State.

See papers on file at Capital
What affliction have you and how does it effect you? Rheumatism in arms & shoulder.

What have you been doing to earn a support since 1st of January, 1900? Keeping house for children.

What property or effects had you on 1st January, 1900? None

What have you acquired since, and what income have you now? None.

What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose? None.

Deponent further says that she is now a resident of Hulton County and has continuously resided in the State of Georgia since the 16 day of May 1847

She applies for the pension provided by Act of the General Assembly, approved December 16, 1901.

Sworn to and subscribed before me this 24th day of May 1902

John R. Wrixon
Ordinary of Hulton County.

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

Hallingworth, Nancy R.
Hulton Co. (Ms)
Nancy R.
ACT DEC. 16, 1901.
No.
WIDOW'S PENSION,
1902
Mrs. N. R. Hallingworth
County of Hulton
Widow of Robt. Hallingworth
c. 10-18 Ga
Warrant issued 190
and handed to _____
J. W. LINDSEY,
Commissioner of Pensions,
8th-1902

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, } Personally came W. W. Swann
COUNTY OF Buckhead } and
Geo. W. Edwards known to me to be reputable and truthful person who says
on oath that from his own personal knowledge Mrs. Fanny P. Hollingsworth
who made the foregoing affidavit is the widow of Robert Hollingsworth
who died in Buckhead County and State of Georgia, on the
28 day of April 1902, and that she has not since married, that she became his
wife on the 10 day of Dec 1868, and so remained up to the time of his death,
and that she has resided in this State continuously since the 1860 day of
With what affliction does she suffer? Dumb Throat
What property or income had she on 1st January, 1900? None, apparently
What has she in her possession and control now? nothing except
some household goods.
How was she supported in 1900 and 1901? By a grant support
from her husband's estate.
(John W. Swann and I know as to date of
marriage.)
I have no personal interest in the pension asked for W. W. Swann
John W. Swann
Sworn to and subscribed before me this 28 day of June 1902
A. M. Nelson
Ordinary Buckhead County, Georgia.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA, } Personally came before me
COUNTY OF Fulton } M. C. Martin M.D.
and J. H. McDaniel M.D., both of whom are known to me to be reputable
physicians, who say on oath that they personally know Mrs. Fanny P. Hollingsworth
mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her
earning a support) Chronic rheumatism which has been re-
peated attacks of inflammation of the joints
and for weeks at a time, the legs swell
and the left ankle joint and so stiff
that she cannot do any kind of work on
account of said disease, which is permanent.
Sworn to and subscribed before me this 28th day of July 1902
J. H. McDaniel M.D. John W. Swann
M. C. Martin M.D. Ordinary of Fulton County.

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

STATE OF GEORGIA, } I, _____ Ordinary,
COUNTY OF _____ } in and for said County of _____
State of Georgia, hereby certify that I am acquainted with Mrs. _____
the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me
by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia continuously
since the _____ day of _____ 18____, and has not lived out of the
State since that date. I also certify that the witnesses, to-wit: _____
and _____, whose testimony she
presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith and credit as such,
and that the full text of the affidavit was read to and understood by them before same was signed. I am fully
satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses to read or hear
read the proofs they sign.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the _____
day of _____ 190____
{ SEAL }
Ordinary.

NOTES.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1903.

[L. S.]

Executed in the presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1904.

[L. S.]

Executed in presence of _____

To Those Heretofore Paid.

1903.

No. 44

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

McLaney P. Hollingsworth

or

J. Sullivan

County,

Widow of _____

Co. _____ Regiment _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/23 2 1903

AND HANDSD TO

BA

JOHN W. LINDSEY, Commissioner of Pensions.

*Hollingsworth, Mary B.
Fulton Co.*

*Hollingsworth, M. B.
Fulton, County*
TO THOSE HERETOFORE PAID.

1904.

No. 132

INDIGENT
WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. M. B. Hollingsworth

Fulton, County,

Widow of _____

Ruth

Co. _____ 18th Regt. _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/23 2 1904

AND HANDSD TO

BA

JOHN W. LINDSEY, Commissioner of Pensions.

FOR INDIGENT WIDOWS HERETOFORE ATTENDED PENSIONS

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

Janey P. Hallingsworth

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since birth. That she is the Widow of Robert Hallingsworth who was a soldier in Company B of the 11th Regiment of GA Volunteers, that he enlisted in said regiment on or about the month of September 1862, and served in the Army up to Summer 1865. That he died on the 28th day of April 1869.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1863.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 22nd day of January, 1904.

Post-Office

State of Georgia,

Fulton County.I, John P. Dickinson

Ordinary of said County, certify that I am well

acquainted with Mrs. Janey P. Hallingsworth, 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 birth 1863.

Given under my official signature and seal, this 22nd day of January, 1904.

Ordinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

NP Hallingsworth

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since birth. That she is the Widow of Robert Hallingsworth who was a soldier in Company B of the 18th Regiment of GA Volunteers, that he enlisted in said regiment on or about the month of September 1862, and served in the Army up to Summer 1865. That he died on the 28th day of April 1869.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1863.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this JAN 22 1904 day of JAN 22 1904.

Post Office

State of Georgia,

Fulton County.I, John P. Dickinson

Ordinary of said County, certify that I am well

acquainted with Mrs. NP Hallingsworth, 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 birth 1863.

Given under my official signature and seal, this JAN 22 1904 day of JAN 22 1904.

Ordinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1905.

[L. s.]

Executed in presence of _____

Hollingsworth, N.P.M.
To These Herebefore Paid.

1905.

No. 168

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1905.

Mrs. P. Hollingsworth

PAID TO

OF

County,

Widow of John P. Hollingsworth
Co. B. 1st Cal. Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

12-1 1905.

AND HANDLED TO

J. P. M.

By _____

Notary Public for Georgia.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,
County of **Fulton.**

PERSONALLY COMES MRS.

Mrs. P. Hollingsworth

Fulton.

who, being sworn says on oath, that she is a bona fide resident of said County of
State of Georgia, and that she has RESIDED in said State
continuously ever since.

That she is the Widow of
Robert P. Hollingsworth who was a soldier in Company
of the *18th* Regiment of *Georgia*

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

186____, and served in the Army up to 186____. That he died on
the ____ day of ____ 18____.

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 **Fulton.**
County, under Act 1900 for the year 1901, and now apply for the pension provided by law for the
year ending December 31, 1905.

Sworn to and subscribed before me,
this ____ day of **JAN 2** 1905.
John P. Wilson Ordinary.

Post-Office

Mrs. P. Hollingsworth

State of Georgia,
Fulton. County.

I, *John P. Wilson*
Ordinary of said County, certify that I am well

acquainted with Mrs. *P. Hollingsworth*, who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of ____ 18____.

Given under my official signature and seal, this ____ day of **JAN** 1905.

Official
Seal.

John P. Wilson
Ordinary of **Fulton** County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton 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 19th day of January 1906.

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton COUNTY.

I, _____, 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 _____ 1907.

Executed in presence of

Hallingsworth, N.P.
Fulton County
To Those Hereofore Paid.

1906.

No. 56

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

paid to
Mrs. J. C. Hallingsworth
or

Fulton County,

Widow of Robert H. Hallingsworth
Co. B. 18th Va. Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

49 1906,

AND HANDED TO

R. P. Hallingsworth

THE FINANCIAL INSTITUTION AND PENSIONERS CO., ATLANTA, GA.

Hallingsworth, N.P.
Fulton Co.

To Those Hereofore Paid.

1907.

No. 72

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

paid to
Mrs. J. C. Hallingsworth
or

Fulton County,

Widow of Robert H. Hallingsworth
Co. B. 18th Va. Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

46 1907,

AND HANDED TO

R. P. Hallingsworth

THE FINANCIAL INSTITUTION AND PENSIONERS CO., ATLANTA, GA.

Form No. 2
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton } R. C. Hollingsworth
who, being sworn says on oath, that she is a bona fide resident of said County of
Fulton State of Georgia, and that she has RESIDED in said State
continuously ever since 1842 That she is the Widow of
Robert Hollingsworth who was a soldier in Company
B. of the 18th Regiment of Mass.
Volunteers, that he enlisted in said regiment on or about the month of
1862, and served in the Army up to May 1865 That he died on
the April day of 1901 to

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1864.

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

Sworn to and subscribed before me
this 1st day of JAN 1 1906 1906
John R. Wilkinson, Ordinary.

R. C. Hollingsworth
Post Office 33 Victoria St

State of Georgia, }
Fulton County, } Ordinary of said County, certify that I am well
acquainted with Mrs. R. C. Hollingsworth, who made the above affidavit, and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18

Given under my official signature and seal, this 1st day of JAN 1 1906 1906.



John R. Wilkinson
Ordinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

Form No. 2
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton } R. C. Hollingsworth
who, being sworn says on oath, that she is a bona fide resident of said County of
Fulton State of Georgia, and that she has RESIDED in said State
continuously ever since 1842 That she is the Widow of
Robert H. Hollingsworth who was a soldier in Company
B. of the 15th Regiment of Pa.
Volunteers, that he enlisted in said regiment on or about the month of
1862, and served in the Army up to 1865 That he died on
the April day of 1901

Wages & salary

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 1862.

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

Sworn to and subscribed before me
this 2nd day of JAN 2 1907.
John R. Wilkinson, Ordinary.

R. C. Hollingsworth
Post Office

State of Georgia, }
Fulton County, } Ordinary of said County, certify that I am well
acquainted with Mrs. R. C. Hollingsworth, who made the above affidavit, and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18 67

Given under my official signature and seal, this 2nd day of JAN 2 1907.



John R. Wilkinson
Ordinary of Fulton County.

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

Official
Seal

Ordinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

Official
Seal

Ordinary of Fulton County.

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

Atlanta, Ga.
Aug 1-1907.

Colonel John W. Lindsey.

Pension Commissioners.

Dear Sir: In regard to the Years Support set apart for my mother. I wish to state that the appraisers set apart \$400.00 for the support of her and four minor children. but on account of the estate being insolvent she only received \$30.00 of the amount from the estate. I know this to be correct as I was Administrator in the estate of Robt Hallingsworth my father. Mrs. Almand Swann whose names appear in my mothers application for pension probably did not know the particulars in regard to that matter. In regard to my mothers health I wish to tell you that at times she is almost helpless with inflammatory

Rheumatism in her shoulder, hip, & ankle.
I merely tell you this so you may
more fully understand her condition.
I sincerely hope you will be able to
favorably consider her application for
the pension asked for by my mother.
Mrs. Nancy P. Hallingworth.

Yours, Respectfully,
John W. Hallingworth.

Given to and subscribed before me,

this 14th day of Aug 1902

John R. Wilkinson
Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

Justly authorized

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

Witness my hand this _____ day of _____ 190 _____

Executed in presence of

Ordinary,

County, }

L. B.

*Nollingsworth, Karen
 Tucker, Mary (Mrs)*

No. *OK*

WIDOW'S
 Indigent Pension.
 1901.

Name *Mr R P Keelhyper*

County *Fullon*

Widow of *W R Keelhyper*

A Phillips Signer

Approved *4/22* 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO,

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

Witness my hand this _____ day of _____ 1901.

Executed in presence of

Ordinary,

L. S.

County

SEAL

Questions for Applicant.

STATE OF GEORGIA,

Fulton County.

John R. P. Hallingsworth of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed Oct 1900, hereby submits her proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Phillips, P. Hallingsworth, Atlanta, Fulton Co. Ga. (Give State, County and Post Office.)
2. How long and since when have you been a resident of this State? At the City, Ga.
3. When and where were you born? Nov 14, 1841, Newton Co. Ga.
4. When and where was your husband born—state his full name, and when were you and he married? Jan 11, 1837, Newton Co. Ga.
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? May 1862, Company B, Phillips Legion, Captain W. H. Thomas.
6. How long did your husband serve in said Company and Regiment? From May 1862 till the close of the war.
7. When and where did your husband's Company and Regiment surrender and was discharged? April 26, 1865, Greensborough, N. C.
8. Was your husband present at the time and place when his Company and Regiment surrendered? Yes.
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? He was detailed home from Virginia, Sept 1864, to purchase horses for service and was taken prisoner from home Nov 18, 1864. By officers in command.
10. When and where did your husband die? May 20, 1892, Atlanta, Ga.
11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty? Age and Poverty.
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? Since 1892.
13. What has been your occupation since your husband's death? None.
14. How much can you earn gross, by your own exertion or labor? None.
15. What property, real or personal, or income do you have or possess, and its gross value? None.
16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1890-1900, and what disposition, if any, by sale or gift, have you made of the same? None.
17. In what counties did you reside in 1890 and 1900, and what property did you return for taxation? Fulton, None.
18. How have you been supported since death of husband, and especially for 1890 and 1900? By children.
19. How much did your support cost for each of these years, and how much did you contribute by your own labor or income? One hundred and eighteen Dollars, None.
20. What was your employment during 1890 and 1900—how much did you receive for each year? Not Employed.
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? Children, Labor, None.
22. Have you ever made an application for pension before? No.
23. How many applications have you made for a Pension, and under what class? None.

Sworn to and subscribed before me this 26 day of Feby 1901. John R. P. Hallingsworth of Fulton County.

WIDOW'S

Indigent Pension
1901.

John R. P. Hallingsworth

Phillips, P. Hallingsworth

John W. Lindsey

Commissioner of Pensions

WARRANT RETURNED TO

4/22 1901

John R. P. Hallingsworth

Fulton

John R. P. Hallingsworth

Phillips, P. Hallingsworth

John W. Lindsey

Commissioner of Pensions

WARRANT RETURNED TO

4/22 1901

John R. P. Hallingsworth

Fulton

John R. P. Hallingsworth

Phillips, P. Hallingsworth

John W. Lindsey

Commissioner of Pensions

Questions for Witnesses.

STATE OF GEORGIA,

Fulton County, }
J. N. Sims of said State and County, having been presented as a witness in support of the Application of Mrs. R. P. Hollingsworth for a Pension under the Act of 1900, and after having been duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? J. N. Sims - Atlanta
2. Are you acquainted with the applicant, Mrs. R. P. Hollingsworth? Yes. All of my life.
3. Where does she reside, and how long and since when has she been a resident of this State? Atlanta - All of her life.
4. When and where was she born? Nov. 24, 1841 in Newton Co., Ga.
5. Were you ever acquainted with her husband? Yes.
6. Where did he reside in 1861? Turkey Co., Ga.
7. When and to whom was he married? Feb. 13, 1862 to Rebecca P. Sims.
8. When and where was he born? Jan. 14, 1837 - Turkey Co., Ga.
9. How long have you known him? Since childhood.
10. When and where did R. P. Hollingsworth enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this? May 1862 Company A - 1st - Phillips Legion - Enlisted at same time.
11. Were you a member of the same Company and Regiment? Yes.
12. How long did he perform regular military duty? From the time he enlisted until Nov. 18, 1864 when he was captured.
13. When and where was the Company and Regiment surrendered and discharged from service? 1865 at Spotsylvania VA
14. Were you with the command when it surrendered? Yes
15. Was R. P. Hollingsworth the husband of applicant present? Yes
16. If not present, where was he?
17. When and where did he leave his Command? 1865 - 26th of April
- For what cause? Surrendered
- By whose authority he left? Ordered
- How do you know all this? (State fully and clearly.) I was with him at the time
18. When and where did R. P. Hollingsworth die? May 30, 1892. Atlanta, Ga.
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? Atlanta, Ga. All of his life.
20. Do you of your own knowledge know that applicant is the lawful widow of R. P. Hollingsworth? Yes.
21. Was she remained unmarried since her soldier husband's death, and is now his widow? Yes.
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? None. Through personal knowledge.
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? None.
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? No.
25. What is applicant's physical condition and her chances and ability to earn a support? Health bad. None.

26. Is applicant able to earn a support at labor of any sort, if not why? Mr. Because of her age and impaired health.

27. How was she supported for 1899 and 1900? By children

28. How much did applicant contribute to her support for last two years? None.

29. Give a full and complete statement of applicant's physical condition? Age 60 years. She is a great sufferer from indigestion and bladder trouble which impairs her health.

30. What interest have you in the recovery of this pension by the applicant? None.

Sworn to and subscribed before me this 8

day of such 1901

John W. Williams Ordinary,

Fulton County

J. J. Sims J. J. Christians

Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

Fulton County, }
 Personally before me comes W. E. Johnson M.D. and Rebecca P. Hollingsworth both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. Rebecca P. Hollingsworth applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this: Her age is 60 years. Her health is not good. She suffers at times with her indigestion and bladder which impairs her general health very much.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 8

day of such 1901

John W. Williams Ordinary,

Fulton County,

W. E. Johnson M.D.

Rebecca P. Hollingsworth

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County, }
 I, John W. Williams Ordinary in and for said County, hereby certify that the applicant, Mrs. R. P. Hollingsworth resides in said county, and has been a bona fide resident of this State since day of 1862, and that the witness, Mr. J. N. Sims J. J. Christians are of trustworthy character, and that their statements are entitled to full faith and credit.
 I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed.
 I further certify that the tax digest of Fulton county shows that applicant returned for taxation in her own name in 1899 _____ dollars worth of property, and in 1900 _____ dollars worth of property.
 Witness my hand and official seal, this 8th day of such 1901
John W. Williams Ordinary,
Fulton County.

Notarizing. - 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; do help you God."
 2. Additional affidavits may be attached, if blank spaces are insufficient.
 3. All affidavits must be made before Ordinary.
 4. Only widows who were the wives of the dead husband while they were soldiers need apply - and are now widows. Those married since 26th April, 1865, not entitled.
 5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1902.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, _____

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1903.

[L. S.]

Executed in the presence of _____

Hallingworth to R. A. Mc
Fulton Co

To Those Herebefore Paid.

1902.

No. 56

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. R. P. Hallingworth

or

Fulton.

County,

Widow of *W. R. Hallingworth*

Co. *B. Phillips* 1st Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

11/5 1902

AND HANDSD TO

[Signature]

OFFICE OF THE COMMISSIONER OF PENSIONS, GA.

Hallingworth to R. A. Mc
Fulton Co

To Those Herebefore Paid.

1903.

No. 57

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. R. P. Hallingworth

or

Fulton.

County,

Widow of *W. R. Hallingworth*

Co. *B. Phillips* 1st Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

11/5 1903

AND HANDSD TO

[Signature]

OFFICE OF THE COMMISSIONER OF PENSIONS, GA.

GENERAL WIDOWS HERETOFORE ATTORNEY PENSIONS

FOR INDIGENT WIDOWS HERETOFORE ATTORNEY PENSIONS

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

R P Hollingsworthwho, being sworn, says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said Statecontinuously ever since Birth 1841. That she is the Widow ofW R Hollingsworth who was a soldier in Company A of the Phillips Legion, Regiment of 4thVolunteers, that he enlisted in said regiment on or about the month of May1862, and served in the Army up to 1865. That he diedon the 30th day of May 1892Age & povertyDependent 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 1862I have been allowed an Indigent pension as a resident of Fulton, County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me,

day of JAN 9 190202.

Ordinary. Post-Office

State of Georgia,

County of Fulton.

I, _____

Ordinary of said County, certify that I am well

acquainted with Mrs. R P Hollingsworth, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 24th day of Nov 1841.Given under my official signature and seal, this the _____ day of JAN 9 190202.

Official Seal.

John P. WilkinsonOrdinary of Fulton County.NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

R P Hollingsworth

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 Birth 1844. That she is the Widow ofW R Hollingsworth who was a soldier in Company A of the Phillips Legion, Regiment of 4thVolunteers, that he enlisted in said regiment on or about the month of May1862, and served in the Army up to 1865. That he diedon the 30th day of May 1892Age & povertyDependent 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 1862.I have been allowed an Indigent pension as a resident of Fulton, County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me,

day of JAN 22 190303.

Ordinary. Post-Office

State of Georgia,

County of Fulton.I, John P. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. R P Hollingsworth, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 24th day of Nov 1841.Given under my official signature and seal, this the _____ day of JAN 22 190303.

Official Seal.

John P. Wilkinson

Ordinary of _____ County.

NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

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

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

day of _____ 1904.

[L. S.]

Executed in presence of _____

Hallingsworth, R.P. (me)
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. 67

**INDIGENT
WIDOW'S PENSION**
FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. R. P. Hallingsworth

Fulton, County.

Widow of

Mr. R. P. Hallingsworth

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/3 2 1904

AND HANDED TO

461

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

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

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

day of _____ 1905.

[L. S.]

Executed in presence of _____

Hallingsworth, R.P. (me)
Fulton County
TO THOSE HERETOFORE PAID.

1905.

No. 7-1

**INDIGENT
WIDOW'S PENSION,**
For year ending Dec. 31, 1905.

PAID TO

Mrs. R. P. Hallingsworth

OF

Fulton, County.

Widow of

Mr. R. P. Hallingsworth

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/20 1905

AND HANDED TO

461

Geo. W. Harrison, State Printer, Atlanta.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton. } R. P. Hollingsworth
who, being sworn, says on oath that she is a bona fide resident of said County of
Fulton, State of Georgia, and that she has RESIDED in said State
continuously ever since 1841. That she is the Widow of
W. R. Hollingsworth who was a soldier in Company
A of the Phillips Leg Regiment of Geo
Volunteers, that he enlisted in said regiment on or about the month of May
1862, and served in the Army up to May 1865. That he died
on the 30 day of May 1892.

A + P

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1867.

I have been allowed an indigent pension as a resident of Fulton
County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the
year ending December 31, 1904.

Sworn to and subscribed before me,
this JAN 22 1904 day of 1904, R. P. Hollingsworth
John P. Westerson Ordinary Post Office

State of Georgia, } I, John P. Westerson,
Fulton County. } Ordinary of said County, certify that I am well
acquainted with Mrs. R. P. Hollingsworth 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 24
day of Nov 1841.

Given under my official signature and seal, this the JAN 22 1904 day of 1904.



Ordinary of Fulton County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton. } R. P. Hollingsworth
who, being sworn says on oath, that she is a bona fide resident of said County of
Fulton, State of Georgia, and that she has RESIDED in said State
continuously ever since 1841. That she is the Widow of
Wm. R. Hollingsworth who was a soldier in Company
A of the Phillips Legion Regiment of
Volunteers, that he enlisted in said regiment on or about the month of
1862, and served in the Army up to May 1864. That he died on
the 30 day of May 1892.

Age and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1867.

I have been allowed an indigent pension as a resident of Fulton
County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the
year ending December 31, 1905.

Sworn to and subscribed before me,
this JAN 2 1905 day of 1905, R. P. Hollingsworth
John P. Westerson Ordinary Post Office Waukegan

State of Georgia, } I, John P. Westerson,
Fulton County. } Ordinary of said County, certify that I am well
acquainted with Mrs. R. P. Hollingsworth who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18 1841.

Given under my official signature and seal, this the JAN 2 1905 day of 1905.



Ordinary of Fulton County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY. }

I, _____ 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 _____ 1906.

_____ [L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY. }

I, _____ hereby authorize

_____ of _____

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

_____ at _____

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

day of _____ 1907.

_____ [L. S.]

Executed in presence of _____

Hallingsworth, R.O.
Fulton County
To These Hereofore Paid.

1906.

No. *30*

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO
Mrs. R. C. Hallingsworth

or
Fulton.

County.

Widow of R. C. Hallingsworth
Co. 10th Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1906.

AND PAID TO

JA

and Treasurer of the State of Georgia, and Treasurer of the State of Georgia.

Hallingsworth, R.O.
Fulton County

To These Hereofore Paid.

1907.

No. *8*

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO
Mrs. R. C. Hallingsworth

or
Fulton.

County.

Widow of R. C. Hallingsworth
Co. 10th Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1907.

AND PAID TO

JA

and Treasurer of the State of Georgia, and Treasurer of the State of Georgia.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES MRS.

Mrs. R. Hollingsworth

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since April 1, 1864. That she is the Widow of John R. Hollingsworth who was a soldier in Company 4 of the Phillips Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of June 1862, and served in the Army up to Captured 1864. That he died on the 30 day of May 1864.

Age and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1862.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this day of JAN 1 1906 1906.
John R. Wilkinson, Ordinary.

R. P. Hollingsworth
Post Office 36 S. Jackson

State of Georgia,
Fulton County.

I, John R. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. R. P. Hollingsworth, 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 1864.

Given under my official signature and seal, this day of JAN 1 1906 1906.

Official Seal

John R. Wilkinson
Ordinary of Fulton County.

NOTE—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES MRS.

Mrs. R. Hollingsworth

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since April 1, 1864. That she is the Widow of John R. Hollingsworth who was a soldier in Company 4 of the Phillips Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of June 1862, and served in the Army up to Captured 1864. That he died on the 30 day of May 1864.

Age and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1862.

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

Sworn to and subscribed before me this day of JAN 2 1907.
John R. Wilkinson, Ordinary.

Mrs. R. Hollingsworth
Post Office 36 S. Jackson

State of Georgia,
Fulton County.

I, John R. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. R. P. Hollingsworth, 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 1864.

Given under my official signature and seal, this day of JAN 2 1907.

Official Seal

John R. Wilkinson
Ordinary of Fulton County.

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

Form No. 5.
**POWER OF ATTORNEY,
STATE OF GEORGIA.**

Know all Men by these Presents, That I,
County,)

County, in said State, do hereby appoint
of

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

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

Executed in the presence of us:

[L. S.]

DIRECTIONS.

If allowed, send amount by

to



Hollis, Harriet J. (Mrs)
Fulton County
1891.

No. 3257

Widows' Pension

— PAID TO —

Mrs. Harriet J. Hollis

— OF —

Fulton

COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

Executed in the presence of us:

[L. S.]

DIRECTIONS.

If allowed, send amount by

to



Widows' Pension

PAID TO

Mrs. Harriet J. Hollis

of Fulton County.

\$100.00.

Warrant Issued

1891

AND HANDLED TO

1891

Printed by the State Printer, Atlanta.

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA.

In person came before me, the undersigned Ordinary

County of Fulton in and for said County, witnesses: James H. Porter, J. M. High, and Wm. Gleason

and (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,

Mrs. Harriet J. Hollis, of the County of Fulton

State of Georgia, is the widow of John Hollis, who was a soldier in Company of the 44th Regiment of Georgia Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 10th day of March 1862

That while in said service, or by reason of said service in the Army, he lost his life as follows: Died of Typhoid Fever in Everett's Hospital at Orange, C. H. Virginia March 2nd 1864. While neither of these witnesses saw him dead, they knew him well before and after his enlistment and knew that he was reported dead, that the report seemed in every way authentic and reliable, fully explained in Mrs. Hollis' affidavit and depositions, have known said Mrs. Hollis ever since her said husband was reported dead and have never since heard of him as being in life and that he has never returned to his home since he was reported dead.

J. M. High
Wm. Gleason

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

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

Ordinary.

1891.

210. 3407

Harriet Harriet J. Hollis
Fulton County

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

STATE OF GEORGIA,

I, *W. L. Leachman* OrdinaryCounty of *Fuller* in and for said County of *Fuller*

State of Georgia, hereby certify that I am acquainted with *Mrs. Harriet J. Hollis* the applicant for a pension in this case, and know, from my own knowledge, or from positive proof presented to me by reputable witnesses, that she resides in this County, and that she resided in the State of Georgia on December 23d, 1890, and has not lived out of the State since that date. I also certify that the witnesses whose testimony she presents to sustain her claim are known to me to be truthful witnesses, entitled to full faith and credit as such. I am fully satisfied that this claim is made in good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

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

24th day of *June* 1891.
 (SEAL)
 ()

W. L. Leachman
 Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

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

No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.

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

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

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

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

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

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

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

By order of the Governor.

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

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Fuller*In person came before me, the undersigned Ordinary, in and for the County of *Fuller*
 Mrs. *Harriet J. Hollis*, who being sworn according to law, says under oath that she is the widow of *John Hollis*, who was a soldier in

 the service of the Confederate States, and served as a member of Company *(Alpha)* of the *44th* Regiment of *Georgia* Volunteers; that he enlisted in said

 service on or about the *10th* day of *March* 1862, and was in the *Confederate* Army up to *March 2nd* 1864. That while in the

 Army, he was on the *2nd* day of *March* 1864, *(See State Note 1)* in

 Hospital known as *Evli's Hospital* at *Orange C.H.* Virginia and there died of *Typhoid Pneumonia*.

Deponent is prepared to prove this by witnesses; and

deponent at the time was informed by telegram first that

her said husband was dying and later by another telegram

patch that he was dead. Before this deponent had

been to said Hospital and had there seen her said husband

sick of said disease and when he was apparently recovering

she returned home and in a few days he died from

a relapse with said disease. She tried to get to him

after his death but could not get there on account of military

operations then in progress. All his papers were afterwards de-

 posited 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 *16th* day of *July* 1854, and that she has resided in Georgia continuously since the *17th* day of *September* 1836; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act. Sworn to and subscribed before me, this, the *23rd* day of *May* 1891. *Mrs. H. J. Hollis*

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.

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

Form No. 2.

STATE OF GEORGIA, County of FULTON
 I, W. L. CALHOUN Ordinary in and for said County of
FULTON State of Georgia, hereby certify that I am acquainted with Mrs.
Harriet S. Hollis the applicant for a pension in this case, and
 know, from my own knowledge, (or from positive proof presented to me by reputable witnesses),
 that she resides in this County, and that she resided in the State of Georgia on December 23,
 1899, and has not lived out of the State since that date. That she is the widow of
John Hollis deceased, and as such has heretofore been allowed a
 pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
30th day of January 1893.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County.

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

In WITNESS WHEREOF, I have hereunto set my hand and seal, this
 day of 1893.

Executed in the presence of us:

DIRECTIONS.

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

Widow's Pension,

for year ending February 15th, 1893.

PAID TO —

Mrs. Harriet S. Hollis

OF —

FULTON COUNTY.

Warrant Issued

1893

AND HANDED TO

Applicant

State of Georgia, FULTON COUNTY, GEORGIA.

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

Form No. 2.

STATE OF GEORGIA, County of FULTON
 I, W. L. CALHOUN Ordinary in and for said County of
FULTON State of Georgia, hereby certify that I am acquainted with Mrs.
Harriet S. Hollis the applicant for a pension in this case, and
 know, from my own knowledge (or from positive proof presented to me by reputable wit-
 nesses), that she resides in this County, and that she resided in the State of Georgia on
 December 23, 1890, and has not lived out of the State since that date. That she is the
 widow of John Hollis 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 1st day of February 1894.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County.

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

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

Executed in the presence of us:

DIRECTIONS.

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

Widow's Pension,

for year ending February 15th, 1894.

PAID TO —

Mrs. Harriet S. Hollis

OF —

FULTON COUNTY.

WARRANT ISSUED

1894

AND HANDED TO

Applicant

State of Georgia, FULTON COUNTY, GEORGIA.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FULTON

Personally comes Mrs.

Harrist J. Hollis

who being sworn, says on oath, that she is a bona fide resident of said County of
FULTON State of Georgia, and that she has resided in said Statecontinuously ever since September 17th 1858 That she is the Widow ofJohn Hollis
(Capt. Morris) of the 44th Regiment of Georgia

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

1862 and served in the Army up to March 2nd 1864 That he lost hislife on the 2nd day of March 1864 (State here

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

he died of Typhoid Pneumonia while in the
Hospital at Orange Co. Virginia, dependent
was informed of his illness and visited him while
in said Hospital, and when he was apparently
recovering from said disease he left home and
returned home, and he died from a relapse of
said disease, she tried to reach him after his
death but was prevented by military operations
then in progress, till her papers were afterwards
destroyed by fire. Her husband never returned
home, and she has never heard of his being in
life since said time, his death was reported
to her by telegrams and also by many letters,
his death directly resulted from his service in the Army

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

30th day of January, 1893.

M. L. Bachman Ordinary.

Post-office

Mrs H. J. Hollis

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally comes Mrs.

County of FULTON

Harrist J. Hollis

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

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

continuously ever since September 17th 1858 That she is the Widow of

John Hollis

who was a Soldier in Company

(Capt. Allison's)

of the

44th

Regiment of

Georgia

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

1862 and served in the Army up to March 2nd 1864 That he lost hislife on the 2nd day of March 1864 (State here

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

he died of Typhoid Pneumonia while in the
Hospital at Orange Co. Virginia, dependent
was informed of his illness and visited him while
in said Hospital, and when he was apparently
recovering from said disease he left home and
returned home, and he died from a relapse of
said disease, she tried to reach him after his
death but was prevented by military operations
then in progress, till her papers were afterwards
destroyed by fire. Her husband never returned
home, and she has never heard of his being in
life since said time, his death was reported
to her by telegrams and also by many letters,
his death directly resulted from his
service in the Army

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, 1893, and now apply for the
allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

30th day of February, 1894.

M. L. Bachman Ordinary.

Post-office

Mrs H. J. Hollis

Form No. 2

Fulton

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the 10th day of Feb 1895.
[Seal] *W. L. ...* Ordinary.

Form No. 5

County.

In Witness Whereof, I have hereunto set my hand and seal, this 10th day of July 1895.

Executed in the presence of us: _____

DIRECTIONS

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

FOR THREE MONTHS PAID.

1895.

No. 567

WIDOW'S PENSION.

for year ending February 15th, 1895.

—PAID TO—
Harrist J. Rollis

—OF—
Fulton

County.

Widow of John Rollis

WARDEN ISSUED
Feb 1 1895

AND MARKED TO
Applicant

State of Wisconsin, March 1895.

Form No. 2

Fulton

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
the 5th day of July, 1896.

{ SEAL } W. L. Calhoun Ordinary.

Form No. 2

County.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 1896.

Executed in the presence of

Golden Harvest
 Golden Community
 FOR THESE MEMBERS PAID.
 1896.
 No. 7304
 WIDOW'S PENSION,
 for year ending February 16th, 1896.
 PAID TO
 Harriet J. Hollis
 or
 Father
 County
 John Hollis
 widow of
 WARRANT ISSUED
 1896.
 AND PAID TO
 J. H. Hollis

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.
Harriet J. Hollis

who being sworn, says on oath, that she is a bona fide resident of said county of
Fulton State of Georgia, and that she has resided in said State
continuously ever since September 17th 1888 That she is the Widow of
John Hollis who was a Soldier in Company
(Capt. Allison's) of the 44th Regiment of Georgia

Volunteers, that he enlisted in said Regiment on or about the month of March
1862 and served in the Army up to March 2nd 1864 That he lost his
life on the 2nd day of March 1864 (State here

full particulars of the husband's death, when, where and from what cause.) (That he died of Typhoid
That he died of Typhoid Pneumonia while in Ewels Hospital at Orange, C.H.
C.H. Virginia, deponent was informed of his illness and visited him while
in said Hospital, and when he was apparently recovering from said disease
she left him and returned home, and he died from a relapse of said disease
she tried to reach him after his death but was prevented by Military Operations
then in progress. All her papers were afterwards destroyed by fire, her husband
never returned home, and she has never heard of his being in life since said
time, his death was reported to her by telegrams and also by many letters
his death directly resulted from his service in the Army.

Deponent swears that she was the wife of said deceased soldier, during his service in the
army as a soldier, and that she has never married since his death aforesaid, that she became
his wife in the year 1854, that Georgia is her home and she resided in this State 23d day
of December, 1890, and has not lived in any other State or locality since that date. I have
been allowed a pension for the year ending February 15th, 1894, and now apply for the
allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this
1st day of Feb 1895.
W. L. Leatham Ordinary.

Mrs. H. J. Hollis
Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.
Harriet J. Hollis

who being sworn, says on oath, that she is a bona fide resident of said county of
Fulton State of Georgia, and that she has resided in said State
continuously ever since September 17th 1882 That she is the Widow of
John Hollis who was a Soldier in Company
(Capt. Allison's) of the 44th Regiment of Georgia

Volunteers, that he enlisted in said regiment on or about the month of March
1862 and served in the Army up to March 2nd 1864 That he lost his
life on the 2nd day of March 1864 (State here

full particulars of the husband's death, when, where and from what cause.) (That he died of Typhoid
Pneumonia while in Ewels Hospital at Orange C.H. Virginia, deponent was informed
of his illness and visited him while in said Hospital, and when he was apparently
recovering from said disease she left him and returned home, and he died from a
relapse of said disease she tried to reach him after his death but was prevented
by Military Operations then in progress. All her papers were afterwards destroyed
by fire, her husband never returned home, and she has never heard of his being in
life, since said time, his death was reported to her by telegrams and also by many
letters. His death directly resulted from his service in the Army.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,
and that she has never married since his death aforesaid, that she became his wife in the year 1854,
that Georgia is her home and she resided in this State 23d day of December, 1890, and has not
lived in any other State or locality since that date. I have been allowed a pension as a resident of
Fulton County for the year ending February 15th, 1895, and now apply for
the pension provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this
5th day of Feb 1895.
W. L. Leatham Ordinary.

Post-office Mrs. H. J. Hollis

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

Form No. 2.

STATE OF GEORGIA, County of Fulton

Ordinary in and for said County of

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

—the applicant for a pension in this case, and

know from my own knowledge (or from positive proof presented to me by reputable witness,) that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of John Hallie 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

30th

day of January

1897.

(Seal)

Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA,

County.

I,

hereby authorize

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

that he remit same to

at

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

day of

1897.

[L. S.]

Executed in the presence of

POWER OF ATTORNEY.

State of Georgia,

County.

I,

hereby authorize

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

at

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

day of

1898.

[L. S.]

Executed in presence of

Hollis, Harriett &
Fulton County
FOR THESE HEREFORE PAID.

1898.

NO. 2,135

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Harriett J. Hollis

Fulton County

Widow of John Hallie

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

2/12

AND HANDLED TO

offt

REG. W. HARRISON, STATE PRINTER, ATLANTA

FOR THESE HEREFORE PAID.

1897.

No. 1074

WIDOW'S PENSION,

For year ending February 15th, 1897.

PAID TO

Harriett J. Hollis

OF

Fulton County.

Widow of John Hallie

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1/30

AND HANDLED TO

offt

1897.

REG. W. HARRISON, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

Hannett Hallie

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

Fulton

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

continuously ever since Sept 17th 1838. That she is the Widow ofJohn Hallie

who was a Soldier in Company

Capt. Allison of the4th Co.Regiment of Georgia

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

1862 and served in the Army up to March 2nd 1864. That he lost hislife on the 2nd day of March 1864. (State here(full particulars of the husband's death, when, where and from what cause.) He died oftyphoid pneumonia while in
Hospital at Orange C. H. Virginia

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1854 that Georgia is her home and she resided in this State 23^d 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 Fulton 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

30th day of May 1897.

Ordinary.

Mrs. H. J. H. Co.
Post-office Atlanta

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

Hannett Hallie

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

Fulton

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

continuously ever since Sept 17th 1838. That she is the Widow ofJohn Hallie

who was a Soldier in Company

Capt. Allison of the4th Co.Regiment of Georgia

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

1862 and served in the Army up to March 2nd 1864. That he lost hislife on the 2nd day of March 1864. (State here

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

Died of typhoid pneumonia while
in Hospital at Orange C. H. Va.

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

I have been allowed a pension as a resident of Fulton 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

2 day of May 1898.W. H. Hulsey Ordinary.Mrs. H. J. H. Co.

Post-Office

State of Georgia,

Fulton County.I W. H. Hulsey

Ordinary of said County, certify that I am well acquainted

with Mrs. Hannett Hallie 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 23rd day of Dec 1890

Given under my official signature and seal this the 7 day of July 1898.

Official
Seal.

Ordinary of Fulton County.

POWER OF ATTORNEY.

State of Georgia,

County, }

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 1899.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, hereby authorize

of

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

at

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

day of 1900.

[L. S.]

Executed in presence of

Hollis, Harriett J.
Fulton Co

For Those Herebefore Paid.

1899.

NO. 818

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. H. J. Hollis

OF

FULTON

County

Widow of

J. C. Hollis

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1899.

AND HANDED TO

all

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

Hollis, Harriett J.
Fulton County
To Those Herebefore Paid.

1900.

NO.

627

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO

Mrs. H. J. Hollis

OF

FULTON

County,

Widow of

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1900,

Feb 15

AND HANDED TO

all

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FULTON

Personally Comes Mrs.

Hannett J. Hollis

FULTON

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 *Sept. 17th*18*38* That she is the Widow of*John Hollis*

who was a soldier in Company

*Capt. Allison 4th*Regiment of *Ca.*

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

186*2* and served in the Army up to *March 2nd*186*4* That he lost hislife on the *2nd* day of *March*18*64* (State here

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

*Died of typhoid pneumonia while
in hospital at Orange, C. Va.*Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18*54*.

I have been allowed a pension as a resident of FULTON County for the year ending February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this

2 day of *Aug* 1899.*M. H. Hulsey* Ordinary.*Mrs. H. J. Hollis*

Post-Office

State of Georgia,
FULTON County.

I W. H. HULSEY.

Ordinary of said County, certify that I am well acquainted

with Mrs. *Hannett J. Hollis* 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 *23rd* day of *Dec* 18*90*Given under my official signature and seal this the *2* day of *Aug* 1899.Official
Seal.

Ordinary of FULTON County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Fulton*

Personally Comes Mrs.

Hannett J. Hollis

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 *Sept. 17th*18*38* That she is the Widow of*John Hollis*

who was a soldier in Company

Capt. Allison 4th Regiment of *Ca.*

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

186*2* and served in the Army up to *March 2nd* 186*4* That he lost hislife on the *2nd* day of *March* 18*64* (State here

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

*Died of typhoid pneumonia
in hospital at Orange, C. Va.*Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18*54*.I have been allowed a pension as a resident of *Fulton* County for the year ending February 15th, 189*9*, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this

13 day of *Aug* 1900.*M. H. Hulsey* Ordinary.*Mrs. H. J. Hollis*

Post-Office

State of Georgia,
Fulton County.*M. H. Hulsey*

Ordinary of said County, certify that I am well acquainted

with Mrs. *Hannett J. Hollis* 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 *23rd* day of *Dec* 18*90*.Given under my official signature and seal, this the *13* day of *Aug* 1900.Official
Seal.Ordinary of *Fulton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of _____

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

at _____

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

day of _____ 1901.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of _____

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

at _____

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

day of _____ 1902.

[L. S.]

Executed in presence of _____

To Those Heretofore Paid.

1901.

No. 161

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. Harriet H. Harris

Fulton County.

Widow of John H. Harris

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

January 17, 1901,

AND HANDRED TO

John W. Lindsey

Gen. W. Harrison, New York, Alaska, Ga.

To Those Heretofore Paid, 7

1902.

No. 40

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. B. J. Harris

of

Fulton County,

Widow of J. Harris

Co. _____ Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

January 17, 1902

AND HANDRED TO

John W. Lindsey

Gen. W. Harrison, New York, Alaska, Ga.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

Mrs. J. H. Hallis

Fulton who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since Sept 17th 1838. That she is the Widow of the Hon. Capt. William who was a soldier in Company 44th Regiment of Pa Volunteers, that he enlisted in said regiment on or about the month of March 2nd 186 4 and served in the Army up to March 2nd 186 4. That he lost his life on the 18 day of 18 (State here particulars of the husband's death, when, where and from what cause)

Died of Typhoid pneumonia in hospital at Camp C.H. Va

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 54

I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1 900, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 14 day of Jan 1901. John R. Wilkinson Ordinary. Post Office Atlanta

State of Georgia,

Fulton County.

Ordinary of said County, certify that I am well acquainted with Mrs. J. H. Hallis, 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 23rd day of Dec 18 90

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

Official Seal.

Ordinary of Fulton County.

LOMER O. VILLOKKEA

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

Mrs. J. H. Hallis

Fulton who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since Sept 17th 1838. That she is the Widow of J. H. Hallis who was a soldier in Company 44th Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 2nd 186 4, and served in the Army up to March 2nd 186 4. That he lost his life on the 18 day of 18 (State here particulars of the husband's death, when, where and from what cause)

Died of Typhoid pneumonia in hospital at Camp C.H. Va

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 54

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1901, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me, this 14 day of Jan 13 1902. John R. Wilkinson Ordinary. Post Office Atlanta

State of Georgia,

Fulton County.

Ordinary of said County, certify that I am well acquainted with Mrs. Mrs. J. H. Hallis, 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 23rd day of Dec 18 90

Given under my official signature and seal, this 14 day of Jan 13 1902.

Official Seal.

Ordinary of Fulton County.

NOTE.—All blank spaces must be filled. Voucher for this pension must be filed January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____, hereby authorize

of

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

at

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

day of _____ 1903.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____, hereby authorize

of

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

at

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

day of _____ 1904.

[L. S.]

Executed in presence of

Hollis Harris Jr.
Fulton Co.

To Those Heretofore Paid.

1903.

No. 113

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO
Mrs. H. J. Kessler

Fulton County,

Widow of J.

Co. Regiment 44th Ga.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1903.

AND PAID TO

1133

W. W. Harris, State Printer, Atlanta.

Hollis Harris Jr.
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. 1074

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. H. J. Kessler

of

Fulton County,

Widow of J.

Co. Regiment 44th Ga.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1904.

AND PAID TO

1133

W. W. Harris, State Printer, Atlanta.

Widows Heretofore Allowed Pensions

Widows Heretofore Allowed Pensions

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Fulton,

PERSONALLY COMES MRS.

Mrs. H. J. Hollis

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

Fulton,

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

continuously ever since Sept 17th 1838. That she is the Widow of

J. Hollis

who was a soldier in Company

of the 44th

Regiment of Ga

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

186 2, and served in the Army up to Mar 2nd 186 4. That he lost his

life on the _____ day of _____ 18 _____ (State here

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

Died of Typhoid pneumonia in hospital at Orange Court House Va

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 54

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

Sworn to and subscribed before me, this _____ day of JAN 22 1903.

Mrs. H. J. Hollis

Post-Office _____

State of Georgia,

Fulton,

County,

I, John R. Williamson

Ordinary of said County, certify that I am well

acquainted with Mrs. Mrs. H. J. Hollis, 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 17

day of Sept 18 38

Given under my official signature and seal, this _____ day of JAN 22 1903.

John R. Williamson

Ordinary of _____

County.

{ Official Seal }

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

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1.

STATE OF GEORGIA,

County of Fulton,

PERSONALLY COMES MRS.

Mrs. H. J. Hollis

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

Fulton,

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

continuously ever since Sept 17 1838. That she is the Widow of

J. Hollis

who was a soldier in Company

of the 44th

Regiment of Ga

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

186 2, and served in the Army up to Mar 2nd 186 4. That he lost his

life on the _____ day of _____ 18 _____ (State here

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

Died of Typhoid pneumonia in hospital at Orange Court House Va

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 54

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this _____ day of JAN 22 1904.

John R. Williamson

Ordinary.

Mrs. H. J. Hollis

Post Office _____

State of Georgia,

Fulton,

County,

I, John R. Williamson

Ordinary of said County, certify that I am well

acquainted with Mrs. Mrs. H. J. Hollis, 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 17

day of Sept 18 38

Given under my official signature and seal, this _____ day of JAN 22 1904.

John R. Williamson

Ordinary of _____

Fulton

County.

{ Official Seal }

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY,

I, _____, 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 _____ 1905.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY,

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1906.

[L. S.]

Executed in presence of _____

1905.

No. 87

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

County, _____

Mrs. Harriet J. Kellie

Widow of _____

Co. _____

Regiment _____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

AND HANDED TO _____

1/20 1905

WJH

The Pensioners' Accounts and Pensions are paid by the State of Georgia, and are not subject to the claims of the United States.

1906.

No. 144

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

County, _____

Mrs. Harriet J. Kellie

Widow of _____

Co. _____

Regiment _____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

AND HANDED TO _____

1/2 1906

WJH

The Pensioners' Accounts and Pensions are paid by the State of Georgia, and are not subject to the claims of the United States.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

Harriet J. Hollis

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

Fulton

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

continuously ever since all her life. That she is the Widow of

John Hollis who was a soldier in Company

of the 44th Regiment of Georgia

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

1862, and served in the Army up to 1864. That he lost his

life on the 2 day of March 1864. (State here

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

Died Hospital disease

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a

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

the year 1854

I have been paid a pension as a resident of Fulton County for the

year ending December 31, 1904, and now apply for the pension provided by law for the year ending

December 31, 1905.

Sworn to and subscribed before me, this JAN 2 day of 1905.

John P. Richardson Ordinary.

Harriet J. Hollis Post-Office Atlanta

State of Georgia, Fulton County.

I, John P. Richardson Ordinary of said County, certify that I am well

acquainted with Mrs. Harriet J. Hollis Who made the above affidavit and

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

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

day of 18

Given under my official signature and seal, this JAN 2 day of 1905.

John P. Richardson Ordinary of Fulton County.

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

Harriet J. Hollis

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

Fulton.

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

continuously ever since Birth. That she is the Widow of

John Hollis who was a soldier in Company

of the 44th Regiment of Georgia

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

1862, and served in the Army up to 1864. That he lost his

life on the 2 day of March 1864. (State here

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

Died Hospital disease

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a

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

the year 1854

I have been paid a pension as a resident of Fulton County, for the

year ending December 31, 1905, and now apply for the pension provided by law for the year ending

December 31, 1906.

Sworn to and subscribed before me, this JAN 1 day of 1906.

John P. Richardson Ordinary.

Harriet J. Hollis Post-Office 1007 Fulton

State of Georgia, Fulton County.

I, John P. Richardson Ordinary of said County, certify that I am well

acquainted with Mrs. Harriet J. Hollis who made the above affidavit, and

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

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

day of 18

Given under my official signature and seal, this JAN 1 day of 1906.

John P. Richardson Ordinary of Fulton County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1906.

Georgia Morgan County } Before the undersigned attest
 M. J. Proctor and J. J. Cooper
 who being sworn dep. on oath that they
 were acquainted with John H. Hollis the
 husband of Mrs. Hammet J. Hollis in his life
 time, and knew them as man and wife, that
 they knew said John Hollis as a private soldier
 in Capt. Allison's Company 4th Regiment
 Georgia Volunteers in Nov. 3-4 and until
 the death of said John Hollis. that Dep. ments
 saw said John Hollis dying in Ewell's
 Hospital at Orange C. N. Virginia.
 The date of the death of said John Hollis Dep-
 ments cannot exactly recollect but knows
 it was early in the Spring of 1864. Dep-
 ments remembers meeting Mrs. Hammet J. Hollis
 in Virginia at about the time of the
 death of her said husband. Dep. ments
 was not present when said John Hollis
 actually expired, but Dep. ments saw
 him dying as already stated and imme-
 diately afterwards learned of his death, and knows
 it was reported to his widow and to his officers
 and that said John Hollis has never returned
 to his home or been heard of by Dep. ments
 ariving in life since he was so reported dead.
 Dep. ments knows that Mrs. Hammet J. Hollis
 of 200 East Jones Street, Atlanta, Ga, is the
 widow of said deceased and has never since

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I

hereby authorize

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

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

day of _____ 1907.

[L. S.]

Executed in presence of _____

Hollis Hammet J.

To These Herebefore Said.

1907.

No.

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO

Mrs. Hammet J. Hollis

OF

County,

Widow of John Hollis

Co. C 44th Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1907.

AND HANDLED TO

Sam W. Hammet, State Printer, Atlanta.

his death intermarries with anyone
else. September 8th, 1891 was quarantined 3-8 (Lungs Right)
^{5 in. by 4 in.}
Sworn to and subscribed
before me this 7th day of June 1891.
D. B. Baldwin
Ordinary Morgan, Cal., Ca.
Sworn to and subscribed
before me June 17, 1891 -
Wm. J. Master, Notary Public.
D. B. Baldwin
Ordinary Morgan, Cal., Ca.

Sum to and Subscribed

D. B. Baldwin

Sworn to and subscribed

before me June 17, 1891 -
C. W. M. M. M.

D. B. Baldwin

Cardinal Moran, Co. Su.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA.

PERSONALLY COMES MRS.

Harriet L. Hollis

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

Fulton.

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

continuously ever since

That she is the Widow of

—who was a soldier in Company

of the 44th Regiment of Inf

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

186 2, and served in the Army up to _____

life on the 2nd day of March 1964

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

Dead Hospital Disease, Mex. 2" 1864

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

I have been paid a pension as a resident of Fulton County, for the year ending December 31, 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me
this 2nd day of JAN 1909.
John R. Wilkinson Ordinary.
Post Office _____

State of Georgia,
Fulton County,)
I, John A. Williams,
Ordinary of said County, certify that I am well
acquainted with Mrs. Barrett H. Wallis, who made the affidavit,
and am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18.

Given under my official signature and seal, this the 2nd day of JAN, 1907.

Official
Notary Public

John R. Wilkinson.

Ordinary of Tulsa County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

County, }

I, _____ hereby authorize _____

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

Witness my hand this _____ day of _____ 190_____

Executed in presence of _____

Ordinary,

County, _____

{SEAL}

Holmes Elizabeth
Fulton County (Mo)

No. _____

WIDOW'S INDIGENT PENSION

Name *Elizabeth Holmes*
County *Fulton*
Widow of *Berry A. Holmes*

Approved _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

GEORGE W. HARRISON, STATE PRINTER, ATLANTA

9/21/07

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

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

Witness my hand this _____ day of _____ 190__.

Executed in presence of

Ordinary,

County.

L. B.

SEAL

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

_____ County.

Elizabeth Holmes of said State and County, desiring to avail herself of the pension allowed to Edigent Widows of Confederate Soldiers, under Act of General Assembly, passed December 19, 1900, hereby submits her proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.)
Elizabeth Holmes, Atlanta, Ga.
2. How long and since when have you been a resident of this State?
Since 1891-
3. When and where were you born?
Dec. 14th 1840, Cummett, Ga.
4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license in every case.)
Sept. 10th 1865, Perry, Ga.
5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States?
1861-1865, 1st Ga. Regt. Volunteers
6. How long did your husband serve in said Company and Regiment? Until 6th April 1865, when he was taken prisoner.
7. When and where did your husband's Company and Regiment surrender and was discharged?
At the surrender of the 1st Ga. Regt. April 6th 1865.
8. What your husband's rank at the time and place when his Company and Regiment surrendered?
No rank in the 1st Ga. Regt.
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?
In 1st Ga. Regt. as private.
10. When and where did your husband die?
July 23rd 1865, in Ga.
11. Which of the following grounds do you base your application for pension, viz: First—Age and Poverty; Second—Infirmary and Poverty; or Third—Blindness and Poverty?
Age and Poverty
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.
Heart trouble, kidney disease, and age.
13. What has been your occupation since your husband's death?
None
14. How much can you earn gross, by your own exertion or labor?
None
15. What property, real or personal, or income do you have or possess, and its gross value?
None
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift have you made of the same?
None
17. In what counties did you reside in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what property did you return for taxation?
Georgia
18. How have you been supported since death of husband and especially for 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906 and 1907?
By my son, William Holmes.
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income?
\$100. None
20. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907—how much did you receive for each year?
None
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property?
None
22. Have you ever made application for pension before?
None
23. How many applications have you made for a pension, and under what claim?
None

Sworn to and subscribed before me, this the

10th day of Sept 1907

_____ Ordinary, _____ County.

WIDOW'S

INDIGENT PENSION

Elizabeth Holmes

County DeKalb

William B. Holmes

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

9/21/07

Isabella County.

1. What is your name and where do you reside? Dyer & E. Morgan

- the States, and in what Company and Regiment did he enlist, and how do you know this? May 1962
Remin, Summitt Co Ga - Co 2 - 16th Ga Regt

- whom? None

Sworn to and subscribed before me this 10 day of Sept 1907
John W. Freeman Ordinary,
Sutton County.
G. N. Norgan Witness

STATE OF GEORGIA.

Franklin County.

Personally before me comes

physicians of said County who, being severally sworn, say on oath that they have examined carefully Mrs. Elizabeth McDaniel applicant for a Pension under act of 1900, and after such personal examination say that her physical condition is this I recommend as
absolutely unfit for the pay of Pensioner as
a general matter that she has no claim on
Government and therefore that there is nothing
to be done in regard to it by any kind of Prothonotary
and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 10 day of September 1907.
John W. Wilson Ordinary,
Fullon Court

STATE OF GEORGIA.

Fulton County

I, John Rosecrance, Ordinary, in and for said County, hereby certify that the applicant, Mrs. Elizabeth Roberts has been a bona fide resident of this State since the _____ day of _____, 18____, and that the witness, Mr. J. B. Morgan are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of _____ County shows that applicant
returned for taxation in her own name in 1899 _____ dollars worth
of property, and in 1900 _____ dollars worth
in 1901 _____ dollars worth of property,
in 1902 _____ dollars worth of property,
in 1903 _____ dollars worth of property, and

Witness my hand and official seal this 20th day of September 1907 dollars worth of property.

{ SEAL } John D. Dickinson Ordinary, Illinois County

Before any questions are answered, the Ordinary shall swear applicants and the witnesses in the following words: "I 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 true; and you shall only join to this God."

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

3. All affidavits must be made before Ordinary.

4. Only widows who were the wives of the deceased husband while they were soldiers need apply, and are now widows. (Those married since the 6th of April, 1861, not included.)

5. Witnesses and two Physicians are necessary to make out claims.

6. A duly certified copy of marriage license in every case, or show why it cannot be obtained.

21. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes

22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? None

23. What property, effects or income did applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition did she make of it? None

24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? None

25. What is applicant's physical condition and her chances and ability to earn a support? old age - ve

month herein prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of _____ County shows that applicant returned for taxation in her own name in 1899 _____ Dollars worth of property, and in 1900 _____ Dollars worth of property, in 1901 _____ Dollars worth of property, in 1902 _____ Dollars worth of property, and in 1903 _____ Dollars worth of property.

Witness my hand and official seal this 27th day of September, 1907.

SEAL. John D. Mellett Ordinary, _____ County.

Notes.--1 Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the oaths you shall give will be the whole truth for God, you God."

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

3. All affidavits must be made before Ordinary.

4. Only widows who were the wives of the dead husbands while they were soldiers need apply--and are now widows. Those married since the 6th of April, 1865, not entitled.

5. Witnesses and two affidavits are necessary to make out claims.

6. A single certified copy of marriage license in every case, or show why it cannot be obtained.

No. 264

Marshall & Brown Co., Stationers, Nashville, Tenn.

State of Georgia, Lawrence County.

ORDINARY'S OFFICE--ss.

I, John D. Mellett, Ordinary and ex-officio Clerk of the Court or Ordinary of said County, do hereby certify that I have compared the foregoing copy of Marriage Record of R. D. Harris and Elizabeth Paulina

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the 27 day of Aug, 1907.

John D. Mellett
Ordinary and ex-officio C. C. O.

Marriage License.

STATE OF GEORGIA, Gwinnett County.

~~To Any Minister of the Gospel, Judge, or Justice of the Peace.~~

You are hereby authorized to join *B. A. Holmes*
and *Elizabeth Rawlins*

in the

Holy State of Matrimony

if they are such persons as are by law authorized to marry, and this shall be your License for so doing; and you are required to return to me this License, together with the accompanying Certificate, properly certified to as to the facts and date of said marriage.

Given under my hand and official signature, this 19 day of Aug 1861

L. T. Rakestraw ORDINARY.

State of Georgia, Gwinnett County.

I HEREBY CERTIFY, That *B. A. Holmes*

and *Elizabeth Rawlins*

were this day duly

joined in matrimony by me. This 22 day of Aug 1861

J. M. Byrd, J. P. C.

POWER OF ATTORNEY.

STATE OF GEORGIA, }

County, }

Know all Men by these Presents, That I,

_____ of _____
County, in said State, do hereby appoint

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

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

Executed in the presence of us:

[L. S.]

DIRECTIONS.

If allowed, send amount by _____

me at _____

_____ and oblige _____

to _____



Holmes, Louisiana
Fulton County
1891.

No. 3202

Widows' Pension

PAID TO —

Ms. Louisa Holmes
Fulton COUNTY.

3100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA, }
County. }

Know all Men by these Presents, That I,

County, in said State, do hereby appoint _____ of _____

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____, 189 _____ [L. s.]

Executed in the presence of us: _____

DIRECTIONS.

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



Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

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

Mrs. Louisa Holmes, who being sworn according to law, says under oath that she is the widow of J. B. Holmes, who was a soldier in the service of the Confederate States, and served as a member of Company D, of the 1st Confederate Regiment of _____ Volunteers; that he enlisted in said

service on or about the 8th day of March 1861, and was in the Confederate Army up to December 1861. That while in the Army, he was on the _____ day of December 1861. (See Note No. 1) Killed in the battle of Santa Rosa Island.

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 19th day of August 1848, and that she has resided in Georgia continuously since the _____ day of her birth 18____; that Georgia is her home, and was such on the 31st day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the _____ day of June 1891.
Louisa Holmes
M. B. Holmes 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 shown positively to have resulted from the service of the soldier in the Army and not from any other cause.

1891.
Mo. 3202
Widow's Pension
PAID TO—
Mrs. Louisa Holmes
Fulton
COUNTY.
\$100.00.
Warrant Issued
AND HANDED TO
1891
Gives to HARRISON, State Printer, Atlanta

Affidavit for Three Witnesses.

Form No. 2.

State of Georgia,

County of Fulton

In person came before me, the undersigned Ordinary

in and for said County, witnesses

John A. Holmes, J. P. Andrewell
William Mc Cormick each known to said Attesting Officer as truthful,
 reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
 Mrs. Louisa P. Holmes of the County of Fulton
 State of Georgia, is the widow of Jaynes P. Holmes who was a soldier in
 Company D. of the 1st Confederate Regiment of Georgia Volunteers.
 That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
 about the Eighth day of March, 1861. That while in said service, or by
 reason of said service in the Army, he lost his life as follows: On Santa
Rosa Island, Florida, in battle,
on the 9th day of October 1861.

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

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

Sworn to and subscribed before me, this,

17 day of June 1891.

W. B. Leatham
 Ordinary.

William M. Cormick
J. P. Andrewell
J. A. Holmes

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

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

Form No. 3.

State of Georgia,

County of Fulton

I, W. B. Leatham Ordinary

in and for said County of Fulton

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

17

day of

June

1891.



W. B. Leatham

Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

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

No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.

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

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

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

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

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

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

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

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

By order of the Governor.

W. H. HARRISON,

Sec. En. Department.

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

Form No. 2.

STATE OF GEORGIA, County of FULTON
I, W. L. CALHOUN Ordinary in and for said County of
State of Georgia, hereby certify that I am acquainted with Mrs.
Louisa Holmes 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
James B. Holmes deceased, and as such has heretofore been allowed a
pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
1st day of January 1893.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of County, in said State, do hereby appoint
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;
herby authorizing my said Attorney to receipt in my name for any Warrant that may be
issued by the Governor, or for any sum of money which may be coming to me for the reason
aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this
day of 1893.

Executed in the presence of us:

DIRECTIONS.

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

WIDOWS' PENSION,

for year ending February 15th, 1893.

PAID TO—

OF—

FULTON

COUNTY.

Warrant Issued

AND HANDED TO

1893

W. L. Calhoun, Ordinary.

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

Form No. 2.

STATE OF GEORGIA, County of FULTON
I, W. L. CALHOUN Ordinary in and for said County of
State of Georgia, hereby certify that I am acquainted with Mrs.
Louisa Holmes 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 James B. Holmes 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 1st day of February 1894.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of County in said State, do hereby appoint
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; herby authorizing my said Attorney to receipt in my name for any
Warrant that may be issued by the Governor, or for any sum of money which may be
coming to me for the reason aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this
day of 1894.

Executed in the presence of us:

DIRECTIONS.

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

WIDOWS' PENSION,

for year ending February 15th, 1894.

PAID TO—

OF—

FULTON

COUNTY.

WARRANT ISSUED

AND HANDED TO

1894

W. L. Calhoun, Ordinary.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FULTON

Personally comes Mrs.

*Louisa Holmes*who being sworn, says on oath, that she is a bona fide resident of said County of
FULTON State of Georgia, and that she has resided in said Statecontinuously ever since *her birth* 18 *March* That she is the Widow of
James C. Holmes who was a Soldier in Companyof the *First Confederate* Regiment ofVolunteers, that he enlisted in said Regiment on or about the month of *March*
1861 and served in the Army up to *December* 1861 That he lost his
life on the *9th* day of *October* 1861 (State here

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

*That he was killed in the battle of Santa
Rosa Island, Florida in battle on the 9th day
of October 1861.*

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 1858; 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, 1893.

Sworn to and subscribed before me, this

30th day of *FEBRUARY* 1893.*W. L. Buchanan* Ordinary.

Louisa Holmes
Mrs.
Post-office *Atlanta Ga.*

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FULTON

Personally comes Mrs.

Louisa Holmes

who being sworn, says on oath, that she is a bona fide resident of said County of
FULTON State of Georgia, and that she has resided in said State
continuously ever since *her birth* 18 *March* That she is the Widow of
James C. Holmes who was a Soldier in Company

of the *First Confederate* Regiment of

Volunteers, that he enlisted in said Regiment on or about the month of *March*
1861 and served in the Army up to *December* 1861 That he lost his
life on the *9th* day of *October* 1861 (State here

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

*That he was killed in the battle of Santa Rosa Island, Florida in
battle on the 9th day of October 1861.*

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 1858; 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

1st day of *February* 1894.*W. L. Buchanan* Ordinary.

Post-office

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

Form No. 4

STATE OF GEORGIA, County of

Fulton

I, W. L. Calhoun Ordinary in and for said County of

Fulton State of Georgia, hereby certify that I am acquainted with Mrs. Louise Holmes 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 James F. Holmes deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 27th day of Feb'y 1895.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 5

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 as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

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

day of 1895.

[L. S.]

Executed in the presence of:

DIRECTIONS.

Send amount by me at to and oblige

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

Form No. 4

STATE OF GEORGIA, County of

Fulton

I, W. L. Calhoun

Ordinary in and for said County of

Fulton

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

Louisa Holmes

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 James F. Holmes

deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 27th day of Feb'y 1895.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 5

STATE OF GEORGIA,

County.

I, hereby authorize

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

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

day of 1895.

[L. S.]

Executed in the presence of

1896.
No. 9306

WIDOW'S PENSION,

for year ending February 15th, 1906.

PAID TO

Louisa Holmes

Fulton

County.

Warrant issued

27

AND DATED TO

1896.

W. L. Calhoun, Clerk

1895.

No. 570

WIDOW'S PENSION,

for year ending February 15th, 1895.

PAID TO

Louisa Holmes

Fulton County.

Warrant issued

27

AND DATED TO

1895.

W. L. Calhoun, Clerk

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.
Louisa Holmes

who being sworn, says on oath, that she is a bona fide resident of said county of Fulton State of Georgia, and that she has resided in said State continuously ever since her birth 18 That she is the Widow of James F. Holmes who was a Soldier in Company

1 of the First Confederate Regiment of Volunteers, that he enlisted in said Regiment on or about the month of March 1861 and served in the Army up to December 1861 That he lost his life on the 9th day of October 1861 (State here

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

That he was killed in the battle Santa Rosa Island, Florida in battle on the 9th day of October 1861

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension 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 9th day of Feb'y 1895.

W. L. Bachman Ordinary.

Post-office

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

Louisa Holmes

who being sworn, says on oath, that she is a bona fide resident of said county of Fulton State of Georgia, and that she has resided in said State continuously ever since her birth 18 That she is the Widow of James F. Holmes who was a Soldier in Company

1 of the First Confederate Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1861 and served in the Army up to December 1861 That he lost his life on the 9th day of October 1861 (State here

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

That he was killed in the battle Santa Rosa Island, Florida in battle on the 9th day of October 1861

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Fulton 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

9th day of Feb'y 1896.

W. L. Bachman Ordinary.

Post-office

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

Form No. 2.

STATE OF GEORGIA, County of Fulton

W. H. Bailey
Fulton
Louisa Holmes

Ordinary in and for said County of

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

Louisa Holmes 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, 1880, and has not moved out of the State since that date. That she is the widow of James E. Holmes deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereto set my hand and affixed the seal of my office, this 30th day of May 1897.

SEAL

W. H. Bailey

Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

hereby authorize

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

at

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

day of 1897.

[L. S.]

Executed in the presence of

POWER OF ATTORNEY.

State of Georgia,

County.

I, hereby authorize

f

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 1898.

[L. S.]

Executed in presence of

Holmes, Louisa
Fulton County
For These Heretofore Paid

1898.

NO. 2137

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Louisa Holmes

OF

Fulton County

Widow of J. E. Holmes

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

7/2

AND HANDLED TO

Chick

Geo. W. HARRISON, STATE PRINTER, ATLANTA

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Louisa Holmes

OF

Fulton County

Widow of James E. Holmes

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1/30

AND HANDLED TO

Chick

1897.

Geo. W. HARRISON, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Fulton

Personally Comes Mrs.

Louisa Holmes

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

Fulton

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

continuously ever since her Birth 18 That she is the Widow of

James E. Holmes who was a Soldier in Company

D of the First Confederate Regiment of Georgia

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

1861 and served in the Army up to December 1861 That he lost his

life on the 9th day of Oct 1861 (State here

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

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

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

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

Sworn to and subscribed before me, this
30th day of Jan 1897.
M. H. Hulsey Ordinary.Louisa Holmes
Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Fulton

Personally Comes Mrs.

Louisa Holmes

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

Fulton

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

continuously ever since her Birth 18 That she is the Widow of

James E. Holmes who was a Soldier in Company

D of the 1st Confederate Regiment of Georgia

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

1861 and served in the Army up to December 1861 That he lost his

life on the 9th day of October 1861 (State here

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

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

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

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1858.

I have been allowed a pension as a resident of Fulton 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 Feb 1898.

M. H. Hulsey Ordinary.

Louisa Holmes
Post-Office

State of Georgia,

Fulton County.

I, H. H. Hulsey

Ordinary of said County, certify that I am well acquainted

with Mrs. Louisa Holmes 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 23rd day of Dec 18 90

Given under my official signature and seal this the 2 day of Feb 1898.

M. H. Hulsey

Ordinary of Fulton County.

Official Seal.

POWER OF ATTORNEY.

State of Georgia,

County. }

I, _____ hereby authorize _____
of _____

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

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

day of _____ 1899.

[L. S.]

Executed in presence of _____

Holmes, Georgia

Fulton Co

For These Heretofore Paid.

1899.

NO. 820

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. Louisa Holmes

OF

FULTON

County

Widow of *James E.*

RICHARD JOHNSON,

(Commissioner of Pensions.

WARRANT ISSUED

1899.

2/1

AS WARRANTED TO

W. H. Harrison

GEO. W. HARRISON, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FULTON

Personally Comes Mrs.

Louisa Holmes

FULTON

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

Birtle
James E. Holmes

18 That she is the Widow of

D of the 1st Confederate Regiment of Ga.

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

1861 and served in the Army up to Dec 1861 That he lost his

life on the 9th day of Oct 1861 (State here

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

Killed in the battle Santa Rosa
Island Fla Oct 9th 1861.

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 1858.

I have been allowed a pension as a resident of FULTON County for the year ending

February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this

1 day of July 1899.
M. M. M. Ordinary.Louisa E. Holmes
Post-OfficeState of Georgia,
FULTON County.

I H. HULSEY.

Ordinary of said County, certify that I am well acquainted with Mrs. Louisa Holmes 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 23rd day of Dec 1890

Given under my official signature and seal this the 1 day of July 1899.

Official
Seal

M. M. M. Ordinary of FULTON County.

with Mrs. Louisa Holmes 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 23rd day of Dec 18 90.

Given under my official signature and seal this the 1 day of Feb 1899.

{ Official
Seal. }

Ordinary of FULTON

County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

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

Witness my hand this _____ day of _____ 190_____

Executed in presence of _____

Ordinary.

County _____

L. S.

{
SEAL
}

Holstein, Anna M.
Fulton &

OK

No. _____

WIDOW'S

Indigent Pension
1901.

Name *Anna M. Holstein*

County *Fulton*

Witness *George Holstein*

John W. Lindsey

JOHN W. LINDSEY

WARRANT SIGNED BY

1901-1902

26. Is applicant able to earn a support at labor of any sort, if not why? _____
27. How was she supported for 1899 and 1900? _____
28. How much did applicant contribute to her support for last two years? _____
29. Give a full and complete statement of applicant's physical condition? *old & feeble*
Physical unable to do labor outside of home
30. What interest have you in the recovery of this pension by the applicant? *none*

Sworn to and subscribed before me this 19 day of Sept 1901 }
John R. Wickham } A. J. Haggood
Fulton County. } P. P. Cleveland
Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,
Fulton County.
Personally before me came E. R. King, M.D. and
physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. _____ applicant for a Pension under Act of 1900, and after

personal examination say that her physical condition is this: *She has been and is now a constant sufferer from general debility and muscular relaxation, so unable to do any work of house. Now suffering as above described from a post-operative condition*
and we have an interest in said pension if allowed.

Sworn to and subscribed before me this 18 day of Sept 1901 }
John R. Wickham } E. R. King, M.D.
Fulton County. } L. R. King, M.D.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,
Fulton County.
I, John R. Wickham Ordinary for said county, hereby certify that the applicant, Mrs. A. M. Cleveland is a bona fide resident of this State since 14th day of August 1881 and that the witnesses, Mr. A. J. Haggood and P. P. Cleveland are of trustworthy character, and that their statements are entitled to full faith and credit.
I do further certify that the affidavit was read to the applicant in the presence of the witnesses, and the full text of the affidavit was read to the applicant and signed and subscribed.
I further certify that the tax digest of Fulton county shows that applicant returned for taxation in her own name in 1899 _____ dollars worth of property, and in 1900 _____ dollars worth of property.
Witness my hand and official seal, this 15th day of November 1901.

SEAL

Notes.—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will give answers true 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 space is available.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husband while they were soldiers need apply—and are now widows. Those married since 22nd April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.

Questions for Witnesses.

STATE OF GEORGIA,

Fulton County.

As J. P. Cleveland & A. J. Haggood of said State and County, having been presented as a witness in support of the Application of Mrs. A. M. Cleveland for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? J. P. Cleveland, 18 Quincy St Atlanta, A. J. Haggood, 219 S. Pryor St Atlanta
2. Are you acquainted with the applicant, Mrs. Cleveland Yes
If so, how long have you known her? 12 years for Cleveland, 21 years for Haggood
3. Where does she reside, and how long and since when has she been a resident of this State?
City of Atlanta, we don't know
4. When and where was she born? _____
5. Were you ever acquainted with her husband? Yes
6. Where did he reside in 1861? Don't know
7. When and to whom was he married? _____
8. When and where was he born? _____
9. How long have you known him? 12 years for Haggood & years for Cleveland
10. When and where did her husband enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this? We don't know

11. Were you a member of the same Company and Regiment? No
 12. How long did he perform regular military duty? Don't know
 13. When and where was his Company and Regiment surrendered and discharged from service? _____
 14. Were you with the command when it surrendered? No
 15. Was _____ the husband of applicant present? _____
 16. If not present, where was he? _____
 17. When and where did he leave his Command? _____
- For what cause? _____
By whose authority he left? _____
How do you know all this? (State fully and clearly.) _____

18. When and where did her husband die? Atlanta, Ga
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? Atlanta, we don't know prior to our acquaintance
20. Do you of your own knowledge know that applicant is the lawful widow of George Holstein? We know absolutely and are sure
21. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? None as far as we know
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? None
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? None that we know
25. What is applicant's physical condition and her chances and ability to earn a support? old & feeble

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, hereby authorize
County, to receive and receipt for the pension allowed and that he
remits the same to me at
by his check or registered mail.

Witness my hand this day of 190

Executed in presence of

Ordinary.

County

L. S.

Questions for Applicant.

STATE OF GEORGIA.

County.

Fullon
A M Hollister
of said State and County, desiring to
avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the
following questions, depose and answers as follows:

1. What is your name and where do you reside? 1900 State, County and Post Office
Mrs. Annie Mary Elizabeth Hollister La-Chaten Atlanta Ga
2. How long and since when have you been a resident of this State? Twenty years
17th August 1881
3. When and where were you born? Europe at Rhine
4. When and where was your husband born—state his full name, and when were you and he married?
Mr. Charles Germany, George Hollister
Mr. Orleans, La.
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? In 1861—Doubt them the Company
Feb 20th La. Regiment
6. How long did your husband serve in said Company and Regiment? They whole
war through, and was imprisoned
7. When and where did your husband's Company and Regiment surrender and was discharged?
I cannot remember. I have no friend
8. Was your husband present at the time and place when his Company and Regiment surrendered?
I never knew him to be a coward, and suppose he was.
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? I suppose he was, as he
was a prisoner, and had no cause for
not being present when surrender.
10. When and where did your husband die? In Atlanta in 1891
Feb 20th
11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty?
Infirmary + Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight?
a male woman from age 40 and older
could carry for an infirm husband
13. What has been your occupation since your husband's death? Keep house
and washing + sewing.
14. How much can you earn gross, by your own exertion or labor? So the male
15. What property, real or personal, or income do you have or possess, and its approximate value?
I have not over a piece of furniture
16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1890-1900, and what disposition, if any, by sale or gift, have you made of the same?
Nothing left me since 1889 or 1890.
17. In what counties did you reside in 1880 and 1900, and what property did you return for taxation?
Fullon County Ga—Nothing
18. How have you been supported since death of husband, and especially for 1890 and 1900?
By assistance of friends + washing.
19. How much did you support yourself or family for each year, and how much did you contribute by your own labor or income? About \$300 per month for washing.
20. What was your employment during 1890 and 1900—how much did you receive for each year?
Keeping house + washing, about \$6.00
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? Yes—2 children—cannot tell they are
22. Have you ever made an application for pension before? No
23. How many applications have you made for a Pension, and under what class? None

Sworn to and subscribed before me this 18

day of Sept 1901

John W. Williams Ordinary,

of Fullon County.

Annie M Hollister

WIDOWS
Indigent Pension
1901.
No. 18
Fullon County, Ga.
Annie M Hollister
Sept 18, 1901
John W. Williams
Ordinary
Fullon County, Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

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 1904

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, hereby authorize

of

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

at

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

day of 1905.

[L. S.]

Executed in presence of

Helston, Anna M. E.
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. 46

INDIGENT

WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. C. M. Helston

Fulton

County,

Widow of

James Helston

Co. 2nd La. Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

1904.

AND HANDSD TO

461

Geo. W. Harrison, State Printer Atlanta

Helston, A. M. E. Comr.
Fulton County
TO THOSE HERETOFORE PAID.

1905.

No. 47

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. A. M. E. Helston

Fulton

County,

Widow of *James Helston*

Co. 2nd La. Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

1905.

AND HANDSD TO

471

Geo. W. Harrison, State Printer Atlanta

Form No. 2.
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of **Fulton**.

PERSONALLY COMES MRS.

A. M. Hollister

who, being sworn, says on oath that she is a bona fide resident of said County of **Fulton**, State of Georgia, and that she has RESIDED in said State

continuously ever since 1881. That she is the Widow of

Geo. Hollister who was a soldier in Company *C* of the *20th Ga. Vol. Regt.* Regiment of *Ga.*

Volunteers, that he enlisted in said regiment on or about the month of *Feb 12*

1862, and served in the Army up to *Apr* 1863. That he died

on the *Impaired at close of war* day of *18*

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 **Fulton** County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this *10th* day of *JAN 22* 1904 1904.

Post Office

Ordinary.

State of Georgia,
Fulton County.

John R. Wilkinson

Ordinary of said County, certify that I am well acquainted with Mrs. *A. M. Hollister* 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 *17* day of *Aug* 1881.

Given under my official signature and seal, this *10th* day of *JAN 22* 1904 1904.



John R. Wilkinson
Ordinary of **Fulton** County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

Form No. 2.
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of **Fulton**.

PERSONALLY COMES MRS.

A. M. C. Hollister

who, being sworn says on oath, that she is a bona fide resident of said County of **Fulton**, State of Georgia, and that she has RESIDED in said State

continuously ever since *36 years*. That she is the Widow of

Geo. Hollister who was a soldier in Company *C* of the *20th* Regiment of *Ga.*

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

1861, and served in the Army up to *close of war* 1863. That he died on

the *29* day of *June* 1891.

Age and poverty

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

I have been allowed an Indigent pension as a resident of **Fulton** County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me,

this *10th* day of *JAN 22* 1905 1905.

Post Office

Ordinary.

State of Georgia,
Fulton County.

John R. Wilkinson

Ordinary of said County, certify that I am well acquainted with Mrs. *A. M. C. Hollister* 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 *26 years* day of *18*

Given under my official signature and seal, this *10th* day of *JAN 22* 1905 1905.



John R. Wilkinson
Ordinary of **Fulton** County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton COUNTY,
I, *Wm. Mc Holstein*, hereby authorize
Wm. Mc Holstein of *said County*
to receive and receipt for the pension paid hereon, and request that he remit same to
me at *my home*

In Witness Whereof, I have hereunto set my hand and seal, this *19th*
day of *January*, 1906. *Wm. Mc Holstein* [L. S.]
mark

Executed in presence of

James H. Robinson
Edman

Holstein, C. M. E. (Wid)
Fulton County
To Those Heretofore Paid.
1906:
No. *41A*
INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1906.
Wm. A. M. C. Holstein
PAID TO
OF
Fulton County,
Widow of *Wm. Holstein*
Co. *2nd Ga. Regiment*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
11/10 1906
AND HANDED TO
Wm. Mc Holstein
SEE PENSION RECEIPTS AND PAYMENTS ON FILE IN OFFICE.

POWER OF ATTORNEY.

STATE OF GEORGIA,

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

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

Executed in presence of

Holstein, C. M. E. (Wid)
Fulton Co
To Those Heretofore Paid.
1907.
No. *89*
INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1907.
Wm. A. M. C. Holstein
PAID TO
OF
Fulton County,
Widow of *Wm. Holstein*
Co. *2d Ga. Regiment*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
11/18
AND HANDED TO
Wm. Mc Holstein
SEE PENSION RECEIPTS AND PAYMENTS ON FILE IN OFFICE.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

Mrs. A. M. C. Walsteinwho, being sworn says on oath, that she is a bona fide resident of said County of
Fulton State of Georgia, and that she has RESIDED in said Statecontinuously ever since 1870 That she is the Widow ofGeo. Walstein who was a soldier in Company
of the 20th Regiment of La.

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

1861, and served in the Army up to close of war 1865 That he died on
the 1890 day of age and povertyDeponent 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 1860I have been allowed an Indigent pension as a resident of Fulton
County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the
year ending December 31, 1906.Sworn to and subscribed before me
this 1st day of JAN 1 1906. 1906.
John R. Wilkinson, Ordinary.A. M. C. Walstein
Post Office WaukeganState of Georgia,
County of FultonI, John R. WilkinsonOrdinary of said County, certify that I am well
acquainted with Mrs. A. M. C. Walstein, who made the above affidavit, and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18Given under my official signature and seal, this 1st day of JAN 1 1906. 1906.Official
SealJohn R. Wilkinson
Ordinary of Fulton County.NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

A. M. C. Walsteinwho, being sworn says on oath, that she is a bona fide resident of said County of
Fulton State of Georgia, and that she has RESIDED in said Statecontinuously ever since 1860 That she is the Widow ofGeo. Walstein who was a soldier in Company
of the 20th Regiment of La.

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

1861, and served in the Army up to close of war 1865 That he died on
the 1890 day of age and povertyDeponent 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 1860I have been allowed an Indigent pension as a resident of Fulton
County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the
year ending December 31, 1907.Sworn to and subscribed before me
this 2nd day of JAN 2 1907.
John R. Wilkinson, Ordinary.A. M. C. Walstein
Post Office WaukeganState of Georgia,
County of FultonI, John R. WilkinsonOrdinary of said County, certify that I am well
acquainted with Mrs. A. M. C. Walstein, who made the above affidavit, and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the
day of 18Given under my official signature and seal, this 2nd day of JAN 2 1907.Official
SealJohn R. Wilkinson
Ordinary of Fulton County.NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1907.

Georgia, Fulton County.

I hereby authorize and constitute J. Steve McCurdy
of Fulton County, my lawful attorney, to collect and receipt for
me in my name, the Pension due to Mr. A. M. Holstein for 1908
now deceased, who was on the Indy Pension Roll from said County
at his death.

Witness my hand and seal, this _____ day of _____ 1908

ATTEST BY

NOTE 1. Use this Blank only when the Pension is wanted to pay funeral expenses.

*Holstein, A M (Mm)
1907 Fulton Co.
1908*

Application for Pension Due
Deceased Pensioner,
Under Act 1904.

John R. Wilkinson, Ordinary,
for Mr. A. M. Holstein
of Fulton County,
Regiment.

Approved and Ordered Paid

1908

J. W. LINDSEY,
Commissioner of Pensions.

Amendments

Fulton Co State of Georgia

This is to certify that I have known the within
applicant for pension Mr. A. M. Holstein for
35 years and she was the reputed wife of
George Holstein they having lived together
as such up to his death, and she has not
married since that time.

J. E. Filander

Sworn to and subscribed before me this 24th
day of Feb 1903

John R. Wilkinson
Ordinary

Testify to the above evidence as set forth
by J. E. Filander as being true having been
acquainted with Mr and Mrs. Holstein for
35 years and I know Mr. A. M. Holstein
has not married since the death of his husband
J. M. Holstein

This is to certify that I have known Mr. A. M.
Holstein about 25 years and that she was the
reputed wife of George Holstein and lived with
him up to the time of his death in 1891 and
she is now his widow

Thos. J. Christian

Sworn to by J. M. Holstein and
Thos. J. Christian who are known to be of good character
and their testimony is entitled to full faith and credit
This 25th Feb 1903

John R. Wilkinson
Ordinary
Fulton Co Ga

Application for Pension Due to a Deceased Pensioner,

Under the Act of August 15, 1904, to be paid to the Ordinary for
Funeral Expenses and Expenses of Last Illness.

Georgia, Fulton County.

Personally before me, the Ordinary of said County, comes
J. J. Walsten of said County, who, after being sworn on
oath, says that he knew Mrs. M. E. Walsten of said County, and
that he was on the Indigent Pension Roll Fulton
County at the time of his death, which occurred in DeKalb County,
in this State, on the 28th day of May 1905, and
that a Pension of Thirty Dollars was due him and
unpaid at the time of his death. That he left no widow dependent children surviving
him, and no estate of any value sufficient to pay his funeral expenses, which amounted to
the sum of Thirty two 00/100 Dollars, as per a sworn statement,
itemized, hereto attached.

Sworn to and subscribed before me, this

12th day of June 1905

John W. Wicks Ordinary,

Fulton County.

Georgia, Fulton County.

I, John W. Wicks, Ordinary of said County, do certify
that I personally know J. J. Walsten, who is a resident
citizen of said County, and that he is of a truthful and trustworthy character, entitled to
full faith and credit.

I also knew Mrs. M. E. Walsten while in life;
that he was the same person whose name appears on the Indigent
Pension Roll of Fulton County, and was paid a Pension of
Thirty Dollars in said County for 1905,
and I now believe him to be dead.

Given under my hand and official seal, this 12th day of June 1905

John W. Wicks Ordinary,
Fulton County.

J. STEVE McCURDY,
FURNITURE.

Undertaker and Live Stock.

STONE MOUNTAIN, GA. June 12 1905

The estate of Holdstern
a State Pensioner to J. S. McCurdy in
May 20/1905 To Coffin and Rob \$22.50
furnished said pensioner by order
of her son, J. S. Holdstern
J. Steve McCurdy.

Geo. of Georgia DeKalb County
personally appeared before me
an affidavit authorized to administer
Oath of J. S. McCurdy, who being
fully sworn says the above set of goods & bills
due & unpaid

done to & under seal before me this
June 12 1905 John M. McCurdy
N. P. & S. D.

Charles Collins

L.B.R.
Subject: Case of George Holstein.

Address: "Chief of the Record and Pension Office, War Department, Washington, D. C.

663,495.

Record and Pension Office,

War Department,

(1 inclosure.)

Washington City,

September 3, 1901.

Hon. L. F. Livingston,
House of Representatives.

Sir:

In returning herewith the letter of your correspondent, Mr. W. H. Harrison, a resident of Atlanta, Georgia, who desires your assistance in obtaining information relative to the service of one George Holstein, late a private in Company C, 20th Regiment of Louisiana Volunteer Infantry, C.S.A., which letter was received by your reference to-day with the request that the desired information be furnished, I have the honor to inform you as follows:

It is shown by the records that George Holstein, private; Company B, 20th Louisiana Infantry, C.S.A., enlisted February 12, 1862, at New Orleans, Louisiana, to serve during the war. The muster roll of the company dated June 30, 1862 (first upon which his name appears), reports him present, transferred to Company I (name not found on rolls of Company I). A muster roll of Company B, dated October 31, 1862, reports him "deserted in Kentucky, left near Sparta, Tenn.," and his name is not borne upon subsequent rolls of the company, except the one for March and April, 1863, upon which he is reported as transferred to Company D. His name has not been found upon the rolls of Company D of the regiment mentioned, but

upon a roll of Company C of that regiment for March and April, 1863, he is reported present, with remark: "Transferred from Company B, 20th Louisiana Regiment." His name has not been found upon subsequent rolls of Company C to include that dated February 28, 1865, the last roll on file, and no further record of him has been found in this Department.

Very respectfully,

F. D. [Signature]
Chief, Record and Pension Office.

the company, except the one for March and April, 1863, upon which
he is reported as transferred to Company D. His name has not been
found upon the rolls of Company D of the regiment mentioned, but

Ordinary's Certificate

COUNTRY

Ordinary of said County, do certify

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; MARRIED IN 1928

any persons who are to be sci vlt or husonhi lth / or the maritg; but both of them are now residents

truthful and trustworthy and their statements are checked to full fact and credit.

Given under my hand and seal of office this 7th day of February 1941 193

(SEAL OF ORDINARY)

Ordinary

INSTRUCTIONS

1. Before any claim is assessed the Ordinary shall review the claim and the system in the following order:
 - a. The claimant's evidence.
 - b. The witness's evidence.
 - c. The defendant's evidence.
2. The claimant must provide evidence to show that the system is defective and the evidence you shall give will be taken into account.
3. Additional evidence may be submitted if it helps prove an incident.
4. All systems may be returned prior to January 1st, 1991, as recalled.
5. If you return the system prior to January 1st, 1991, you will not be charged for the Ordinary of the County in which the applicant or witness resides and must be satisfied by each Ordinary.
6. If you do not return the system within the Ordinary of 11 months, your warranty, by your return, or if general application, does not include your return, you will be charged for the Ordinary of 11 months.
7. Do not take an application from any witness who is already receiving a pension.

HOLT, ETTA Mrs.
FULTON COUNTY.

Approved for
 Moh. 1941.

Widow's Application

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

County Fulton
Name Mrs. Etta Holt
Widow of D. H. Holt
Date of Marriage Aug. 6 1918
Date of Husband's Death August 1920
Company C
Regiment 53d Regt. Ga. Inf.

Approved Feb. 8, for Feb. 1934.
Lillian Henderson
 Director.

RECEIVED

FEB 8 1941

LILLIAN HENDERSON
DIRECTOR

Atlanta, Ga., Feb. 8, 1941.
406 State Capitol.

David H. Holt enlisted as a private in Co. C, 53d Regt. Ia. Inf. Apr. 18, 1864. Captured, Cold Harbor, Va. June 1, 1864. Transferred to Elmira, N. Y. July 12, 1864; thence to Ft. Lookout, Md. Exchanged Oct. 29, 1864. Surrendered, Appomattox, Va., Apr. 9, 1865.

He was admitted to the pension rolls of Campbell County, Ga., 1912, on above record.

Dean Henderson
Director

Atlanta, Ga., Feb. 8, 1941.
406 State Capitol.

David H. Holt enlisted as a Private in Co. C, 1st Regt. Ga. Inf. Apr. 12, 1864. Captured Cold Harbor, Va. June 1, 1864. Transferred to Elmira, N. Y. July 12, 1864; thence to Ft. Lookout, Md. Exchanged Oct. 29, 1864. Surrendered at Appomattox, Va., Apr. 9, 1865.

He was admitted to the pension rolls of Campbell County, Ga., 1912, on above record.

William H. Davidson
Director

HOLT, ETTA MRS.
FULTON COUNTY
"Class B."
Approved for
Mch. 1941.

Widow's Application

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

County Fulton
Name Mrs. Etta Holt
Widow of D. H. Holt
Date of Marriage Aug. 6, 1919
Date of Husband's Death AUGUST 1920
Company G.
Regiment 554 Regt. Ga. Inf.
Approved Feb. 8, for Mch. 1941.
William H. Davidson
Director

RECEIVED

FEB 8 1941

WILLIAM H. DAVIDSON
DIRECTOR

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.

I, Thomas R. Jeffries, Ordinary of said County, do certify that I know Mrs. Etta Holt, 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 she is 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 7 day of February, 1941.

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Fulton COUNTY.

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

SECTION I.

- What is your name, and where do you reside? (Give Post Office and County)
Mrs. Etta Holt, 606 West Meata Ave., Sallawhatch East Point, Ga.
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All my life
- Give date, or year, of your birth. June 18, 1858 Age? 82
- (1) When, (2) where and (3) to whom were you married? D. H. Holt, Campbell Co. Georgia, August 6, 1919
 - Have you married since the death of ~~husband~~ soldier husband? no
 - When and where did your first husband die? Campbell Co. Ga. August 1920
 - Were you residing together when he died? yes
 - If not, how long had you resided apart? never resided apart
 - Are you now a widow? yes
 - Have you or your husband heretofore been paid a pension by the State? yes
 - If so, when and for what cause were you or your husband placed on the roll? Husband on roll of other Fulton or Campbell County, Ga. 1912

SECTION II.

Answer the following questions if your husband was not a pensioner:
1. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.

- 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?
- If he was not present, state specifically and clearly where he was?
- When did he leave the Command?
 - For what cause did he leave?
 - By whose authority did he leave?
 - For how long was his leave of absence granted? d. In what way?
- What was his physical condition when he left his Command?
- What effort did he make to return to his Command?
- In what way was he prevented from going back to his Command?
- Was he captured by the enemy at any time?
- If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the

8 day of Feb. 1941.

Wm. H. Davidson, Ordinary

of Fulton County.
(SEAL OF ORDINARY)

Mrs. Etta Holt
Applicant.

- the whole truth. No help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
 - Only widows who married prior to January 1st, 1920, are entitled.
 - All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
 - Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
 - Fill out the back of this application carefully.
 - Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
 - Do not take an application from any widow who is already receiving a pension.

Sworn to and subscribed before me, this the
 6 day of Feb. 1941
 1931
 Q. B. Chambers, Ordinary
 of Fulton County.
 (SEAL OF ORDINARY)

Mrs. Etta Holt
 Applicant
 made

Court of Ordinary

FULTON COUNTY
 STATE OF GEORGIA

CERTIFIED COPY OF
 MARRIAGE LICENSE
 AND
 CERTIFICATE OF MARRIAGE
 OF

D. H. Holt
 AND

Mrs. Etta Chambers

Recorded in Book 0 Page 401

Thomas H. Jeffries
 Ordinary.

CONFEDERATE PENSIONS & RECORDS STATE DEPARTMENT OF

406 State Capitol,

ATLANTA, Georgia

February 8, 1941

WHEREAS:

Mrs. Etta Holt, widow of D. H. Holt,
 Fulton County, Georgia

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

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of March, 1941, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 8th day of February 1941.

Director, Confederate PENSION & RECORD
 DEPARTMENT

MARRIAGE LICENSE

State of Georgia-Fulton County

To any Minister of the Gospel, Judge of Superior Court, Justice of the Peace, or other
Person authorized to solemnize,

You are hereby authorized and permitted to join in the
honorable state of Matrimony D. H. Holt

and Mrs. Etta Chambers

According to the Rites of your Church, Provided there be no lawful cause to obstruct the same,
according to the Constitution and Laws of this State; and for so doing this shall be your sufficient
License.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 4 day of August 1919 19 19

W. S. McLarin I. S.

Ordinary

I hereby certify that D. H. Holt

and Mrs. Etta Chambers

were joined together in the HOLY BANS OF MATRIMONY

on the 6 day of August 19 19, by me.

C. J. Jeanes, M.P. & J.P.

State of Georgia,
Fulton County

ORDINARY'S OFFICE

S. S.

ATLANTA, GA., February 7th 19 41

A. S. Batterton, Clerk Court of Ordinary of said County, hereby certify

that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

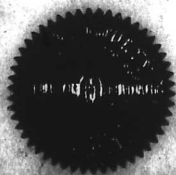
D. H. Holt

and Mrs. Etta Chambers

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day
and year aforesaid.

A. S. Batterton
Clerk, Court Ordinary.



MARRIAGE LICENSE

State of Georgia, Fulton County

To any Minister of the Gospel, Judge of Superior Court, Justice of the Peace, or other
Person authorized to solemnize,

You are hereby authorized and permitted to join in the
honorable state of Matrimony D. H. Holt

and Mrs. Etta Chambers

According to the Rites of your Church, Provided there be no lawful cause to obstruct the same,
according to the Constitution and Laws of this State; and for so doing this shall be your sufficient
License.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 4 day of August 1919

W. S. McLarin I. S.
Ordinary

I hereby certify that D. H. Holt

and Mrs. Etta Chambers

were joined together in the HOLY BANS OF MATRIMONY

on the 6 day of AUGUST 1919, by me.

C. J. Jeanes, M.P. & J.P.

State of Georgia,
Fulton County

ORDINARY'S OFFICE

S. S.

ATLANTA, GA. February 7th 1941

A. S. Batterton

Clerk Court of Ordinary of said County, hereby certify

that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

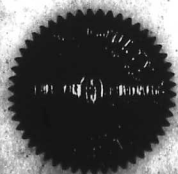
D. H. Holt

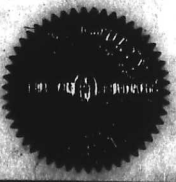
and Mrs. Etta Chambers

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the day
and year aforesaid.

A. S. Batterton
Clerk, Court Ordinary.



A. S. Batterton
I, _____, Clerk Court of Ordinary of said County, hereby certify
that the foregoing is a true copy of the Marriage License and Certificate of Marriage of
D. H. Holt
and Mrs. Etta Chambers
as the same appears of record in this office.
Given under my official Signature and Seal of the Court of Ordinary, the day
and year aforesaid.

A. S. Batterton
Clerk, Court Ordinary.

POWER OF ATTORNEY.
STATE OF GEORGIA.

County, }

I, _____, hereby authorize

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

Witness my hand this _____ day of _____ 190__

Executed in presence of

Ordinary,

County, }

L. S.

Notary

Halt, Mariah E. (Mrs.)
Fullton Co
OK

No. _____

WIDOW'S
INDIGENT PENSION.
1902.

Name *M. E. Holt*
County *Fullton*
Widow of *John Holt*
Co. H. 2nd Ga. Inf.
Approved _____ 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

9/22/1902

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

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

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

Witness my hand this _____ day of _____ 1902

Executed in presence of _____

Ordinary, _____ L. S.

County, _____

SEAL

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

Halt, Mariak E. Halt of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (*Give State, County and Post Office*)
Mariak E. Halt, Fulton Co. Ga. - Chattahoochee Co.
2. How long and since when have you been a resident of this State?
45 years -
3. When and where were you born?
1825 - in South Carolina -
4. When and where was your husband born—state his full name, and when were you and he married?
1822 - Sumner T. Co. Ga. - John Halt
Married in 1842 - in Sumner Co. Ga.
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? 1862 - Sumner Co. Ga. - 2nd Regt. State Troops - Ga.
was discharged - then joined Co. R - 2nd Regt. State Troops - Ga.
6. How long did your husband serve in said Company and Regiment?
until he was killed in 1865 -
7. When and where did your husband's Company and Regiment surrender and was discharged?
at Andersonville, South Carolina
8. Was your husband present at the time and place when his Company and Regiment surrendered?
He was present and killed -
9. If not with his Command at surrender, state clearly and specifically where he was, when he left Command, for what cause, and by what authority? He was present and killed
He left because of Surrender of Confederate Armies
10. When and where did your husband die? 1865 - Sumner Co. Ga.
11. Which of the following grounds do you base your application for Pension, viz.: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty? 2 - first ground
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? 10 years since
able to work to make a support -
infirmary - nearly blind - old weak & infirm -
13. What has been your occupation since your husband's death? None
14. How much can you earn gross, by your own exertion or labor? Nothing
15. What property, real or personal, or income do you have or possess, and its gross value?
None -
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, and what disposition, if any, by sale or gift, have you made of the same?
None -
17. In what counties did you reside in 1899, 1900 and 1901, and what property did you return for taxation?
Fulton -
18. How have you been supported since death of husband, and especially for 1899, 1900 and 1901?
By my married son -
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? contributed nothing -
20. What was your employment during 1899, 1900 and 1901—how much did you receive for each year?
Had none
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? None - live with married son -
22. Have you ever made application for pension before? No -
23. How many applications have you made for a Pension, and under what claim? None

Sworn to and subscribed before me this _____ day of _____ 1902.

John W. Lindsey Ordinary,
of Fulton County.

Halt, Mariak E. (Mrs)
Fulton Co
A.K.

No.

WIDOW'S

INDIGENT PENSION.

1902.

Name M. E. Halt

County Fulton

Widow of John Halt

Co. R. 2nd Regt. State Troops

Approved _____ 1902.

JOHN W. LINDSEY,

Ordinary of Fulton.

WARRANT HANDLED TO

1902

WARRANT HANDLED TO

1902

WARRANT HANDLED TO

1902

Halt, Mariah E. (Mrs.)
Fulton Co.
OK

No.

**WIDOW'S
INDIGENT PENSION
1902.**

Name M. E. Holt
County Fulton
Widow of John Holt
C. S. C. 2 1/4 m. m. m.

Approved

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

5061/26

own labor or income? None
20. What was your employment during 1899, 1900 and 1901—how much did you receive for each year?
Had none

21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? Name does not own land
22. Have you ever made application for pension before? No
23. How many applications have you made for a Pension, and under what claim? None

Sworn to and subscribed before me this 11 day of April, 1902.
John W. Lindsey Ordinary,
of Fulton County.

Halt, Mariah E. (Mrs.)
Fulton Co.
OK

No.

**WIDOW'S
INDIGENT PENSION.
1902.**

Name M. E. Holt
County Fulton
Widow of John Holt
C. S. C. 2 1/4 m. m. m.

Approved 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1902

Geo. W. Harrison, State Printer, Atlanta.

9/22/1902

**POWER OF ATTORNEY.
STATE OF GEORGIA.**

I, _____ hereby authorize _____
County, _____ State of Georgia, to receive and accept for the pension allowed and that he
remits the same to me at _____
Witness my hand this _____ day of _____ 190____
by his check or registered mail.
Executed in presence of _____
_____ (Ordinary)
County, _____
I, S.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

Witness my hand this _____ day of _____ 1902

Executed in presence of

Ordinary, _____ L. S.
County, _____

NEAL

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

Mariah E. Holt of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Post Office)
Mariah E. Holt, Fulton County, Georgia, Chattahoochee Co.
2. How long and since when have you been a resident of this State?
75 years -
3. When and where were you born?
1825 - in South Carolina -
4. When and where was your husband born—state his full name, and when were you and he married?
1822 - Emmett C. Holt - John Holt
Married in 1840 - in Emmett Co. Ga.
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? 1862 - Emmett C. Holt - 24th Regt. State Troops - Ga.
was discharged - then joined Co. K - 24th Regt. State Troops - Ga.
6. How long did your husband serve in said Company and Regiment?
until end of war in April 1865 -
7. When and where did your husband's Company and Regiment surrender and was discharged?
St. Andrewsville, Georgia
8. Was your husband present at the time and place when his Company and Regiment surrendered?
He was present and Paroled -
9. If not with his Command at surrender, state clearly and specifically where he was, when he left Command, for what cause, and by what authority? He was present and Paroled
The left because of Surrender of Confederate armies
10. When and where did your husband die? 1894 - Emmett C. Holt
11. Which of the following grounds do you base your application for Pension, viz.: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty? 2 - first ground
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? 18 years since
able to work to make a support - now
indigent - nearly blind - old age & infirmity -
13. What has been your occupation since your husband's death? None
14. How much can you earn gross, by your own exertion or labor? Nothing
15. What property, real or personal, or income do you have or possess, and its gross value?
None -
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, and what disposition, if any, by sale or gift, have you made of the same?
None -
17. In what counties did you reside in 1899, 1900 and 1901, and what property did you return for taxation?
Fulton -
18. How have you been supported since death of husband, and especially for 1899, 1900 and 1901?
By my married son -
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? Contributed nothing
20. What was your employment during 1899, 1900 and 1901—how much did you receive for each year?
Had none
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? None - live with married son
22. Have you ever made application for pension before? No -
23. How many applications have you made for a Pension, and under what claim? None

Sworn to and subscribed before me this _____

1902 } Mariah E. Holt
Ordinary, _____
County, _____

Holt, Mariah E. (Mrs.)
Fulton Co.
O.K.
No.
WIDOW'S
INDIGENT PENSION.
1902.
Name M. E. Holt
County Fulton
Widow of John Holt
Co. K - 24th Regt.
Approved _____ 1902
JOHN W. LINDSEY,
Commissioner of Pensions
WARRANT HANDED TO _____ 1902
_____ 1902

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,

County.

Hulton County, }
Wm J. Nash, of said State and County, having
 been presented as a witness in support of the Application of Mrs. Maria C. Holt
 for a Pension under the Act of 1900, and after being duly sworn true answers to make to the
 following questions, deposes and answers as follows:

1. What is your name and where do you reside? Wm J. Nash.
Hulton County Georgia
2. Are you acquainted with the applicant, Mrs. Maria C. Holt
3. How long have you known her? 46 years
4. Where does she reside, and how long and since when has she been a resident of this State?
Hulton County Ga - about 60 years
5. When and where was she born?
Sunnett County Ga
6. Were you ever acquainted with her husband?
yes -
7. Where did he reside in 1861?
Sunnett Co
8. When and to whom was he married?
Maria C. Holt
9. When and where was he born?
Sunnett Co
10. How long have you known him?
45 years
11. When and where did John Holt enlist in the war between
 the States, and in what Company and Regiment did he enlist, and how do you know this?
1862 - Sunnett Co - 2nd Regt - 1st Bn - 1862 - Sunnett Co

Co B - Know him all the time from July 1864 -
from July 1864 to April 1865

12. How long did he perform regular military duty?
1865
13. When and where was his Company and Regiment surrendered and discharged from service?
Andersonville Ga - Paroled
14. Were you with the Command when it surrendered?
yes
15. Was John Holt the husband of applicant present?
yes - he was there on duty
16. If not present, where was he?
He was there on duty
17. When and where did he leave his Command?
Andersonville Ga

For what cause? Surrender of Confederate army
 By whose authority he left? Federal & Confederate

How do you know all this? (State fully and clearly.) I was with him
from July 1864 up to surrender in April
1865

18. When and where did John Holt die?
1896 - Sunnett Co Ga
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?
Sunnett Co all his life
20. Do you or your own knowledge know that applicant is the lawful widow of John Holt
yes - I know it
21. Has she remained unmarried since her soldier husband's death, and is now his widow?
yes

22. What property, effects or income has the applicant, if any, and how do you know this of your own
 knowledge? None

23. What property, effects or income did applicant possess in 1899 and 1900, and what disposition did she
 make of it? None

24. Has applicant conveyed any property in last two years or given away, if so, what was it, and to
 whom? None

25. What is applicant's physical condition and her chances and ability to earn a support?
She is old feeble & infirm - Can't
earn anything - Can't do an herself

26. Is applicant able to earn a support at labor of any sort, if not, why?
old - feeble
infirm - Can't labor at all

27. How was she supported for 1899, 1900 and 1901?
By her married son

28. How much did applicant contribute to her support for last two years?
nothing

29. Give a full and complete statement of applicant's physical condition?
She is old
weak & feeble - unable to do
any kind of labor

30. What interest have you in the recovery of this pension by the applicant?
None

Sworn to and subscribed before me this 9th
 day of August 1902
John W. Williams Ordinary, W J Nash
Hulton County. } Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally before me comes A. J. Harrison and
J. P. Moon, both known to me to be reputable
 physicians of said County, who, being severally sworn, may on oath that they have examined carefully Mrs.
Maria C. Holt, applicant for a Pension under Act of 1900, and after
 such personal examination say that her physical condition is this, She is old
and infirm - Can't
do any kind of labor
and is unable to do
any kind of labor
and is unable to do
any kind of labor

Sworn to and subscribed before me this 9th
 day of August 1902
John W. Williams Ordinary, A. J. Harrison & J. P. Moon
Hulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, John W. Williams, Ordinary in and for said County, hereby certify
 that the applicant, Mrs. Maria C. Holt, resides in said County,
 and has been a bona fide resident of this State since the _____ day of _____
 18____, and that the witnesses, Mr. W J Nash

are entitled to full faith and credit. _____ are of trustworthy character, and that their statements
 I do further certify that before answering the foregoing questions, the applicant and said witnesses took the
 oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same
 was signed and subscribed.
 I further certify that the tax digest of _____ County shows that applicant's
 returned for taxation in her own name in 1899 _____ dollars worth
 of property, and in 1900 and 1901 _____ dollars worth of property.
 Witness my hand and official seal this 10th day of Sept 1902

John W. Williams Ordinary, Hulton County.

Notes-1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following
 words: "You do solemnly swear that you will give answers to each of the questions asked of you,
 and the evidence you shall give will be the whole truth; so help you God."
 2. Additional affidavits may be attached, if blank spaces are insufficient.
 3. All affidavits must be made before Ordinary.
 4. Only widows who were the wives of the dead husbands while they were soldiers need apply-and are now
 widows. Those married since 28th April, 1865, not entitled.
 5. _____ Witnesses and two. If residents are necessary require no claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Hulton County.

I, Mrs M E Holt hereby authorize

John C. Holt of Said County

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

me at my home in Said County

In Witness Whereof, I have hereunto set my hand and seal, this 22 day of

Jan 1904

Mrs M E Holt [L. S.]

Executed in the presence of

W. H. J. McNeill JP

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1903.

[L. S.]

Executed in the presence of

Holt, M. E. (m)
Hulton County
To Those Hereof Paid

1903.

No. 110

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. M E Holt

or

Hulton County,

Widow of John

Co. 4 1st Regt

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

123 1903

AND REMITTED TO

John C. Holt

Holt, M. E. (m)
Hulton Co

To Those Hereof Paid.

1903.

No. 201

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. M E Holt

or

Hulton County,

Widow of

Co. _____

Regiment _____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

123 1903

AND REMITTED TO

M E

110

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

M E Kault

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

Fulton

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

continuously ever since 1833

That she is the Widow of

John Kault

who was a soldier in Company

of the 2ndRegiment of 1st Md. Inf.

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

1863, and served in the Army up to

April

1865

That he died

on the

May

1896

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

I have been allowed an Indigent pension as a resident of Fulton

County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me,

this 18 day of Jan 1904A. H. McNeill

Post-Office

Hemp Hill

State of Georgia,

County of FultonI, A. H. McNeill J.P.

Ordinary of said County, certify that I am well acquainted with Mrs. M E Kault, 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 1833Given under my official signature and seal, this the 18 day of Jan 1904

X

A. H. McNeill

Ordinary of

County.



NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

M E Kault

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

Fulton

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

continuously ever since several years

That she is the Widow of

John Kault

who was a soldier in Company

of the 2ndRegiment of Volunteers

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

1863, and served in the Army up to

April

1865

That he died

on the

May

1896

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

I have been allowed an Indigent pension as a resident of Fulton

County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me,

this 22 day of May 1903.John R. Wilkinson Ordinary.

Post-Office

State of Georgia,

County of FultonI, John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. M E Kault, 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 1843Given under my official signature and seal, this the 22 day of May 1903.John R. Wilkinson

Ordinary of

County.

NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

M. E. Hault

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since 1837. That she is the Widow of John Hault who was a soldier in Company 2nd Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of April 1861, and served in the Army up to close of war 1865. That he died on the Age and poverty day of 1896.

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 over 60 years ago.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1901, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this 9 day of January 1905, at Post Office Atlanta.

State of Georgia,

Fulton County.

I, J. P. H. Hault, Clerk of said County, certify that I am well acquainted with Mrs. M. E. Hault, 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 1837 day of 1896.

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

Official Seal

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

M. E. Hault

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since 1871. That she is the Widow of John Hault who was a soldier in Company 2nd Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of April 1861, and served in the Army up to close of war 1865. That he died on the Age and poverty day of 1896.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1841.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me, this 14 day of January 1906, at Post Office Atlanta.

State of Georgia,

Fulton County.

I, N. W. H. Hault, Clerk of said County, certify that I am well acquainted with Mrs. M. E. Hault, 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 1871 day of 1896.

Given under my official signature and seal, this 15 day of January 1906.

Official Seal

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

STATE OF GEORGIA,
FULTON COUNTY.

Ordinary's Office, Atlanta, Jan 21st 1904

I, John P. Wilkinson, Ordinary of said County,
certify that A. H. Lovell whose genuine
official signature appears to the annexed paper, was at the time of
said signing an acting Justice of the Peace, in and
for said County, duly sworn and commissioned, and that his com-
mission was date the 3rd day of Jan 1901
and will expire on the 1st day of Jan 1905,
and that all his official acts as such are entitle to full faith and
credit.

Given under my official signature and seal of office, the day and year
above written.

John P. Wilkinson
ORDINARY

STATE OF GEORGIA,
FULTON COUNTY.

Ordinary's Office, Atlanta, Jan 20th 1905

I, John P. Wilkinson, Ordinary of said County,
certify that J. H. Austin whose genuine
official signature appears to the annexed paper, was at the time of
said signing an acting Justice of the Peace, in and
for said County, duly sworn and commissioned, and that his com-
mission was date the 15th day of December 1902
and will expire on the 15th day of December 1905,
and that all his official acts as such are entitle to full faith and
credit.

Given under my official signature and seal of office, the day and year
above written.

John P. Wilkinson
ORDINARY

STATE OF GEORGIA.

FULTON COUNTY.

Ordinary's Office, Atlanta, Jan. 16th 1906

I, John R. Wilkinson, Ordinary of said County,
certify that *E. W. Hopkins* whose genuine
official signature appears to the annexed paper, was at the time of
said signing an acting *Justice of Peace*, in and
for said County, duly sworn and commissioned, and that his com-
mission was date the *15th* day of *Dec.* *1904*
and will expire on the *14th* day of *Dec* *1908*,
and that all his official acts as such are entitled to full faith and
credit.

Given under my official signature and seal of office, the day and year
above written.

John R. Wilkinson
ORDINARY.

credit.

Given under my official signature and seal of office, the day and year
above written.

John R. Wilkinson
ORDINARY

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, _____, hereby authorize

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

at _____ day of _____, 1900.

Witness my hand and seal this _____

Executed in presence of _____

(L. S.)

Pension office 1890-1900
Must state County
where, when, and what date
he was captured as a
man who was captured
in 1864 - and for the
rest of Captains by a
Western color was
sent at the same time
of Captains of
his own Regiment
knows that the color
is true
J. W. Lindsey
Com of Pension

Walt. M. D.
Fulton County

No. _____

INDIGENT PENSION.
1900.

Name *W. J. Watt*

County *Fulton*

Approved _____ 1900

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

114-1900
7119-1900

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

, hereby authorize

of

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

at

by

Witness my hand and seal this

day of

1900.

Executed in presence of

(L. S.)

Pension Office 1895-1900
Must state County
where, when, & where he
was residing no
more than 100 miles from
the place where he
is now residing
in 1895 - and from the
date of his departure by a
written order signed
and attested by him
when he left the County
in 1895. He must also
show that the station
is true
J. W. Lindsey,
Comm. of Pension

INDIGENT PENSION,

1900.

Name

County

Approved

1900.

JOHN W. LINDSEY,

Commissioner of Pension.

WARRANT HANDLED TO

Chas. E. Davidson, State Printer, Atlanta.

118-1900
719-1900

Questions for Applicant.

STATE OF GEORGIA,

County.

of said State and County, desiring to avail himself of the Pension Act (Section 1264, Code), hereby submits his proofs, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office)
Mr. J. H. Holt - 67 Magnolia St. Fulton Atlanta
2. How long and since when have you been a resident of this State? *41 years since 1839*
3. When and where were you born? *Randolph County Ga 1839*
4. When and where and in what company and regiment did you enlist or serve? *Randolph County 1862-63*
5. How long did you remain in such company and regiment? *Three years*
6. For how long a period did you discharge regular military duty? *Three years*
7. When, where and under what circumstances were you discharged from service? *1863 in Co. B Douglas 2d where I was discharged*
8. What is your present occupation? *none*
9. How much can you earn (gross) per annum by your own exertions or labor? *nothing*
10. What has been your occupation since 1865? *worked in cotton mills until 1895*
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? *Infirmary and poverty*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
I suffer with chronic rheumatism, internal piles with hemorrhoids & have not done any labor in three years on account of my eye light
13. What property, effects or income do you possess, and its gross value? *none*
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? *none*
15. In what County did you reside during those years, and what property did you then return for taxation?
Fulton County
16. How were you supported during the years 1898 and 1899? *none*
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? *little children in cotton mill 90 c. salaries none*
18. What was your employment during 1898 and 1899? What pay did you receive in each year?
nothing
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? *yes my wife and five small children they get small wages in a cotton mill and make out not half enough to live on*
20. Are you receiving any pension? If so, what amount, and for what disability? *none*

Sworn to and subscribed before me this the

9 day of Jan 1900.

Ordinary

Applicant.

of Fulton County.

Every Question MUST Be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name and where do you reside? J. T. Stewart
111 Colburn Court, Ga
2. Are you acquainted with W. J. Boelt the applicant; if so how long have you known him? yes they learn years ago
3. Where does he reside, and how long and since when has he been a resident of this State?
47 Magnolia St Atlanta Ga 41 years
4. When, where and in what company and regiment did he enlist, and how do you know? 1862
Danville Ga Co of 54th Regt Ind in 1862
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? three years
he made a good soldier was discharged
at Camp Daughless Dec 1864
7. What property, effects or income has the applicant? (Give your means of knowledge.)

8. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same?

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?

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

12. How was he supported during the years 1898 and 1899?

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 Section 1254, Code?

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

Sworn to and subscribed before me, this

day of Jan 1900.

Ordinary.

Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

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

Chronic muscular Rheumatism, Supra
Orbital neuralgia, almost total loss of
eyelight, Internal hemorrhoids
all of which, with general debility
renders him unable to earn his support.
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 day

day of Jan 1900.

Ordinary.

E. L. Awtrey M.D.
J. L. McDaniel M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, W. J. Boelt, Ordinary in and for said County, hereby certify that the applicant W. J. Boelt resides in said County, and has been a bona fide resident of this State since the 1st day of Jan 1899 and that the witnesses, viz: J. L. McDaniel and E. L. Awtrey are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1898 none Dollars of property, and in 1899 none Dollars of property.

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

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

Ordinary,
of Fulton County.

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses to 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 transmitted.
3. In every case the Ordinary must certify to the character of the witnesses, and, as to the execution of this proof as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____, 1902.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____

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

at _____

by _____

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

[L. S.]

Executed in presence of _____

NAME, W. J. G. FULTON G.

(FOR THOSE ALREADY ENROLLED.)

No. ✓

INDIGENT

SOLDIER'S PENSION
1902.

Name, W. J. G. FULTON G.

County, Fulton.

Co. 4 Regiment 58th

WARRANT ISSUED

11/4 1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

One W. Lindsey, State Printer, Atlanta.

no date

Halt, W. J. G. FULTON G.

NAME, W. J. G. FULTON G.

(FOR THOSE ALREADY ENROLLED.)

No. 7

INDIGENT

SOLDIER'S PENSION
1907.

Name, H. J. G. FULTON G.

County, Fulton.

Co. 4 Regiment 58th

WARRANT ISSUED

11/4 1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

One W. Lindsey, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears W J Holt of Fulton

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 June 1890; 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 Geo) during the war between the States, and served for the term of 3 yrs 6 mo in Company 4 of 55th Regiment of Geo; that his physical condition is as follows: Good ability

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 Fulton county been allowed a pension for the year 1901

Sworn to and subscribed before me, this _____

day of JAN 13 1902.

Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkerson, Ordinary of said County, do certify that I am well acquainted with W J Holt the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 13 1902.

Ordinary

Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears W J Holt of _____

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18____; that he is _____ years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company 4 of 55th Regiment of Geo; that his physical condition is as follows: Infirmary & poverty

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1900.

Sworn to and subscribed before me, this _____

day of _____ 1907.

John R. Wilkerson, Ordinary

State of Georgia,

Fulton County.

I, John R. Wilkerson, Ordinary of said County,

do certify that I am well acquainted with W J Holt the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 2 1907.

John R. Wilkerson

Ordinary

Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

_____ of

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

at

by

Witness my hand and seal, this _____ day of _____

1901.

[L. S.]

Executed in presence of _____

CODE SECTION 134

(For Those Already Enrolled.)

No. 340

INDIGENT

SOLDIER'S PENSION.

1901.

Name

W. J. Scott

County

Spalding

Spalding

WARRANT ISSUED

Jan 14

1901.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

WJL

JOHN W. LINDSEY, WASH. PENSION, ALABAMA

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

_____ of

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

at

by

Witness my hand and seal, this _____ day of _____

1903.

[L. S.]

Executed in presence of _____

CODE SECTION 134.
(FOR THOSE ALREADY ENROLLED.)

No. 24

INDIGENT

SOLDIER'S PENSION

1903.

Name

W. J. Scott

County

Spalding

Spalding

WARRANT ISSUED

1903.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

WJL

JOHN W. LINDSEY, WASH. PENSION, ALABAMA

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County. }
Personally appears *W J Koelt* of *Fulton*
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 *Jan* 1890; that he is *63* years old and
by occupation a _____ 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 years* in Company *4*, of *55*th Regiment
of *Ga*; that his physical condition is as
follows

General debility

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 1901. I have heretofore as a resident of *Fulton*
county been allowed a pension for the year 1 *first time*

Sworn to and subscribed before me, this the
11 day of *June* 1901, *W J Koelt*
John R Wilkinson Ordinary.

STATE OF GEORGIA,

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

Given under my official signature and seal, this *11*

day of *Jan* 1901, *John R Wilkinson*
Ordinary *Fulton* County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County. }
Personally appears *W J Koelt* of *Fulton*
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 *Jan* 1892; that he is _____ years old and
by occupation a _____ that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served for the term of *3 1/2 yrs* in Company *4*, of *55*th Regiment
of *Ga*; that his physical condition is as
follows:

I & P

that his property consists of the following items _____

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

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

Sworn to and subscribed before me, this the
day of *JAN 20* 1903, *W J Koelt*
John R Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton County. }
I, *John R Wilkinson* Ordinary of said County,
do certify that I am well acquainted with *W J Koelt* the
applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 20* 1903, *John R Wilkinson*
Ordinary _____ County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of

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

at

by

WITNESS my hand and seal, this _____ day of _____ 1904.

[L. S.]

Executed in the presence of

Halt, M. J.
W. Fulton
COUR SECTION 128.
(FOR THOSE ALREADY ENROLLED.)
C-5-5 No. *3*

INDIGENT
SOLDIER'S PENSION
1904.

Name *W. Fulton*
County *Fulton*
Co. *24* Regiment *15*
WARRANT ISSUED
July 20 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
W. J. H.
Gen. W. Harrison, Head Prisoner, Atlanta.

W. J. H.
no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton, County.

Personally appears W. J. Hall of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____, 1872; that he is 65 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 1/2 yrs in Company 2, of 35th Regiment of Geo; that his physical condition is as follows: 2 20

that his property consists of the following items: 2

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 Fulton County been allowed a pension for the year 1 _____

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

Ordinary.

STATE OF GEORGIA,
Fulton, County.

I, John R. Wilkerson, Ordinary of said County,

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

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

Ordinary Fulton County.



Note.—The blank spaces must be filled.
Form.—Affidavits should not be returned before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of _____

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

at _____

by _____

WITNESS my hand and seal, this _____ day of _____ 1905.

[L. S.]

Executed in the presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of _____

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

at _____

by _____

WITNESS my hand and seal, this _____ day of _____ 1906.

[L. S.]

Executed in the presence of _____

Holt. W. J.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

G-55 No. 3

INDIGENT
SOLDIER'S PENSION
1905.

Name *H. J. Holt*

County *Fulton*

Co. *B. Regiment*

WARRANT ISSUED

1905.

116
W. Lindsey
Commissioner of Pensions.

WARRANT HANDED TO

4/11

SEE PREVIOUS PRINTING AND ENDORSEMENT ON ATTACHED SLIP.

no date

Holt. W. J.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

G-55 No. 3

INDIGENT
SOLDIER'S PENSION
1906.

Name *H. J. Holt*

County _____

Co. *B. Regiment*

WARRANT ISSUED

1906.

116
W. Lindsey
Commissioner of Pensions.

WARRANT HANDED TO

4/11

SEE PREVIOUS PRINTING AND ENDORSEMENT ON ATTACHED SLIP.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears W. J. Stahl of Fulton.

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 66 years old and by occupation a millwright, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company 2, of 55th Regiment of Co.; that his physical condition is as follows: Infirmary and poverty.

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 16th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Fulton County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this 10th day of Jan, 1905.

Ordinary.

STATE OF GEORGIA.

Fulton County.

I, W. J. Stahl Ordinary of said County,

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

Given under my official signature and seal, this JAN 31 1905 day of Jan, 1905.

Ordinary

Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears W. J. Stahl of Fulton.

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 66 years old and by occupation a millwright, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company 2, of 55th Regiment of Co.; that his physical condition is as follows: Infirmary and poverty.

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 16th, 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 Fulton County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this 10th day of JAN 1 1906.

Ordinary.

State of Georgia,

Fulton County.

I, W. J. Stahl Ordinary of said County,

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

Given under my official signature and seal, this JAN 1 1906 day of Jan, 1906.

Ordinary

Fulton County.

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

Questions for Witness
State of Georgia
Fulton County

Jim Coleman of said state and County having been presented as a witness in support of the application of W. J. Holt for pension under the act approved December 15th 1894 and after being duly sworn true answers to make to the following questions deposes and answers as follows:

1 What is your name and where do you reside? Coleman 65 Magnolia St. Atlanta, Ga

2 Are you acquainted with W. J. Holt the applicant if so how long have you known him; Yes, known him for three years

3 What effects property or income has the applicant? None, I live next door to him

4 What property effects or income did the applicant possess in 1896 and 1897 and what disposition of any did he make of same? None

9. Has he conveyed away any of his property in the last three years if so what was it and to whom? Not

10. What is the applicants occupation and physical condition? Nothing

11. Is the applicant unable to support himself by labor of any sort if so why? He is unable to do any kind of labor

He is almost blind he has Rheumatism and Piles

12 How was he supported during the years ~~1896 and 1897~~ 1898 and 1899

By 4 small children working in cotton mill

13 What portion of his support for these two years was derived from his own labor or income? Nothing

14 Give a full and complete of the applicants physical condition that entitles him to a pension under the act of December 15th 1894. He cannot see nor is he able to work - is entitled to be

What interest have you in the recovery of a pension by this applicant? Nothing at all
I am his friend
and will do all in my power to help him
The Jan 9 - 1899. J. M. Coleman

Questions for Witnesses
State of Ga
Fulton County

J. W. Matton of Said State and County having been Presented as a witness in support of the applicant of W. J. Holt for Pension under Section 1244 Code and after being duly sworn true answers to make the following questions depose and answers as follows

- 1 What is your name and where do you reside
J. W. Matton 143 West End St Atlanta Ga
- 2 are you acquainted with W. J. Holt - the applicant
Yes how long have you known him yet fifty years
- 3 Where does he reside and how long since has he been a resident of this State 24 1/2 months 40 years
- 4 when where and in what company and Regt did he enlist and how do you know
Jan 1862 in Randolph County Co Ga 45th Regt -
- 5 were you a member of the same Co & Regt -

Yes
6 How long did he perform regular military duty about three years
7 When and where was his command surrendered he and myself was captured Sept or Oct 1863 at Cumberland Gap Tenn we was taken to Lexington Ky I was a commissary officer of the same company and there we was separated W. J. Holt was carried to Camp Douglas Ill and was carried to Johnson Island W. J. Holt was sent to Chickasaw Mayses and Brockett

Questions for Witness
State of Ga
Catoosa County

J. J. Stewart of Said State and County having been Presented as a witness in support of the application of W. J. Holt for Pension under Section 1244 Code and after being duly sworn true answers to make the following questions depose and answers as follows

- 1 What
7 When and where was his command surrendered
me and W. J. Holt was in Prison was captured in Sept or Oct 1863 at Cumberland Gap Tenn Gen Fragers whole Brigade was captured at the same time we was taken to Camp Douglas Ill and held there until May 1864 we was sent to Chickasaw Miss and Paroled and went home to Randolph County Ga
Sworn to and subscribed before me J. J. Stewart
Sept 2 of 1900
At Dalton Ga ready.

and went home to Randolph County - Geo. 1890

J. W. Mather

Tracy, N. & Richard Tracy

This Sept. 18-1910

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Oceanic Field No.

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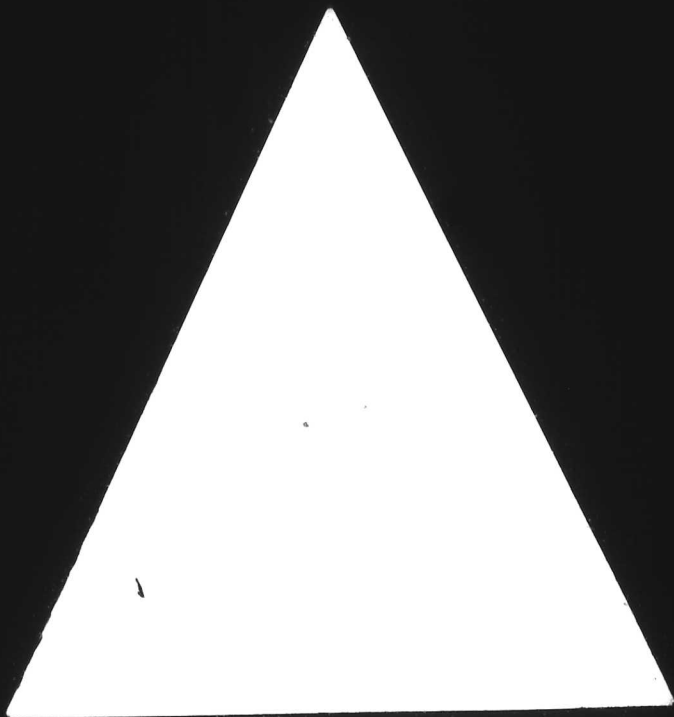
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W. H. H. H.
A. H. H. H.



POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County,

Know ALL MEN in THESE PRESENCE, That I

James M. McPherson
of *McPherson* *Fulton* Co.

County, in said State, do hereby appoint

of *McPherson* *Fulton* Co. 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, on account of the injury received as aforesaid in the military service of the Confederate States, and in the foregoing affidavit, hereby authorizing my said attorney to receive in my name for any Warranted Pension 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 *28* day of *March* 1892.

Executed in the presence of us:

W. S. Robinson

J. M. McPherson

DIRECTION.

If allowed, send amount by-

me at

and oblig.

to

Fulton Co.
McPherson, J. M.
No. *28*

Soldier's Pension.
1892.

Name *McPherson*
County *Fulton*

Disability *Right Hand*

Amount, \$ *25*
McPherson 1892.

W. H. HARRISON,
Secretary of War and Navy Department.

WARRANT HANDLED TO
J. M. Tucker
Geo. W. Harrison, State Auditor, Georgia, Ga.

POWER OF ATTORNEY.

Form 5.

STATE OF GEORGIA, }

Fulton County. }

KNOW ALL MEN BY THESE PRESENTS, That I,

James M. Heatsclaw
of *Atlanta Fulton Co.*

County, in said State, do hereby appoint *O. H. Jackson* my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 *20th* day of *March* 1892.

Executed in the presence of us:

W. S. Calhoun

DIRECTION.

If allowed, send amount by

me at

and oblige,

to

Fulton Co
Notary, J. M.
McDuff

Soldier's Pension.

1892.

Name *James M. Heatsclaw*

County *Fulton*

Disability *Right Hand*

Amount *\$20*

McDuff 1892.

W. H. HARRISON,

Secretary of Executive Department.

WARRANT HAVING TO

O. H. Jackson

Notary, Fulton Co., Ga.

Form 1.

"FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

STATE OF GEORGIA, }

Fulton County. }

County. }

PERSONALLY appears

J. M. Heatsclaw

of *Fulton*

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, and has been continuously since the

day of

1852; that he enlisted in the military service of the Con-

federate States (or of the State of

States, and served as a *Private* *Fulton* in Company *A*, of *9th* Regiment

of *Georgia* Volunteers *Andersons* Brigade; that whilst engaged

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

of *Virginia*, on the *21st* day of *July*, 1861, he was

disabled as follows: *He was wounded in the wrist of*

the right arm, which lacerated said

wrist and contracted the muscles of

the right hand and drew the fingers

of the hand in towards the palm thereby

destroying the use of the hand entirely

so far as the performance of manual

labor is concerned.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,

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

for the year thereunder, ending October 26, 1892.

Sworn to and subscribed before me, this, the

23rd day of *March*, 1892.

W. S. Calhoun

Ordinary.

NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claim is based on disease, give full and connected history of disease, tracing it directly to the service. Do not trouble to mention wounds which do not disable.

Affidavit for Witnesses.

STATE OF GEORGIA,

County of Fulton

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

of Fulton

and

each of whom, being duly sworn according to law,

severally say, under oath, that they are personally well acquainted with James M. Holzelman

whose application is herewith presented for a pension,

and that they served with him in the army, and from our personal knowledge he was injured by

the service as follows: (Give full statement, and tell in your own language how badly applicant is

disabled from work. If he does any labor, or can do any, state what.)

Consequence of a wound in the wrist of his right arm at the first battle of Manassas on the 21st day of July 1861 that said J. M. Holzelman was a private in Company D 8th Georgia Regiment at the time he was wounded and that he is now a banished citizen of this State and resides in Fulton County. That he is entirely disabled to do manual labor so far as his right hand is concerned

We personally know above stated facts. We were with him in the army and have known him ever since. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1861. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this

23rd day of March 1892.

W. L. Leachman

ORDINARY

S. P. Love 1st Lieut. Co. F, 124th I. L. C.
C. H. Lewis Private 1st Regt. I. L. C.
V. P. Dixon " " " " " "

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

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

PHYSICIAN'S AFFIDAVIT.

STATE OF GEORGIA,

Fulton County.

PERSONALLY comes before me W. L. Leachman Ordinary of said County,

to do W. L. Leachman

and James F. Alexander, both known to

me as reputable physicians of said County, who, being severally sworn, say on oath that they

have carefully examined James M. Holzelman and after such personal examination,

say that the applicant has been injured as follows: In consequence of a wound

received in the right wrist at the first battle of Manassas

in 1861, July 21st is permanently disabled so far as

the use of the right arm is concerned, as the flexor

joint is stiff, muscle so contracted as to destroy

the use of the hand and wrist joint

W. L. Leachman and
James F. Alexander M.D.

We have treated applicant professionally for _____ years.

Sworn to and subscribed before me, this

23rd day of March 1892,

W. L. Leachman

ORDINARY

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

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

STATE OF GEORGIA,

Fulton County.

I, W. L. Leachman Ordinary of said County,

do certify that I am well acquainted with James M. Holzelman the

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

said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents

himself to be, and that he resides in this County. I also certify that the foregoing witnesses are

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

Given under my official signature and seal, this 23rd day of March 1892.

W. L. Leachman

Ordinary Fulton County.

POWER OF ATTORNEY. STATE OF GEORGIA.

County,)
Know all Men by these Presents, That I _____
of _____ County, State of Georgia, do hereby appoint
of _____ my true and lawful attorney in fact, for
myself and my heirs, 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 receive in my name for any Warrant that may be issued by the Governor, or
for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1893, at the County of _____
Executed in the presence of us: _____

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

*Hesterlaw James M.
Hulton Co*

1893-
J. H. Hulton

No. 1166
Application for Allowance
For the Year Ending October 31, 1892

James M. Hesterlaw
County, Hulton
Amount, \$25
Date of Warrant, 11/7
Entered on record, 11/7

WARRANT MADE
Official
No. 1166

STATE OF GEORGIA
FOR APPLICATION HEREONTO ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fullon County, }

PERSONALLY appears James M. Holtzclaw of Fullon 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 1862; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the

States, and served as a Private Soldier in Company N, of 8th Regiment of Georgia Volunteers Anderson's Brigade; that whilst engaged in such military service at the battle of Manassas in the State

of Virginia, on the 21st day of July, 1862, he was wounded as follows:

in the wrist of the right arm which
split and wrist and fractured the metacarpal
of the right hand; and drew the fingers of the
hand in towards the palm, thereby destroying
the use of the hand entirely, so far as the
performance of manual labor is con-
cerned

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

Twenty Five dollars, for 1892

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

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

STATE OF GEORGIA, }

Fullon County, }

I, M. L. Latham Ordinary of said County,

do certify that I am well acquainted with James M. Holtzclaw 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 March, 1893.

M. L. Latham
Ordinary Fullon County.

STATE OF GEORGIA

POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1894.

Executed in the presence of us

[L. S.]

DIRECTIONS.

Send money to me as follows, by

to

P. O.

County, Georgia.

Fulton Co
Hutchinson, C. M.
(One These Already Enrolled.)

No. 1185

Soldier's Pension.
1894.

Name *James M. Hagood*
County *Fulton*
Disability *Disabled hand*
Amount, \$ *25*
W/H

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDLED TO

Applicant

W. H. HARRISON, State Printer, Atlanta.

W. H. H. H.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County, }

PERSONALLY appears James McMillan of Fulton 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 1862; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private soldier in Company F, of 8th Regiment of Georgia Volunteers Anderson's Brigade; that whilst engaged in such military service at the battle of Manassas in the State of Virginia, on the 31st day of July 1862, he was wounded as follows: in the wrist of the right arm which stiffened and wrist an contracted the muscles of the right hand and drew the fingers of the hand in towards the palm, thereby destroying the use of the hand entirely, so for as the performance of manual labor is concerned,

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 20, 1894. I have heretofore been allowed a pension of Twenty five dollars, for the year 1893

Sworn to and subscribed before me, this, the 12th day of March 1894. J. McMillan
M. L. Calhoun Ordinary

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

STATE OF GEORGIA, }

Fulton County, }

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

Given under my official signature and seal, this 12th day of March 1894.



M. L. Calhoun
Ordinary Fulton County.

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

Given under my official signature and seal, this 12th
day of March 1894.



Wm. C. Johnson
Ordinary Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County, }

before me, _____

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

Witness my hand this _____ day of _____ 1904

Executed in presence of

Ordnary,

County,

SEAL

RECEIVED FOR STATE

Hand, Belle (Mrs)
Bullton Ga
(C.K. for 1904)

No. _____

WIDOW'S INDIGENT PENSION.

1904.6

Name *Belle Hood*
 County *Bullton*
 Widow of *Richard A. Hood*

Approved _____ 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1904.

Geo. W. Harrison, State Printer, Albany

9/25/06

POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

I, _____ hereby authorize _____

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

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

Witness my hand this _____ day of _____ 190 _____

Executed in presence of _____

Ordinary,

L. S.

County,

SEAL

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County,

_____ of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and swears as follows:

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

403 Laurel St. Atlanta, Ga

2. How long and since when have you been a resident of this State? *Four years*

Since 1896

3. When and where were you born? *March 18th 1842*

Fairfield County, Ga

4. When and where was your husband born—state his full name, and when were you and he married?

(Attach copy marriage license in every case.) *July 23rd 1863 Columbia, S. C.*

Richard A. Ford—Married July 23rd 1863

5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States? *Enlisted in 1861 in Co. C 2nd Reg. S. C. Cavalry. Served in Virginia principally.*

6. How long did your husband serve in said Company and Regiment? *Four years.*

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

April 9th 1865 at Appomattox, Va.

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

Yes.

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

10. When and where did your husband die? *Oct 28th 1887 Fairfield*

County, S. C.

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

Age and Poverty.

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?

Am or twelve years

13. What has been your occupation since your husband's death? *Domestic*

14. How much can you earn gross, by your own exertion or labor? *Nothing*

15. What property, real or personal, or income do you have or possess, and its gross value?

Nothing

16. What property, real or personal, did you possess at death of husband? he left you, and of the years 1899, 1900, 1901, 1902, 1903, 1904, and what disposition, if any, by sale or gift, have you made of the same?

No return

17. In what counties did you reside in 1899, 1900, 1901, 1902, 1903 and 1904, and what property did you return for taxation? *Fuller—No return*

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

19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? *Cost no account contributed nothing*

20. What was your employment during 1899, 1900, 1901, 1902 and 1903—how much did you receive for each year? *Assisted in raising horses—no compensation*

21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? *One daughter—no property*

22. Have you ever made application for pension before? *No*

23. How many applications have you made for a pension, and under what class? _____

Sworn to and subscribed before me, this the _____ day of _____ 190 _____

John W. Lindsey Ordinary,

of *Fuller* County.

Handy Reg. Sec. (1900)
Fuller Co.
(Feb. Jan. 1901)

No. _____

**WIDOW'S
INDIGENT PENSION.**

1904.6

Name *Belle Wood*
County *Fuller*
Widow of *Richard A. Wood*

Approved _____ 1904

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

1904.

9/25/06

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA.

Fulton County. }
J. McLeod of said State and County, having

been presented as a witness in support of the application of Mrs. Belle Wood for a Pension under the Act of 1900, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside?
544 Brotherston St. Atlanta Ga

2. Are you acquainted with the applicant, Mrs. Belle Wood

If so, how long have you known her? 62 years

3. Where does she reside, and how long and since when has she been a resident of this State?

413 Crew St 10 years since 96

4. When and where was she born? March 18th 1842

5. Were you ever acquainted with her husband?

yes

6. Where did she reside in 1861? McLeod County S. C.

7. When and to whom was he married? Richard A Wood before 1855

8. When and where was he born? Feb. 23 - 1838 Columbia SC

9. How long have you known him? 62 years

10. When and where did Richard A Wood enlist in the war between

the States, and in what Company and Regiment did he enlist, and how do you know this? 1861. Co. E. 2nd Regt. Cavalry S. C.

11. Were you a member of the same Company and Regiment? I was not but I was

a member of Co. B. 1st Regt. of Infantry

12. How long did he perform regular military duty? from 61 to 94 April

1865

13. When and where was his Company and Regiment surrendered and discharged from service?

April 5 1865 at Appomattox Va.

14. Were you with the Command when it surrendered? I was not

15. Was Richard A Wood the husband of applicant present? yes

I knew him from before him and other checks of it

16. If not present, where was he?

17. When and where, did he leave his command?

For what cause? by being Paroled

By whose authority he left? to 8th Regt. 4th Cond. Div. Corps

How do you know all this? (State fully and clearly.) from being firm and

and members of his Company, both of his

being present at the capitulation

18. When and where did Richard A Wood die?

Oct. 28th 1894 Fairfield County S. C.

19. Where did he reside at his death and how long had he been a resident of Georgia at his death?

Fairfield County S. C.

20. Do you of your own knowledge know that applicant is the lawful widow of Richard A Wood

yes

21. Has she remained unmarried since her soldier husband's death, and is now his widow?

yes

22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?

she has no real estate since the

property was sold by the heirs

23. What property, effects or income did applicant possess in 1899, 1900, 1901, 1902 and 1903, and what disposition did she make of it?

none

24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom?

none

25. What is applicant's physical condition and her chances and ability to earn a support?

she is afflicted almost totally and

unable to make a support

26. Is applicant able to earn a support at labor of any sort, if not, why? no age & affliction

27. How was she supported for 1899, 1900, 1901, 1902 and 1903? by her children

28. How much did applicant contribute to her support for last two years? nothing

29. Give a full and complete statement of applicant's physical condition? she is old
frail and afflicted sight-failing

30. What interest have you in the recovery of this pension by the applicant? none

Sworn to and subscribed before me this 10th

day of July 1906

John W. Buchanan Ordinary, J. McLeod

Fulton County. } Witnesses

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County, }

Personally before me comes D. D. Dawson and

D. D. Dawson, both known to me to be reputable

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

Mrs. Belle Wood applicant for a Pension under act of 1900, and after

such personal examination say that her physical condition is this: old age failing

eyes, slight rheumatism and general

weakness

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 10th

day of July 1906

John W. Buchanan Ordinary, A. D. Dawson, M.D.

Fulton County. } D. D. Dawson, M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County, }

I, John W. Buchanan Ordinary, in and for said County, hereby certify

that the applicant, Mrs. Belle Wood resides in said County,

and has been a bona fide resident of this State since the 10th day of July

1899, and that the witnesses, Mr. J. McLeod

are of trustworthy character, and that their statements

are entitled to full faith and credit.

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

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

returned for taxation in her own name in 1899 dollars worth

of property, and in 1900 dollars worth of property,

in 1901 dollars worth of property,

in 1902 dollars worth of property,

in 1903 dollars worth of property,

in 1904 dollars worth of property.

Witness my hand and official seal this 15th day of Sept 1906

John W. Buchanan Ordinary.

Fulton County.

SEAL

Notes.—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth (do help you God)."

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

3. All affidavits must be made before Ordinary.

4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are new widows. Those married since the 9th April, 1865, not entitled.

5. Witnesses and two Physicians also necessary to make out claims.

6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

of _____

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

at _____

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

day of _____ 1907.

[L. s.]

Executed in presence of _____

Hand, Heile
Fulton Co.
 To Those Heretofore Paid.
1907.
No. 12
INDIGENT
WIDOW'S PENSION,
 For year ending Dec. 31, 1907.
PAID TO
Mrs. Belle Wood
 OF
Fulton County,
Widow of Dick G. Wood
Cadet 2^d of 1st Regiment.
JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT ISSUED
1/16 1907.
 AND HANDLED TO
CH
 JOHN W. LINDSEY, 1707 FULTON, ATLANTA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALTY COMES MRS.

Belle Hood

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

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

continuously ever since

That she is the Widow of

Richard M. Hood

who was a soldier in Company

C of the2^dRegiment of S. C.

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

1861, and served in the Army up to Appomattox 1865

That he died on

the _____ day of _____

1884Infirmary & age

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

I have been allowed an Indigent pension as a resident of Fulton.

County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me

this _____ day of JAN 2- 1907.John R. Wilkinson, Ordinary.

Post Office _____

Belle Hood

State of Georgia,

Fulton

County.

I, John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. Belle Hood, 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 _____ 1846Given under my official signature and seal, this the _____ day of JAN 2- 1907.

{ Official Seal }

John R. WilkinsonOrdinary of Fulton County.

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

and attested that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the _____ day of _____ 18 96

Given under my official signature and seal, this the _____ day of JAN 2 1907.



John R. Wilkinson

Ordinary of Fulton County.

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

Hood, Belle (mrs.)
For Fulton County

1926

**Application for Pension
Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

For Wm. H. Jeffries Ordinary

For Mrs. Belle Hood

Date of Death Dec 10 1927

Amount \$ 120.00

Approved and ordered paid OK

John W. Clark
20 April 28 JOHN W. CLARK,

Commissioner of Pensions

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

ATLANTA, GA. Jan. 6 1928
For funeral expenses of Mrs. Belle Hood.

**J. AUSTIN DILLON COMPANY
FUNERAL DIRECTORS**

502 PRYOR STREET, S. W.

PHONES (MAIN 4880
MAIN 4881)

PRIVATE AMBULANCE

Dec. 10 1927

Casket
Embalming & Services.
Dress
Funeral Notices.
Pallbearers' Gloves
Steel Vault.
Vault to cemetery.
Grave Fee (20.00)
Hearse

\$ 595.00

Georgia.
Fulton County.

Personally appeared before me J. Austin Dillon who after being sworn says the above account is just true and was for the funeral expenses of Mrs. Belle Hood.

J. Austin Dillon

Andrew R. M. M. M.
6-60

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes J. Austin Dillon of said County, who, after being sworn, on oath says that he knew Miss Belle Hood of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Fulton County, in this State, on the 19 day of Dec, 1927, and that a Pension of (\$ 200.00) Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$195.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me
William R. Burchett Ordinary
Fulton County
(Seal of Ordinary)

J. Austin Dillon

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos H. Jeffries Ordinary of said County, do certify that I personally know J. Austin Dillon 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 Miss Belle Hood while in life and that this was the same person whose name appears on the Pension Roll of Fulton County, and was paid a Pension of Two Hundred (\$200.00) Dollars in said County for 1927, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 10 day of Aug, 1928.
(Seal of Ordinary) Thos H. Jeffries Ordinary
Fulton County

INSTRUCTIONS:

- 1st. Require those claiming expense of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "Just, true, due, unpaid," etc.)
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of who died without owning sufficient property to pay this bill."
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.
- 6th. Return this application, and attached bills, with your final settlement to the Pension Department.
- 7th. Ordinary should see that the back of this blank, when folded, is filled out.

- ind. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "Just, true, due, unpaid," etc.)
 "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of
 who died without owning sufficient property to pay this bill."
 ind. 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.
 6th. The completed voucher—this blank and the bill—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
 6th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.
 6th. Return this application, and attached bills, with your final settlement to the Pension Department.
 7th. Ordinary should see that the back of this blank, when folded, is filled out.



HISTORICAL COMMISSION
OF SOUTH CAROLINA

A. S. SALLEY, JR., SECRETARY

COLUMBIA, S. C. June 1, 1906.

This is to certify that R. Hood is shown by the records of this department to have been in Confederate service as a private in Co. C., 2nd Regiment of Cavalry, South Carolina Volunteers.

A. S. Salley, Jr.

Secretary.

STATE OF SOUTH CAROLINA.

EXECUTIVE DEPARTMENT

OFFICE OF STATE TREASURER

COLUMBIA, S. C.

1906

June 1

Mrs. Belle Hood,

Atlanta Ga.

Your letter of 29th May received. I enclose herewith a certificate under seal from Mr. A. S. Salley Jr., Historical Secretary, showing that your husband was in Co. C, 2nd Regiment S. C. Volunteer Cavalry. Possibly this certificate may be all you need, if not however send your application and if there is any thing I can do to help you in the matter I will be glad to do so. I was not in Cavalry service myself, but in the infantry and consequently could not testify of my own knowledge as to his service, yet I know in a general way that he was a Confederate soldier. Your friend, *R. H. H.*

own knowledge as to his service, yet I
know in a general way that he was a Con-
federate soldier. Your friend, *Wm. H. R.*

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I,

being authorized

of

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

at

by

Witness my hand and seal this

day of

1897.

Executed in presence of

OK *Johnston M. L.*
Hood James C.
No. *7283* *Hulton*

INDIGENT PENSION

1897.

Name

James P. Hood

County

Fulton

Approved

7/8

1897.

WARRANT HANDED TO

W. L. H.

ED. W. HARRIS, STATE PRINTER, ATLANTA.

1/1697

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me George A. Wilson and
W. B. Wilson, both known to me as reputable physicians

of said county, who being severally sworn, say on oath that they have examined carefully James P. Howard, applicant for pension under the Act of 1894, and after

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

He is crippled in the left leg, the result of
a gun shot wound made during the war
of the Civil War. The muscles of the thigh were also injured
by a shot and pulled. He is broken down completely
and unable to do any little work.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this 10th day of August 1897. George A. Wilson &
W. B. Wilson M.D. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, W. B. Wilson, Ordinary in and for said County, hereby certify that the applicant James P. Howard resides in said County, and was a bona

fide resident of this State on the first day of January, 1894, and that the witnesses, viz: W. B. Wilson and George A. Wilson are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1895, \$7.00 dollars of property, and in 1896, \$5.00 dollars of property.

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

Witness my hand and seal of office, this 16th day of January 1897.

W. B. Wilson Ordinary
of Fulton County.

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

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Fulton County.

William J. Fincher, of said State and County, having been presented as a witness in support of the application of James P. Howard for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Wm J. Fincher, of residence
Dr. S. B. McManis St. Atlanta, Georgia
2. Are you acquainted with James P. Howard, the applicant, is of how long have you known him? Yes, since then known him since 1861
3. Where does he reside, and how long has he been a resident of this State? He resides now
in Fulton County, Ga. and has been in this State since 1861.
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Yes, sir. Because the end of both served
with him in company Dr. 14 Regiment Ga. Volunteer
Company, Dr. 14 Ga. Regiment on April 9, 1861 at Atlanta, Ga. and Co. Ga.
5. When, where and in what company and regiment did he enlist? Yes, he enlisted in the
Confederate army, Dr. 14 Ga. Regiment on April 9, 1861 at Atlanta, Ga. and Co. Ga.
6. Were you a member of the same company and regiment? Yes, sir.
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? From time he enlisted
till he left wounded in Aug. 1864 to go to the Hospital of did
not see him after that till he came home after the war of
Kansas he showed 3 years
8. What property, effects or income has the applicant? (Give your means of knowledge.) None that I know of. I have visited him often during
and have seen him and have never heard any thing about what
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? Nothing. Except a small supply of house keeping
things and a few old tools would not sell for \$50.00
He said them get
10. What is the applicant's occupation and physical condition? His occupation is
nothing. He is physically broken down and unable
to work on account of his crippled leg.
11. Is the applicant unable to support himself by labor of any sort, if so, why? Yes, sir
on account of his leg so crippled him and has
afflicted his health so he can't work.
12. How was he supported during the years 1895 and 1896? By the means
of his two daughters that one grows and supports
13. What portion of his support for these two years was derived from his own labor or income? Not a thing unless his counsel was valuable.
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is getting old he was wounded
twice in the war is suffering from the leg wound
and then grown so he is unable to go to work
15. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this
the 15th day of August 1897.

W. B. Wilson Ordinary.

W. J. Fincher
Witness.

POWER OF ATTORNEY.

State of Georgia,

County.

I,

hereby authorize

of

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

by

at

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

day of 1898.

Executed in presence of

[L. S.]

Hook, James P.
Hulton
ACT OF 11 MAR., 1884.
(For Those Already Enrolled.)

NO. 368

INDIGENT

**SOLDIER'S PENSION,
1898.**

Name *James P. Hood*
County *Fulton*

WARRANT ISSUED

4/12 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

affick

GEORGE W. HARRISON, STATE PRINTER, ATLANTA.

No date

Hook, James P.
Hulton
CODE REG. 1384.
(For Those Already Enrolled.)

NO. 476

INDIGENT

**SOLDIER'S PENSION,
1899.**

Name *James P. Hood*
County *FULTON*

WARRANT ISSUED

4/18 1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

affick

GEORGE W. HARRISON, STATE PRINTER, ATLANTA.

Hook, James P.
Hulton

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

hereby authorize

of

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

at

by

Witness my hand and seal this day of 1899.

Executed in presence of

(L. S.)

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears James P. Hood

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 1844; that he is 54 years old and by occupation a Laborer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company B, of 14th Regiment of Georgia Vols; that his physical condition is as follows:

General Debility

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 1898. I have heretofore as a resident of Cherokee county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the

12th day of Aug 1898.

W. H. Hulsey Ordinary.

State of Georgia,

Fulton County.

I, W. H. Hulsey

Ordinary of said County,

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

Given under my official signature and seal, this 12

day of Aug 1898.

W. H. Hulsey
Ordinary Fulton County.



NOTE.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County.

Personally appears James P. Hood of FULTON

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 1844; that he is 55 years old and by occupation a Laborer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company B, of 14th Regiment of Georgia; that his physical condition is as follows:

General Debility

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 1898. I have heretofore as a resident of FULTON county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the

16 day of Aug 1898.

W. H. Hulsey Ordinary.

State of Georgia,

FULTON County.

I, W. H. HULSEY

Ordinary of said County,

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

Given under my official signature and seal, this 18

day of Aug 1898.

W. H. Hulsey
Ordinary FULTON County.



NOTE.—The blank spaces must be filled.
NOTE.—An Affidavit should not be returned before January 1st, 1899.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1900.

[L. S.]

Executed in presence of _____

INDIGENT

SOLDIER'S PENSION,

1900.

Name *James P. Hoar*
County *FULTON*

WARRANT ISSUED

1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H. B.

Geo. W. Harrison, State Printer, Atlanta.

No data

Handwritten notes

CODE 1875-1884

(For Those Already Enrolled.)

No. *300*

INDIGENT

SOLDIER'S PENSION.

1901.

Name *James P. Hoar*
County *Fulton*

WARRANT ISSUED

1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H. B.

Geo. W. Harrison, State Printer, Atlanta.

Handwritten notes

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON

County.

Personally appears J. P. Hood of FULTON 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 1844 day of 1844; that he is 56 years old and by occupation a Laborer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 1 year in Company D. of 14 th Regiment of Georgia; that his physical condition is as follows: General Debility

that his property consists of the following items: General Debility

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this 11 day of January, 1900. James P. Hood Ordinary.

State of Georgia,

FULTON

County.

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

Given under my official signature and seal, this 11 day of January, 1900.

Ordinary FULTON County.



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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON

County.

Personally appears James P. Hood of Fulton 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 1844 day of 1844; that he is 57 years old and by occupation a ; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 1 year in Company D. of 14 th Regiment of Georgia; that his physical condition is as follows: General Debility

that his property consists of the following items: General Debility

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 Fulton county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this 11 day of January, 1901. James P. Hood Ordinary.

STATE OF GEORGIA,

FULTON

County.

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

Given under my official signature and seal, this 11 day of January, 1901.

Ordinary FULTON County.



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1902.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____

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

at _____

by _____

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

[L. S.]

Executed in presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 148

INDIGENT

SOLDIER'S PENSION
1902.

Name *J. P. Good*
County *Fulton*

Co. *D* Regiment *44*

WARRANT ISSUED

1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

[Signature]

W. S. [Signature]

(FOR THOSE ALREADY ENROLLED)

No. 3

INDIGENT

SOLDIER'S PENSION
1907.

Name *James P. Good*
County *Fulton*

Co. *D* Regiment *44*

WARRANT ISSUED

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

[Signature]

W. S. [Signature]

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears James P. Hood of _____

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1844, 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 Georgia) during the war between the States, and served for the term of 4 yrs in Company 10 of 14th Regiment of 1st _____; that his physical condition is as follows: 1 year disability

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 Fulton county been allowed a pension for the year 1901

Sworn to and subscribed before me, this _____

day of JAN 13 1902.

James P. Hood

Ordinary.

STATE OF GEORGIA,

County.

I, John R. Wilkinson

Ordinary of said County,

do certify that I am well acquainted with James P. Hood the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

John R. Wilkinson

Ordinary

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

County.

Personally appears James P. Hood of _____

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18____; that he is _____ years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company 10 of 14th Regiment of 1st _____; that his physical condition is as follows: _____

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 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 Fulton County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this _____

day of _____ 1907.

John R. Wilkinson Ordinary James P. Hood

State of Georgia,

County.

I, John R. Wilkinson

Ordinary of said County,

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

Given under my official signature and seal this _____

day of _____ 1907.

John R. Wilkinson

Ordinary

County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____

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

Witness my hand and seal, this _____ day of _____ 1903.

Executed in presence of _____ [L. S.]

Hand James O. Fulton County
COMMISSIONER 1904
(FOR THOSE ALREADY ENROLLED)

No. 167

INDIGENT

**SOLDIER'S PENSION
1903.**

Name *Joe P. Wood*

County *Fulton*

Co. *D* Regiment *14th*

Warrant Issued

1/20 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W. H. Harrison, State Printer, Atlanta.

no data

Hand James O. Fulton Co

COMMISSIONER 1904.
(FOR THOSE ALREADY ENROLLED.)

No. 119

INDIGENT

**SOLDIER'S PENSION
1904.**

Name *Joe P. Wood*

County *Fulton*

Co. *D* Regiment *14th*

WARRANT ISSUED

1/24 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W. H. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____

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

Witness my hand and seal, this _____ day of _____ 1904.

Executed in the presence of _____ [L. S.]

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears Jas P Hood of Fulton 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 _____ 1844, 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 4 yrs in Company 20, of 14th Regiment of Geo; that his physical condition is as follows: I & P

that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the _____ day of JAN 20 1903 1903. { James P Hood Ordinary.

STATE OF GEORGIA,
Fulton. County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with Jas P Hood the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 20 1903 1903.

John R. Wilkinson Ordinary _____ County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears Jas P Hood of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1844, 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 4 yrs in Company 20, of 14th Regiment of Geo; that his physical condition is as follows: I & P

that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the _____ day of JAN 20 1904 1904. { James P Hood Ordinary.

STATE OF GEORGIA,
Fulton. County.

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

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

John R. Wilkinson Ordinary _____ County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize
of _____

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

WITNESS my hand and seal, this _____ day of _____ 1905.

Executed in the presence of _____

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize
of _____

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

WITNESS my hand and seal, this _____ day of _____ 1906.

Executed in the presence of _____

[L. S.]

COSS SECTION 134.

(FOR THOSE ALREADY ENROLLED.)

No.

166

INDIGENT

SOLDIER'S PENSION

1905.

Name James P. Hood

County Fulton

Co. D Regiment 14th Reg

WARRANT ISSUED

4/8 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W.H.

SEE PARTICULAR PROVISIONS AND REGULATIONS GOV. STATUTES, &c.

no date

COSS SECTION 134.

(FOR THOSE ALREADY ENROLLED.)

No.

62

INDIGENT

SOLDIER'S PENSION

1906.

Name James P. Hood

County Fulton

Co. D Regiment 14th Reg

WARRANT ISSUED

4/7 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W.H.

SEE PARTICULAR PROVISIONS AND REGULATIONS GOV. STATUTES, &c.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears James P. Hood of Fulton 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 day of 18; that he is 62 years old and by occupation a Carpenter, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company D, of 44th Regiment of La.; that his physical condition is as follows:

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Fulton County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the James P. Hood day of JAN 2 1905. John P. Wilkinson Ordinary.

STATE OF GEORGIA.

Fulton County.

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

Given under my official signature and seal, this JAN 2 1905 day of 1905.

John P. Wilkinson Ordinary Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears James P. Hood of Fulton 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 day of 1842; that he is 62 years old and by occupation a Carpenter, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company D, of 44th Regiment of La.; that his physical condition is as follows:

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the James P. Hood day of JAN 1 1906. John P. Wilkinson Ordinary.

State of Georgia,

Fulton County.

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

Given under my official signature and seal, this JAN 1 1906 day of 1906.

John P. Wilkinson Ordinary Fulton County.

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

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

Given under my official signature and seal, this JAN 2 1906
day of _____

Ordinary Fulton County.

NOTE.—The blank spaces must be filled.

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



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

Given under my official signature and seal, this JAN 1 1906
day of _____

Ordinary Fulton County.

NOTE.—The blank spaces must be filled.

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



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

I, _____, hereby authorize

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

at _____

by _____

WITNESS my hand and seal, this _____ day of _____, 1905.

Executed in the presence of _____ [L. S.]

Wood County
Fulton County

CODS SECTION 1204.

(FOR THOSE ALREADY ENROLLED.)

2-52 No. *1480*

INDIGENT
SOLDIER'S PENSION
1905.

Name *W. Hool*
County *Fulton*
Co. *6* Regiment *56 Ga.*

WARRANT ISSUED

11/30 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

THE PRINTER PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I,

hereby authorize

of

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

at

by

Witness my hand and seal, this day of

1895.

[L. 8.]

Executed in the presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I,

hereby authorize

of

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

at

by

Witness my hand and seal, this day of 1905

[L. 8.]

Executed in the presence of

Hood, John
Fulton County

COSE SECTION 134.
(FOR THOSE ALREADY ENROLLED.)
4th Kentucky - 1861
6-56 No. 1782

INDIGENT
SOLDIER'S PENSION
1905.

Name *John Hood*
County *Fulton*
Co. *B* Regiment *56th*

WARRANT ISSUED
11/30

1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
John

1905.

no date

Hood, John
Fulton Co.

COSE SECTION 134.
(FOR THOSE ALREADY ENROLLED.)
6-56 No. 174

INDIGENT
SOLDIER'S PENSION
1906.

Name *J. H. Hood*
County *Fulton*
Co. *B* Regiment *56th*

WARRANT ISSUED
11/7

1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
John

1906.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J. W. Wood of Fulton

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 11th day of April 1884; that he is 63 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 1/2 yrs in Company C, of 56th Regiment of Sea Co; that his physical condition is as follows: Infirmary & Poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Fulton County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 28th day of January 1905.

Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John Breckinridge Ordinary of said County,

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

Given under my official signature and seal, this 28th day of January 1905.

Ordinary Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears J. W. Wood of Fulton

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 _____ 1884; that he is 64 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company Co, of 56th Regiment of Sea Co; that his physical condition is as follows: Age, poverty and infirmity

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the

day of JAN 1 1906 1906.

Ordinary

State of Georgia,

Fulton County.

I, John Breckinridge Ordinary of said County,

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

Given under my official signature and seal, this JAN 1 1906 day of _____ 1906.

Ordinary Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize
 _____ of _____
 to receive and receipt for the pension allowed, and request that he remit same to
 _____ at _____
 by _____

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

[L. S.]

Executed in presence of _____

Handwritten: Hood & H
Fulton Co.
 C-56 Cum Recd. 124
(FOR THOSE ALREADY ENROLLED)
 No. 300
INDIGENT
SOLDIER'S PENSION
1907.
 Name J. M. Hood
 County Fulton
 Co. Co. Regiment 56 Reg
 WARRANT ISSUED
Me 1907.
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDLED TO
copy
Handwritten: copy
no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

County, Fulton
 Personally appears J. K. Beard of Fulton 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 _____ 1881; that he is 65 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company 6, of 56th Regiment of Geo; that his physical condition is as follows: Age infirmity & poverty

that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the _____ day of JAN 2 1907.
John R. Wilkinson Ordinary.

State of Georgia,

County, Fulton

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with J. K. Beard the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 2 1907.

John R. Wilkinson
 Ordinary _____ County.



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

do certify that I am well acquainted with J. H. Wood 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 JAN 2 1907.



John R. Williamson
Ordinary _____ County.

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

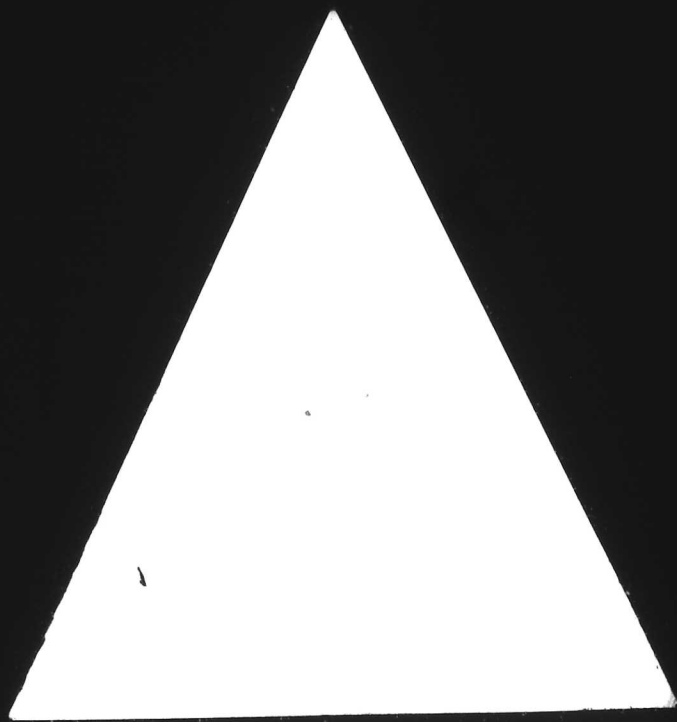
Georgia, Henry County.

I the undersigned do certify that J. H. Wood now of the
County of Fulton is the same person who as Indigent
pensioner was on the pension rolls of this county, and drew a pension of fifty dollars
for 1904, and the bearer is same man.

Given under my hand and official seal of office Jan 26 1905

E. G. Owens [L. S.]
Ordinary H. Co. Ga.





Hood, John M.
Fulton County

No. _____

INDIGENT PENSION

1900.

1901

Name John M. Hood

County Fulton
Co. B-1-S.C.

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1/5-1901
2/20/01

...is not used here...
...shall prevent him from...
...effort, with his...
...support in his...
...falling. Pensions are paid to...
...indigent soldiers that are...
...subjects to go to the poor house.

J.W. Lindsey,
Com. of Pensions.

...10/1/01...
...not of...
...definite...
...year he moved...
...a fine of...
...the above state-
...to be true.

J.W. Lindsey,
Com. of Pensions.

STATE OF GEORGIA,

Power of Attorney.

County, }

herby authentic

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

Witness my hand and seal, this _____ day of _____, 1900.

Executed in presence of

[L.S.]

Union Office - 9-29-1901.
 Applicant is not aged man,
 and has no means such as
 children as will provide for
 his reasonable support, with his
 or calling. Pensions are paid to
 much indigent soldiers that are not
 subject to go to the poor house.
 J.W. Lindsey,
 Com. of Pensions.

INDIGENT PENSION

1900.
 1901

Name John M. Wood

County Fultou
 Co. B-1-S.C.

Approved

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDED TO

Geo. V. Harrison, State Printer, Atlanta
 95-1967/104

Power of Attorney.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize
 to receive and accept for the pension allowed, and request that he remit same to
 at _____ by _____
 Witness my hand and seal, this _____ day of _____ 1900.

Executed in presence of _____

Questions for Applicant.

STATE OF GEORGIA,

Fultou County.

John M. Wood of said State and County, desiring
 to avail himself of the Pension Act (Section 1294, Code), hereby submits his proofs, and after being duly
 sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office)
 John M. Wood, P.O. Box 10, Fultou Co. Ga
2. How long and since when have you been a resident of this State?
 10. years - since December 1890
3. When and where were you born?
 13. March 1840, Fultou Co. S.C.
4. When and where and in what company and regiment did you enlist or serve?
 9th January 1861, at Newberry Co. S.C. Company "B", 1st Regiment of South Carolina Volunteers
5. How long did you remain in such company and regiment?
 About four years and four months
6. When and where was your company and regiment surrendered and discharged?
 9th April 1865, with Gen. Robert E. Lee's Army, at Appomattox Court House, Virginia
7. Were you present with your company and regiment when it was surrendered?
 I was not
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?
 I was captured by the Federalists at North Anna River, Va. May 1862
9. How much can you earn (gross) per annum by your own exertions or labor?
 About \$50.00
10. What has been your occupation since 1865?
 Small market at 57 N. Second St. Atlanta
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"?
 Age and poverty.
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
 Last nine years
 Except the small profits of my small market, which is not over \$50.00 or \$60.00 a year
13. What property, real or personal, or income, do you possess, and its gross value?
 I have no real property, but some personal property is about \$20.00 or thereabouts
14. What property, real or personal, did you possess in 1894, 1896, 1898, 1907, 1908 and 1899, and what disposition, if any, by sale or gift, have you made of same?
 Had no realty, and have not had at any time since the beginning of the war, except some personal property, except at any time
15. In what County did you reside during those years, and what property did you then return for taxation?
 In Fultou County, Ga; not more than \$50.00
16. How were you supported during the years 1898 and 1899?
 I am supported mostly by my children. We all reside at P.O. Box 10, Fultou Co. Ga.
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
 I contributed about \$20.00 each year
18. What was your employment during 1898 and 1899? What pay did you receive in each year?
 Since 1st of January 1891, have been keeping the small market named above
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
 I have a family - Wife and 4 children, 3 sons and one daughter, all living and dwelling; one daughter at telephone exchange; one has been employed in a store; one boy over 21 years old has no regular employment; two daughters going to school
20. Are you receiving any pension? If so, what amount and for what disability?
 None
21. Have you ever made an application for pension before?
 No
22. How many applications have you ever made and under what class?
 One, last now

Sworn to and subscribed before me this the _____ day of July, 1901.
 John M. Wood, Applicant.
 John R. Williams, Secretary,
 of Fultou County.

Every question must be answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Shilton COUNTY.

James A. Lathrop of said State and County, having been presented as a witness in support of the application of John M. Wood for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? James A. Lathrop, No 709, Kearns & Co. Street, Atlanta, Shilton County, Ga.
2. Are you acquainted with John M. Wood, the applicant; if so, how long have you known him? I have known him ever since 1860
3. Where does he reside, and how long and since when has he been a resident of this State? He now resides at 34 Buchanan Street, Atlanta; has resided in Georgia about 10 years
4. When, where and in what company and regiment did he enlist, and how do you know? About 10th January 1861, at ~~Richmond~~ ^{Richmond} Va. and he was in the same Co. and Regt. till the same time.
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? About 4 years and 4 months
7. When and where was his command surrendered? At Appomattox C.M., Va., 9th April 1865

8. Were you present when it surrendered? I was
9. Was applicant present? No
10. If he was not present, where was he? He was a Prisoner.

When did he leave his command? About 2nd May For what cause? He was captured by the enemy
By what authority he left? He was taken prisoner How do you know all of this? He was in my Co. and Command and were present when he was captured; and we received letters from him while he was a prisoner.

11. What property, effects or income has the applicant? (Give your means of knowledge) There is a few things, some things from the Government, and some from his own labor, and some from the Government. It is all the same of his substance, and he has been in the same place since.
12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? During the year, named he did not own or have any property worth mentioning
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? No.

14. What is the applicant's occupation and physical condition? He keeps a small shop, and is a poor man, and his physical condition is poor for one of his age. He is honest, industrious, and has no bad habits or vices.
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes, on account of his advanced age.

16. How was he supported during the years 1898 and 1899? He paid for his board and part of his time - in 1898, and was in little by his own money.
17. What portion of his support for these two years was derived from his own labor or income? A very small portion.

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Because he is very poor, and physically unable to labor, and because he was a faithful soldier, and is a worthy and deserving man.
19. What interest have you in the recovery of a pension by this applicant? None whatever.

Sworn to and subscribed before me, this 5th day of July 1900, at Shilton Georgia.
John R. Wilkinson Ordinary.

20 A. P. 1899-1900

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Shilton COUNTY.

Personally came before me, Smith & Co. M.D. and J. R. Wilson, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully John M. Wood, applicant for pension under Section 1254, Code, and after each personal examination say that his precise physical condition is as follows:

We find that John M. Wood is suffering with Chronic Rheumatism & General Debility and has been suffering with Rheumatism & General Debility from the past year - and is gradually getting worse.

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 5th day of July 1900, at Shilton Georgia.
John R. Wilkinson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Shilton COUNTY.

I, John R. Wilkinson, Ordinary in and for said County, hereby certify that the applicant John M. Wood resides in said County, and has been a bona fide resident of this State since the 5th day of Dec 1890 and that the witnesses, viz: James A. Lathrop

are of trustworthy character, and that their statements are entitled to full faith and credit. I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and witnesses before same was signed.

I further certify that the tax digests of Shilton County show that applicant returned for taxation in his name in 1898 \$50 Dollars of property, and in 1899 165 Dollars of property.

In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this 5th day of Sept 1900, at Shilton Georgia.
John R. Wilkinson Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of

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

at

by

Witness my hand and seal, this

day of

1905.

[L. S.]

Executed in the presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of

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

at

by

Witness my hand and seal, this _____ day of _____ 1905.

[L. S.]

Executed in the presence of

Hood, John M.
Fulton County

COUS BROTHER 1254.
(FOR THOSE ALREADY ENROLLED.)

No. *105*

INDIGENT
SOLDIER'S PENSION
1905.

Name *John M. Hood*
County *Fulton*
Co. *1st C. Co.*

WARRANT ISSUED

1905

4/8

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John M. Hood

First Pensioners Association and Pensions Co., Atlanta, Ga.

no date

Hood, John M.
Fulton Co.

COUS BROTHER 1254.
(FOR THOSE ALREADY ENROLLED.)

No.

70

INDIGENT

SOLDIER'S PENSION

1906.

Name

John M. Hood

County

Fulton

Co.

1st C. Co.

WARRANT ISSUED

1906

4/7

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John M. Hood

First Pensioners Association and Pensions Co., Atlanta, Ga.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears John W. Hood of Fulton

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 65 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States for of the State of Georgia during the war between the States, and served for the term of 4 yrs in Company B, of 1st Regiment of South Carolina; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 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 16 day of Jan, 1905. John W. Hood Ordinary.

STATE OF GEORGIA.

Fulton County.

I, John W. Hood Ordinary of said County, do certify that I am well acquainted with John W. Hood the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 day of Jan, 1905.

Ordinary Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears John W. Hood of Fulton

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 1890; that he is 65 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company B, of 1st Regiment of South Carolina; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 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 16 day of JAN, 1905. John W. Hood Ordinary.

State of Georgia,

Fulton County.

I, John W. Hood Ordinary of said County, do certify that I am well acquainted with John W. Hood the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 day of JAN, 1905.

Ordinary Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I,

hereby authorize

of

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

at

by

WITNESS my hand and seal, this

day of

1907.

[L. S.]

Executed in presence of

Handwritten: Hood, John M.
Gaulton &

One Minute 124.
(FOR THESE ALREADY ENROLLED)

No. 37

INDIGENT
SOLDIER'S PENSION
1907.

Name *W. M. Hood*
County *Polk*
Co. *1*
Regiment *1st*

WARRANT ISSUED
1907

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDLED TO

Handwritten signature
One W. Lindsey, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears John M. Wood of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of Sept 1866; that he is 66 years old and by occupation a Wine Merchant, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company 18, of 1th Regiment of A. C. Wood; that his physical condition is as follows: Age & poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the _____ day of JAN 1907.

John R. Williamson Ordinary. J. M. Wood

State of Georgia,

Fulton County.

I, John R. Williamson Ordinary of said County,

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

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

John R. Williamson Ordinary. _____ County.

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

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

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



Ordinary _____ County.

NOTE.—The blank spaces must be filled.
NOTE.—An affidavit should not be attested before January 1st, 1907.

Ordinary's Certificate

STATE OF GEORGIA

Fulton COUNTY

I, W. H. H. H. H. Ordinary of said County, do certify that I know Wm. Hood the applicant for pension. She

is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908, Wm. Hood

Wm. Hood was duly sworn by me before signing the foregoing affidavit and that she is the truth, first worthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 19th day of Nov 1914 (SEAL)

W. H. H. H. Ordinary, County

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will answer the questions asked you and the evidence before me truthfully, first worthy, and their statements are entitled to full faith and credit." 2. Only widows who married prior to January 1st, 1901, are entitled. 3. Affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by the Ordinary. 4. Certified copies of marriage license if obtainable. If not, prove marriage by some person, or by general appearance.

Hood, Della E. (Mrs)
1914
No. 7 Fulton County
E-64
Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton
Name Mrs. Della E. Hood
Widow of M. E. Hood
Company C
Regiment 64th Ga
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co. State Printers, Atlanta.

10-31-1919

Ordinary's Certificate

STATE OF GEORGIA

Fulton COUNTY.

I, T. H. Jeffries, Ordinary of said County, do certify that I know Mrs. Luella E. Hood the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know she is a widow of her husband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they are truthful, trust- worthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 18 day of Oct 1919

SEAL

Ordinary,

Fulton County.

- NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are sufficient.
3. Only widows who married prior to January 1st, 1891, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Under Act 1910-as Amended by Act of 1919

Widow's Pension

County Fulton
Name Mrs. Luella E. Hood
Widow of Mr. H. Hood
City C
Residence 64th Ga
Approved _____

J. W. LINDSEY

Commissioner of Pensions

State Printing Co. State Printer, Atlanta.

10-31-1919

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name, and where do you reside? Mrs. Luella E. Hood, Pharr St., Buckhead, Atlanta, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? All my life.
3. When, where and to whom were you married? Feb. 23, 1874 to M. H. Hood, Cobb Co., Ga.
- a. Have you married since the death of first and soldier husband? No.
- b. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service) Mar. 1, 1863, Cobb Co., Ga. in Co. E., 54th Ga. Inf.
5. When and where did the commands of your husband surrender or discharge from the army? Dont know
6. Was your husband personally present at the time of the surrender or discharge of this command? No
7. If he was not present state clearly where he was? Hospital at Macon, Ga.
8. Where was his command when he left? Ream, Macon, Ga.
- a. For what cause did he leave his command? Sickness
- b. By whose authority did he leave his command? Commanding officers
- c. For how long was he granted leave of absence? Period of disability
- d. What was his physical condition when he left his command? Sick with malaria
- e. What effort did he make to return to his command? Unable on account of sickness
- f. In what way was he prevented from going back to Command No
- h. Was he captured by the enemy at any time? No
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- j. When and where did your first husband die? Feb. 24, 1917
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? Never resided apart
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No
- If so, when and for what cause were you or your husband placed on the roll? Applied several years ago but was disabled on account of property at that time

Sworn to and subscribed before me this

18 day of October 1919

William R. Warrick Ordinary

of Fulton County.

(SEAL)

Mrs. Luella E. Hood her mark.

Hoke Smith,
Chairman.

United States Senate,
Committee on Education and Labor,
Washington, D. C.

EXECUTIVE DEPT

February 14, 1916.

Mr. M. D. Hood,
Newell, Ga.

Dear Sir:-

Referring to your recent letter
with reference to your record in the Confederate
Army, I quote from a letter received this morning
from the War Department, as follows:

"The records show that one M. D. Hood, name
also found as 'Hood', served as a private in Co. E, 64th Georgia Infantry, Confed-
erate States Army. He enlisted March 1, 1863,
and his name appears on the roll of the company
for September and October, 1864 (last on file),
with remark: 'Absent sick in hospital, Macon,
Ga., since Oct. 20, 1864.' No latter record of
him has been found."

It gives me pleasure to be able to send you
this information.

With good wishes,

Sincerely yours,

Hoke Smith

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
MRS. CLAUDE L. FOSTER, who upon oath says:

That she knows Mrs. Luella Hood and knew her husband,
M. D. Hood; that the said M. D. Hood died in Cobb Co., Ga., on Feb.
24, 1917; that the said Mrs. Luella Hood and the said M. D. Hood
were living together as man and wife at the time of his death; that
the said Mrs. Luella Hood has not remarried since the death of her
husband and is now his lawful widow.

Sworn to and subscribed before me
this October 16, 1919.

William R. Moulton
C O Ordinary Fulton Co., Ga.

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
MRS. LUELLA E. HOOD, who upon oath says:

That she is the widow of M. D. Hood, who died on Cobb
County, Ga., on Feb. 24, 1917; That the said M. D. Hood was a member
of Co. E, 64th Ga., Reg. of Inf., and served with said company and regiment
from March 1, 1863 to Oct 20, 1864, when he was sent to the hospi-
tal at Macon, Ga., on account of measles and was never physically
able to rejoin his command.

That she has made every effort to locate some member
of his company and regiment who could make affidavit as to his service
and has been unable to do so; that she now knows of no living member
of said company and regiment who could make affidavit as to the ser-
vice of her husband in the Confederate Army.

That she attaches hereto certain secondary evidence and
asks that same be accepted as proof of the service of her husband in
the Confederate Army.

Sworn to and subscribed before me
this October 16, 1919.

William R. Moulton
C O Ordinary Fulton Co., Ga.

Mrs. Luella E. Hood
her
mark

That she attaches hereto certain secondary evidence and asks that same be accepted as proof of the service of her husband in the Confederate Army.

Sworn to and subscribed before me
this October 16, 1919.

Attest R. Macabert
C. C. Ordinary Fulton Co., Ga.

Mrs. Susan E. (X) Hood
her
mark

MARRIAGE LICENSE

OF

M. D. Hood

AND

Loula Mabry

Issued July 23-1874 191

and recorded on page 62

Book "B" of Marriage Licenses.

J. M. Hammill
Ordinary

Georgia Cobb County
I J. M. Garris Ordinary of Said County
certify that the within is a true copy of the Marriage
License of M. D. Hood & Loula Mabry, as found of record
in this office.
Witness my hand & Seal of Office
J. M. Garris
Ordinary Cobb Co. Ga.

MARRIAGE LICENSE

OF

M. D. Hood

AND

Loula Ellabry

Issued *Feb* 23, 1874 101

and recorded on page 62

Book "B" of Marriage Licenses.

J. M. Hammill
Ordinary

Georgia Cobb County

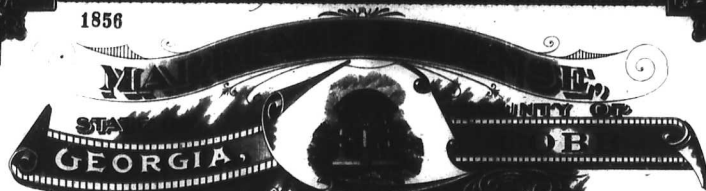
*I J M Hammill Ordinary of said County
Certify that the within is a true copy of the Marriage
License of M. D. Hood & Loula Ellabry, as found of record
in this office.*

I witness my hand & Seal of Office

J M Hammill

Ordinary Cobb Co. Ga.

1856



TO ALL WHOM THESE PRESENTS SHALL COME, I, THE MINISTER OF THE GOSPEL,

M. A. Hood and *Loula Mabry*
You are hereby authorized to join
in the Holy Rite of Matrimony, according to the Constitution and
Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me with your
Certificate hereon of the fact and date of the Marriage.

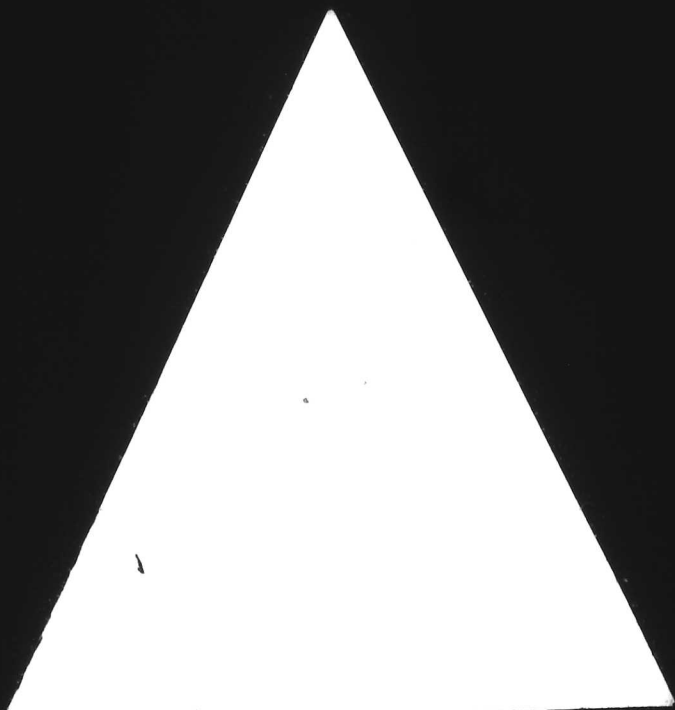
Given under my hand and seal this 23rd day of
February 1874.

H. W. Hammon (LS.)
Ordinary.

STATE OF GEORGIA COBB COUNTY

I Certify that *M. A. Hood* and *Loula Mabry*
were joined in Matrimony by me this 23rd day of February Nineteen Hundred
and 1874

Recorded 19 *H. B. Brown*
Ordinary.



TO PAY-
1930. \$ 96.50
Cig. & C. Tax. \$
TOTAL

E. P. Downer
9650 15650
For Fulton County
1933

Application for Pension
Due Deceased Pensioner
(UNDER ACT 1904)
(To pay expenses of last illness and
funeral)

Thos H. Jellies Ordinary
For Washburne Ho. od
Date of Death Feb 4 1933
Amount \$ 60.00 96.50

Approved and ordered paid

PAID
APPROVED FOR PAYMENT
BY W. H. C. C.
OFFICIAL OF PENSION
VETERANS SERVICE OFFICE

PAID TO ORDINARY ON THIS CLAIM:
FUND FROM WHICH PAID
1933
1934
1935
TOTAL 166.50

MAR 14 1935

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Thomas H. Jeffries of said County, who, after being sworn, on oath says that he knew Malinda Hood of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Fulton County, in this State, on the 4th day of February, 1933, 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 \$466.50, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,

J. J. Baker, Ordinary
J. J. Baker County
(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thomas H. Jeffries, Ordinary of said County, do certify that I personally know Malinda Hood, who is a resident of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit, that I also know Malinda Hood while in life and that this was the same person whose name appears on the Pension Roll of Fulton County, and was paid a Pension of Twenty (\$20.00) Dollars in said County for 1932, 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 21 day of Feb, 1933
(Seal of Ordinary) Thomas H. Jeffries, Ordinary
Fulton County

INSTRUCTIONS

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and send same.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of Malinda Hood, who died without leaving sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bill—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to allow the payment.
- 5th. Return this application, and attached bill, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when filled, is filled out.

To Dr. V. F. Dinsmore,
Tifton, Georgia.

E. P. BOWEN & SON FUNERAL HOME

Love Avenue
TIFTON, GEORGIA

February 15th, 1933

1933

February 14th, To Casket, Embalming, Dress, Prof. Services and Shining Glasses. \$150.50

February 6th, By Cash to balance account. (Dr. V. F. Dinsmore) \$150.50

The above and foregoing account is rendered for funeral expenses of Mrs. Malinda A. Hood, who died without leaving sufficient property to pay this bill.

Witness:

E. P. Bowen & Son
Notary Public, Georgia, Tifton, Ga.
My Commission Expires Dec. 31, 1935

A Certificate

STATE OF GEORGIA, County of Fulton

IN RE: Expenses last illness and funeral Mrs. Malinda Hood

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

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

This the 16 day of Aug, 1933.

(SEAL)

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

Received of Thomas H. Jeffries, Ordinary, \$96.⁵⁰
for the account of Malinda Hood. This amount
has not previously been paid and is now owing to me.
March 15 1933.

E. P. Bowen & Son
E. P. Bowen & Son
undertaken per above

INSTRUCTIONS

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of _____, who died without leaving sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed, as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when filled, is filled out.

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

Received of Thomas H. Jeffries, Ordinary, \$96⁵⁰
for the account of Malinda Ford. This amount
has not previously been paid and is now owing to me.

March 13 1933.

E. J. Garrison and Son
By Ernest Garrison, Jr.
Audited and paid

Hood, M. L. Mrs
Fulton County
1914

No. 1

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 Fulton

Name Mrs M L Hood

Widow of J P Hood

Company Co H 54 Reg

Approved _____

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

10/31-1914

163 Bellwood Ave.

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA.

FULTON County.

Personally before me comes Mrs. M. L. Hood of said County, who, after being duly sworn, on oath says, that she is the widow of J. P. Hood to whom in the County of Cobb State of Georgia she was married on the 17th day of October 18 67 and that she remained his wife, and resided with him to the date of his death in March 19 14 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in Atlanta said State of Georgia, and he was on the Annual Pension Roll of the State and paid a pension of \$ 60.00 in Fulton County for 19 14 per annum, on account of being a soldier in Company "H" Regiment 5th (Volunteers of State Militia).

At the death of J. P. Hood he was in the use and possession of the following property. None

of the cash value of \$ None

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

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

That she is now a bona fide resident citizen of said County of Fulton and she has so continuously resided since 1900 day of 11th Mo

Sworn to and subscribed before me, this the 8th day of Sept 1914 Mrs. M. L. Hood Widow
John W. Linsley Ordinary,
of Fulton County.

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

STATE OF GEORGIA,

FULTON County.

Personally before me come John W. Linsley known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. M. L. Hood who made the foregoing affidavit, is the lawful widow of J. P. Hood who died in Fulton County in said State of Georgia on 28th day of March 19 14 and that she has not since remarried. That she was the wife of J. P. Hood on the 17th day of Oct 18 67 and that she and he had resided together as man and wife continuously since 17th day of Oct 18 67 and that the J. P. Hood was the same man who was on the pension roll of said State from Fulton County when he died.

Sworn to and subscribed before me, this the 8th day of Sept 1914 John W. Linsley Ordinary,
of Fulton County.

Widow's Application

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

Name Mrs. M. L. Hood

County Fulton

Widow of J. P. Hood

Company 1st Regt 5th Div

Approved

J. W. LINSLEY,

Ordinary of Fulton

CITIZEN & STATE BANK SYSTEM, ATLANTA

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

Mary L. Leimer & James P. Hood to Mary L. Leimer

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

Mary L. Leimer folio 147

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the Court of Ordinary,

this 27th day of June 1914

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

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me come *Forster & Hunter and J. S. Pruitt* who after being sworn on oath says, that they are freeholders of said County, and that they know *Mrs. M. L. Hood* of said County and know her said husband *L. P. Hood* at his death on the 28th day of *March* 1914 that she and he were in the use, possession and control of the following property at his death to wit: *None*

of the value of \$ *None* That she is now in the use, possession and control of the following property to wit: *None*

of the value of \$ *None*

Sworn to and subscribed before me, this *27th* day of *Sept* 1914 *Forster & Hunter*
John P. Williamson Ordinary. *J. S. Pruitt*
of *Fulton* County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, *John P. Williamson* Ordinary of said County, do certify, that, I know *Mrs. M. L. Hood* the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the *Sept 8* 1914

That I also know *Forster & Hunter & J. S. Pruitt* witnesses as to marriage and I also know that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax books of *Fulton* County shows that *Mrs. Hood* returned property to the amount of *None* for 1908 \$ *None* for 1909 \$ *None* for 1910 \$ *None* 1914

Sworn under my hand and official seal of office this *27th* day of *Sept* 1914
(SEAL.) *John P. Williamson* Ordinary.
Fulton County.

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

Marriage License

OF

James P. Hood

AND

Mary Lee Sizer

Issued *October 17, 1867*

and recorded on Page *A 147* Book

A of Marriage Licenses.

ORDINARY.

Marriage License

OF

James P. Hood

AND

Mary Lee Suggs

Issued *October 17/1867*

and recorded on Page *A 147* Book

A of Marriage Licenses.

ORDINARY.

407

MARRIAGE LICENSE

STATE OF GEORGIA

COUNTY OF COBB

To any Judge, Justice of the Peace, or Minister of the Gospel

YOU ARE HEREBY AUTHORIZED TO JOIN

James P. Hood and *Mary Lee Swan*
 in the Holy State of Matrimony, according to the Constitution and Laws of this
 State and for so doing this shall be your License
 And you are hereby required to return this License to me, with your Certificate
 hereon of the fact and date of the Marriage.

October 1867 day of *John E. Campbell* (L.S.)
 given under my hand and seal this

State of Georgia

CERTIFICATE

County of Cobb

I CERTIFY that *James P. Hood* and *Mary Lee Swan*
 were joined in Matrimony by *me* this *17* day of *October* *Eighteen* Hundred
 Recorded *October 24, 1867* 191
John E. Campbell and *John R. Sengs, O. M. G.*

ORDINARY

MARRIAGE LICENSE

STATE OF GEORGIA

COUNTY OF COBB

To any Judge, Justice of the Peace, or Minister of the Gospel

YOU ARE HEREBY AUTHORIZED TO JOIN

James P. Hood and *Mary Lee Swan*
in the Holy State of Matrimony, according to the Constitution and Laws of this
State and for so doing this shall be your License.

And you are hereby required to return this License to me with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this *17* day of *October* *1867* *John E. Campbell* (L.S.)
ORDINARY

State of Georgia

CERTIFICATE

County of Cobb

I CERTIFY that *James P. Hood* and *Mary Lee Swan*
were joined in Matrimony by *me* this *17* day of *October* *Eighteen* Hundred

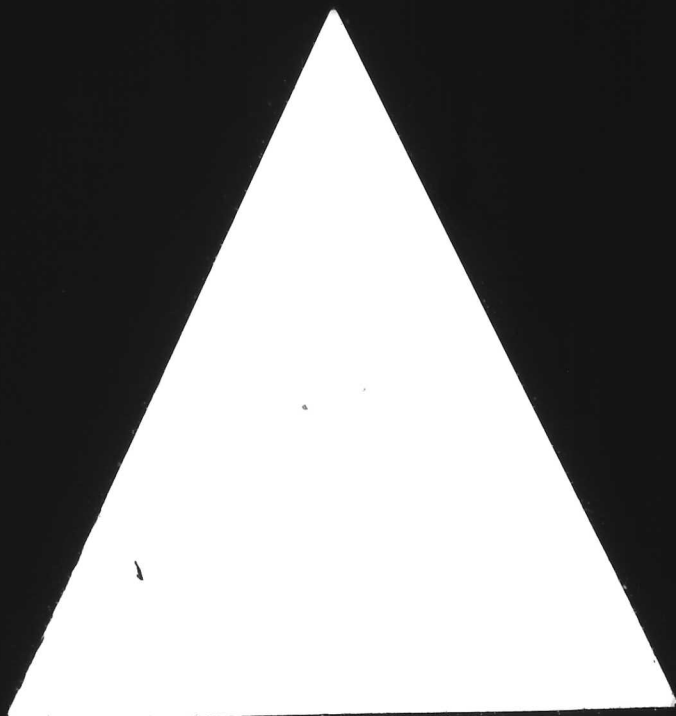
Recorded *October 24, 1867* 191

John E. Campbell

ORDINARY

1867

John R. Sargo, O. M. G.



ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY

I, T. H. Jeffers Ordinary of said County, do certify that I know Mrs. Sophronia Hood the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 3 day of Oct 1919

That I also know Mr. R. F. Hatley witness as to marriage, and I also know

that both of the foregoing were duly sworn by me Chas before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit

Sworn under my hand and official seal of office this 3 day of Oct 1919

(SEAL)

T. H. Jeffers Ordinary.
Fulton County.

- NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth, so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1861, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the 1861 Application Blank and state and prove full term of husband's service, because he made no proof of service and was not required to do so.

1750 Perry St (Mrs)
Hood & Saphronia
Fulton County
Widow's Application
To Be Put on Roll in Her Own Right When
Husband Was on the Roll or
Put on Under Act of July 11, 1910.
As Amended by Act of 1919.

County Fulton
Name Mrs. Sophronia Hood
Widow of W. W. Hood
Company B.
Regiment 18 La Reg
Approved

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

10-23-1919

STATE OF GEORGIA

COUNTY OF FULTON

This is to certify that I have known Saphronia Hood since girlhood days, who was then before her marriage, Saphronia Sheridan, and I do hereby declare that she is the widowed wife of William Wiley Hood now deceased.

Mrs. Mary C. Bell

Subscribed and sworn to

before me this 29th day

of April 1919.

Charles S. Hood
Notary Public

State of Georgia Hall County.

ORDINARY'S OFFICE--86

W. W. Hulcher Ordinary and Ex-Officio Clerk of the Court of Ordinary of said county, do hereby certify that I have compared the foregoing copy of Marriages of W. W. Hood and Miss Sophronia Sheridan

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record.

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Court of Ordinary, this 29 day of August 1919

W. W. Hulcher
Ordinary and Ex-Officio C. C. O.

STATE OF GEORGIA, HALL 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, W. W. Hood and Miss Sophronia Shuman according to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing, this shall be your sufficient License.

Given under my hand and Seal, this 12 day of December 1872.

A. M. Beckman
Ordinary.

I Hereby Certify, That W. W. Hood and Miss Sophronia Shuman were joined together in the Holy Bands of Matrimony, on the 12 day of December 1872, by me.

W. G. Henderson J. P.

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. Sophronia Hood of said County, who, after being duly sworn, says that she is the widow of W. W. Hood to whom, in the County of Fulton State of Ga she was married on the 17 day of Dec 1871, and that she remained his wife, and resided with him to the date of his death in April 1885, and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in said State of Georgia, and he was on the Ordinary Pension Roll of the State and paid a pension of \$600 in Fulton County for 1925 per annum, on account of being a soldier in Company B 1886 Regiment (Volunteers or State Militia).

That she is now a bona fide resident citizen of said County of Fulton and she has so continuously resided since Aug 1886 day of.

Sworn to and subscribed before me, this the

5 day of Sept 1919

William R. Moulton Ordinary
of Fulton County.

(SEAL)

Mrs. Sophronia Hood
ma

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

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. R. F. Haxley known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Sophronia Hood, who made the foregoing affidavit, is the lawful widow of W. W. Hood who died in Fulton County in said State of Ga on 30 day of April 1905 and that she has not since remarried. That she became the wife of W. W. Hood to the date of his death, and that she and he had resided together as man and wife continuously since 18 day of 18 and that she has was the same man who was on the pension roll of said State Ga from Fulton County when he died.

Sworn to and subscribed before me, this the

7 day of Sept 1919

William R. Moulton Ordinary
of Fulton County.

(SEAL)

Mrs. R. F. Haxley

and that she has not since remarried. That she became the wife of
the day of and that she and he had resided together as man and
wife continuously since day of 18..... and that the was
the same man who was on the pension roll of said State Ga from
County when he died.

Sworn to and subscribed before me, this the

✓ day of Sept 19 19

William R. Mearns Ordinary
of Fulton County.

(SEAL)

Mrs. R. F. Bentley

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

herely authorize

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

at

by

Witness my hand and seal this

day of

1897.

Executed in presence of

88

OK

147 Pigment Dr.

Hood, H. W.

No. 2282

Fulton

INDIGENT PENSION
1897.

Name

H. W. Hood

County

Fulton

Approved

7/7/8

1897.

WARRANT HANDED TO

appet

W. W. HARRIS, STATE PRINTER, ATLANTA.

2/15/1897

County.

I, _____, hereby authorize _____

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

at _____ by _____

Witness my hand and seal this _____ day of _____ 1897

Executed in presence of

Fulton

County.

27 11 Wood

1111 Aved 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) *1871r*
Wood, Atlanta Fulton County Ga
2. Where did you reside on January 1st, 1864, and how long have you been a resident of this State?
Have lived in this State all my life and in Atlanta Jan 1st 1864
3. When and where were you born?
in Franklin County Ga Jan 22 1838
4. When and where and in what company and regiment did you enlist or serve
3rd Regt. Inf. 1846 44th Regiment Company C at 18
Account of Jefferson Ga. in March 1862
5. How long did you remain in such company and regiment?
I remained in said Regiment in Company C till Apr 1865 Three days before the surrender of Lee at Appomattox Court House
6. For how long a period did you discharge regular military duty?
about three years
7. When, where and under what circumstances were you discharged from service?
I was released from prison at New Brit News in Va. in July 1865
8. What is your present occupation?
I have none
9. How much can you earn (gross) per annum by your own exertions or labor?
Nothing
10. What has been your occupation since 1865?
a peasant
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? *two not crossed*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?
I have Chronic Dyspepsia - My sight is not entirely lost - I can see a good deal. I obtained my eyes old
doctor of Georgia 2 yrs. ago and so far want to give
13. What property, effects or income do you possess and its gross value?
Nothing
14. What property, effects or income did you possess in 1864, 1865 and 1896 and what disposition, if any did you make of same?
I had no property in 1844 or 1865

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

In Fulton County and month 210 tax returns

16. How were you supported during the years 1885 and 1886? *worked some - 1884*
since then I have been supported by my son's wages and the C. & O. Co.
17. How much did your support cost for each of those years, and what portion did you contribute thereto, by your labor or income? *about \$1000 each - I cost, did contribute nothing*
18. What was your support during 1890 and 1891? What pay did you receive in each year? *I worked for a limited part of 1891 at some wages and did receive a few dollars in 1890*
19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead? *I have a wife and 3 children - 2 girls and 1 boy who are about 7-14 years old - My wife and a son work but no James will be and stay there in themselves for it, but she gets no income from it.*
20. Are you receiving any pension, if so what amount and for what disability? *none*

Sworn to and subscribed before me this the

13 day of July 1897.

Applicant.

—Ordinary.

of Funkhouser County

INDIGENT PENSION

1897.

Name W. W. Root

County Fulton

Approved _____ 1897.

WARRANT HANDED TO

attached

2/15-1097

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Jefferson County.

of said State and County, having been presented as a witness in support of the application of M. W. Hood for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? H. W. Bell, Jeffersonville, Ga.
2. Are you acquainted with M. W. Hood, the applicant, is of how long have you known him? at our home we have known each other for 20 years.
3. Where does he reside, and how long has he been a resident of this State? In Atlanta, Ga. he has resided in the State all his life time.
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Yes he was a member of the same Company in which I served.
5. When, where and in what company and regiment did he enlist? In the Spring of 1862 at Jefferson, Ga. he enlisted in Co. C, 15th Ga. Regt.
6. Were you a member of the same company and regiment? Yes, I was fresh through the war.
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? He served for 3 years and 6 months, and was discharged in the month of June, 1865, at Jefferson, Ga. He was discharged as a private, and was given a certificate of honor.

8. What property, effects or income has the applicant? (Give your means of knowledge) He has none, I have known Mr. Hood intimately for about 20 years, and have seen him with his property.
9. What property, effects or income did the applicant possess in 1895 and 1899, and what disposition, if any did he make of same? He had none.

10. What is the applicant's occupation and physical condition? That of a private, he seems to be very feeble, and is almost totally blind.

11. Is the applicant unable to support himself by labor of any sort, if so, why? He is not, he is physically unable to work, and could not see to work if he was otherwise able.

12. How was he supported during the years 1895 and 1899? By his wife and daughter, and by charity, I myself have helped him several times.
13. What portion of his support for these two years was derived from his own labor or income? A very little in the first year 1895.

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is almost blind, can hardly see to get about, and can not see to work at his trade at all, and is very feeble.

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

Sworn to and subscribed before me, this 13th day of July, 1897. J. J. Burtchess Witness.

Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me, J. Frank Hines and H. S. Belger, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully.

H. W. Hood, applicant for pension under the Act of 1894, and after

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

That he has an old inflammation of his left eye, together with a cataract, also a cataract in his right eye, which blocks him in a way that he is unable to see, and is almost blind. He has a cataract in his right eye, which is a physical condition that it is physically impossible for him to get from any kind of labor.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this 13th day of July, 1897. J. Frank Hines Ordinary. H. S. Belger Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, M. W. Hood, Ordinary in and for said County, hereby certify that the applicant H. W. Hood resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: J. Frank Hines and H. S. Belger are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1895, None dollars of property, and in 1899, None dollars of property.

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

Witness my hand and seal of office, this 15th day of July, 1897. M. W. Hood Ordinary of Fulton County.

NOTE.

Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall answer me 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 transcribed.

POWER OF ATTORNEY.

State of Georgia,

County.

I,

hereby authorize

of

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

by

at

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

day of 1898.

Executed in presence of

[L. S.]

NOT OF 14 DEC. 1894.
(For These Already Enrolled.)

NO. 367

INDIGENT

SOLDIER'S PENSION,
1898.

Name *W. M. Hood*

County *Fulton*

WARRANT ISSUED

1/12 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

W. M. Hood
No date

ISSUED BY HONORABLE STATE COMPTROLLER, ATLANTA

CODE REG. 1284.

(For These Already Enrolled.)

NO. 477

INDIGENT

SOLDIER'S PENSION,
1899.

Name *W. M. Hood*

County *FULTON*

WARRANT ISSUED

1/18 1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

W. M. Hood
No date

ISSUED BY HONORABLE STATE COMPTROLLER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

hereby authorize

of

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

at

by

Witness my hand and seal this day of 1899.

Executed in presence of

(L. S.)

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears W. H. Hood of Fulton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of Jan 1885; that he is 53 years old and by occupation a ; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years in Company E, of 18 th Regiment of GA; that his physical condition is as follows:

Bad eye sight - general debility

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 1898. I have heretofore as a resident of Fulton county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, the 12th day of Jan 1898, } W. H. Hood Ordinary.

State of Georgia,
Fulton County.

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

Given under my official signature and seal, this 12th day of Jan 1898.

W. H. Hulsey Ordinary Fulton County.

NOTE.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County.

Personally appears W. H. Hood of FULTON County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of Jan 18 ; that he is 54 years old and by occupation a ; that he enlisted in the military service of the Confederate States (or of the State of GA) during the war between the States, and served for the term of 3 years in Company E, of 18 th Regiment of GA; that his physical condition is as follows:

Defective eye sight - general debility

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 1898. I have heretofore as a resident of FULTON county been allowed a pension for the year 1898.

Sworn to and subscribed before me, this, the 18 day of Jan 1898, } W. H. Hood Ordinary.

State of Georgia,
FULTON County.

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

Given under my official signature and seal, this 18 day of Jan 1898.

W. H. Hulsey Ordinary FULTON County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be filed before January 1st, 1899.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of

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

at

by _____

Witness my hand and seal, this _____ day of _____ 1900.

[L. S.]

Executed in presence of

CODE SEC. 1354.

(For These Already Enrolled.)

NO. 343

INDIGENT

SOLDIER'S PENSION,

1900.

Name *W. H. Hord*

County *FULTON*

WARRANT ISSUED

Jan 16 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H.

Chas. W. Hurdock, State Printer, Atlanta.

No data

W. H. Hord

CODE SEC. 1354.

(For These Already Enrolled.)

No. 442

INDIGENT

SOLDIER'S PENSION.

1901.

Name *W. W. Wood*

County *BULLOCK*

WARRANT ISSUED

Jan 14 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. W.

Chas. W. Hurdock, State Printer, Atlanta.

W. W. Wood

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of

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

at

by _____

Witness my hand and seal, this _____ day of _____ 1901.

[L. S.]

Executed in presence of

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON

County.

Personally appears W. H. Hood of FULTON

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of January 1880; that he is 55 years old and by occupation a carpenter that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 years in Company E, of 15th Regiment of Ga that his physical condition is as follows:

Defective eye sight

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 1900. I have heretofore as a resident of Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, 16 day of January 1900.

W. H. Hood

John R. Wilkinson Ordinary.

State of Georgia,

FULTON

County.

I, W. H. HULSEY,

Ordinary of said County,

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

day of January 1900.

Ordinary

FULTON

County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton

County.

Personally appears W. H. Hood of Fulton

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of January 1880; that he is 56 years old and by occupation a carpenter that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 yrs. in Company E, of 15th Regiment of Ga that his physical condition is as follows:

Defective eye sight

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 1901. I have heretofore as a resident of Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this 16 day of January 1901.

W. H. Hood

John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton

County.

I, John R. Wilkinson,

Ordinary of said County,

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

Given under my official signature and seal, this 12

day of January 1901.

Ordinary

Fulton

County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1903.

Executed in presence of _____ [L. S.]

INDIGENT
SOLDIER'S PENSION
1903.

Name W. W. Wood
County Fulton
Co. E Regiment 18th
Yea WARRANT ISSUED

1820 1903
JOHN W. LINDSEY,
Commissioner of Pensions
WARRANT HANDED TO _____

Geo. W. Harrison, State Printer, Atlanta

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1904.

Executed in the presence of _____ [L. S.]

INDIGENT
SOLDIER'S PENSION
1904.

Name W. W. Wood
County Fulton
Co. E Regiment 18th
Yea WARRANT ISSUED

1820 1904
JOHN W. LINDSEY,
Commissioner of Pensions
WARRANT HANDED TO _____

Geo. W. Harrison, State Printer, Atlanta

AC DATA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton.

County.

Personally appears W W Hood of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of June 1888; that he is 58 years old and by occupation a carpenter, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company E, of 11th Regiment of Inf; that his physical condition is as follows: B & P

that his property consists of the following items: 2

of the value of 2 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 Fulton County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this 11th day of JAN 20 1903.

Ordinary.

STATE OF GEORGIA,

Fulton.

County.

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

Given under my official signature and seal, this 11th day of JAN 20 1903.

Ordinary

County.

Note.—The blank spaces must be filled.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton.

County.

Personally appears W W Hood of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of June 1888; that he is 58 years old and by occupation a carpenter, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company E, of 11th Regiment of Inf; that his physical condition is as follows: B & P

that his property consists of the following items: 2

of the value of 2 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 Fulton County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this 11th day of JAN 20 1904.

Ordinary.

STATE OF GEORGIA,

Fulton.

County.

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

Given under my official signature and seal, this 11th day of JAN 20 1904.

Ordinary

Fulton.

County.

Note.—The blank spaces must be filled.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1902.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1905.

[L. S.]

Executed in the presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 752

INDIGENT

SOLDIER'S PENSION
1902.

Name W. W. Hood

County Fulton

Co. E Regiment 18th

WARRANT ISSUED

1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

(FOR THOSE ALREADY ENROLLED.)

No. 881

INDIGENT

SOLDIER'S PENSION
1905.

Name W. H. Hood

County Fulton

Co. B Regiment 18th

WARRANT ISSUED

1905

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

c 881

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears

W. W. Hood

of Fulton

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of June 1881; that he is 57 years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company E, of 18th Regiment of 1st Inf; that his physical condition is as follows:

Deception eye sight

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 Fulton county been allowed a pension for the year 1901

Sworn to and subscribed before me, this 1st day of JAN 1902

W. W. Hood

Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson,

Ordinary of said County,

do certify that I am well acquainted with W. W. Hood the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1st 1902

Ordinary

John R. Wilkinson

Fulton County.

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



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears

H. H. Hood

of Fulton

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 1881; that he is 70 years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company E, of 15th Regiment of 1st Inf; that his physical condition is as follows: *Infirmary poverty and blindness*

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 day of JAN 1905

H. H. Hood

Ordinary.

STATE OF GEORGIA,

Fulton County.

I,

Ordinary of said County,

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

Given under my official signature and seal, this

JAN 2 1905

day of 1905.

Ordinary

Fulton County.

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



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

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

Ordinary W. H. Wood Fulton County.

NOTE.—The blank spaces must be filled.

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



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

Given under my official signature and seal, this JAN 2 1902
day of _____, 1902.

Ordinary W. H. Wood _____ County.

NOTE.—The blank spaces must be filled.

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



No. 100, 1911 (M.D.)
01 of 1911 (M.D.)
Fuller County
Indigent

Widow's Pension

UNDER ACT 1910.

✓
County *Fuller*

Name *Katie J. Hanks*

Widow of *H. Hanks*

C. A. Hanks, Deputy

J. W. LINDSEY,
Commissioner of Pensions

Chas. F. Byrd, State Printer.

9/12/10

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

STATE OF GEORGIA,

Fulton County.

Personally before me comes R. J. Woods of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act of July 11 1910, and submit testimony to make out the same, true answers makes to the following questions to wit:

1. What is your name, and where do you reside? 14 J. Woods in Atlanta Ga
2. How long and since when have you been a continuing resident in the State of Georgia? all my life
3. When, where and to whom were you married? Woods, April 1906
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) April 3-1861
Co. F. 8th Regt. of Cavalry
5. When and where did the Commands of your husband surrender or discharge from the army? At Appomattox April 9-1865
6. Was your husband personally present at the time of the surrender or discharge of this Command? Yes
7. If he was not present state clearly where he was? Present
8. Where was his Command when he left? ---
- a. For what cause did he leave his command? ---
- b. By whose authority did he leave his Command? ---
- c. For how long was he granted leave of absence? ---
- e. What was his physical condition when he left his Command? ---
- f. What effort did he make to return to his command? ---
- g. In what way was he prevented from going back to Command? ---
- h. Was he captured by the enemy at any time? ---
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? ---
- j. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? He died in Atlanta 29 Aug 1865
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) Real property of any kind
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) No property of any kind
11. What property of any description of any value have you now? None
12. What are your annual earnings or income and their value? None
13. Have you heretofore been paid a pension by the State? Yes

Sworn to and subscribed before me this the 10th day of Sept 1912 at Atlanta Georgia.
James R. Smith Notary Public
Woods County.

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA,

Fulton County.

Personally before me comes John R. Notary who after being duly sworn true answers to make, to the following questions, answers as follows:

Widow's Pension

UNDER ACT 1910.

County

Fulton

Name

R. J. Woods

Widow of R. J. Woods
Co. F. 8th Regt. Cavalry

J. W. LINDSEY,

Commissioner of Pensions.

Can. P. 1911, State Form

1. What is your name and where do you reside? John T. Hatfield, 2nd St. N. W.
 2. How long and since when have you known Marion M. Hooker applicant?
 3. How long and since when has she continuously resided in this State? (Give date.) Since she was 18
 4. When and to whom was she married? How do you know? at 1866
 5. How long and since when did you know Marion M. Hooker her husband?
 6. When, where and in what Company and Regiment did Marion M. Hooker enlist?
at 1866 in Co. F 3rd Regt. N.Y. 34-1861
 7. Were you a member of the same Company? Yes
 8. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from enlistment until January 1868
 9. When, and where did his Command surrender, and was discharged? at Appomattox April 9th 1865
 10. Were you personally present when it was surrendered? Yes If not where were you Present and how came you there?
 11. Was the husband of applicant personally present at surrender? Yes If not where was he? Present when, where and for what cause did he leave Command? (Give date.) _____ By whose authority did he leave his Command? _____ and how long was he granted leave? _____ How do you know all this? Present
 Do you state if of your own personal knowledge? (State all you know fully, and how you know it.)
 12. For what cause, if you know of your own knowledge was he prevented from returning to his Command?
 13. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? _____ Sworn to and subscribed before me this the 23rd day of April 1910 J. T. Hatfield Ordinary.
 of Milkinson County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes W. H. Corley who on oath says that they are freeholders of said County and that they know Marion M. Hooker of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows Personal property Present or 6. Charleston

Personal property Present or 6. Charleston
 Notes and accounts due \$
 Total \$

Schedule (B).

We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows: a

Personal property \$
 Money, Notes and accounts \$

Schedule (C).

We also know what property she has now in her possession, use and control to wit:

Acres of land worth \$
 Horses and Mules \$
 Cows and Hogs \$
 Other property \$
 Income and earnings \$

Total Value of all property and effects \$

Sworn and subscribed before me this the 23rd day of April 1910 W. H. Corley Ordinary.

of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

Ordinary of said County do certify that, I know Marion M. Hooker the applicant for pension. She is the person she represents herself to be and she is a bonafide continuing resident citizen of said County and was in the 4th Nov., 1908.

That I also know W. H. Corley The witness who swears

to the service of husband, and W. H. Corley who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Fulton Returned for Tax is for 1908 \$ None for 1910 \$ None

Sworn under my hand and official seal of office this 20 day of Sept 1910

SEAL

(SEAL)

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

Georgia Milkinson Co.
I J. E. Burt, Ordinary of said County, do hereby certify that I know J. T. Hatfield the attached witness and he is of trustworthy character
In witness my hand and seal this 23rd day of April 1910
J. E. Burt, Ordinary

MAR 9 1935

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA, _____ County.

Personally before me, the Ordinary of said County, comes _____ of said County, who, after being sworn, on oath says that he knew _____ of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in _____ County, in this State, on the _____ day of _____, 19____, 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 \$_____, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,

_____, Ordinary

_____, County

(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, _____ County.

I, _____, Ordinary of said County, do certify that I personally know _____, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew _____ while in life and that this was the same person whose name appears on the Pension Roll of _____ County, and was paid a Pension of _____ Dollars in said County for 19____, 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 _____ day of _____, 19____.

(Seal of Ordinary)

INSTRUCTIONS

- 1st. Require those claiming expenses of last illness and funerals, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of _____, who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.



CERTIFICATE OF DEATH GEORGIA STATE BOARD OF HEALTH Bureau of Vital Statistics

Registered No. 2979

1. PLACE OF DEATH

County _____ Millis District (Number and Name) _____ State of Georgia
City or Town _____ Length of residence in this city or town: Yrs. _____ Mos. _____ NON-RESIDENT (Yes or No)
Street and Number (No.) _____ 1319 LaFrance NE. Ward _____
(If death occurred in a hospital, give its name instead of street and number.)

2. FULL NAME

Mrs. Katie Hooks
Residence (City or Town) _____ 1319 LaFrance NE. (Street and Number) _____ (State) _____

PERSONAL AND STATISTICAL PARTICULARS

3. SEX _____ 4. COLOR or RACE _____ 5. Single, Married, Widowed, Divorced, (write full word)
female white widowed

6. DATE OF BIRTH (month, day, year) Jan. 15th, 1847

7. AGE _____ Years _____ Months _____ Days _____ If less than one day _____ Hours _____ Minutes _____

(a) Trade, profession or particular kind of work done as witness, lawyer, bookkeeper, etc. _____ Housework

(b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc. _____

(c) Date deceased last worked at this occupation (month and year) _____ (d) Total years spent in this occupation _____

8. BIRTHPLACE _____ Ga., (P. O. Address) _____

9. NAME _____ E. C. J. B. Thomas, (P. O. Address) _____

10. NAME _____ Don't know (P. O. Address) _____

11. BIRTHPLACE _____ Mary Ann Gilbert, (P. O. Address) _____

12. MAIDEN NAME _____ don't know (P. O. Address) _____

13. BIRTHPLACE _____ don't know (P. O. Address) _____

14. INFORMANT _____ W. W. Corley, (Signed) _____

15. ADDRESS _____ 1319 LaFrance NE. (Address) _____

16. BURIAL PLACE _____ Oakland Cem \$10.00 (Cemetery) _____

17. (Postoffice) _____ Atlanta, Ga. (Date) 8/1/33

18. UNDERTAKER _____ Autry & Lowndes Co. (Signed) _____

19. BY _____ S. W. Hatcher (Address) _____

MEDICAL CERTIFICATE OF DEATH

10. DATE OF DEATH _____ July 30th, 1933 (Month, Day, Year) _____ at _____ (Hour) _____ M

11. I HEREBY CERTIFY that I attended the deceased from _____ 8/7/1930 _____ to _____ 7/30/33 _____

I last saw him _____ alive on _____ 7/30/33 _____ death is said to have occurred on the date and hour stated above.

The principal cause of death and related causes of importance in the order of onset and duration of each: _____ Heart disease

Other contributory causes of importance: _____ Bronchitis.

What test confirmed diagnosis? _____ (Specify whether autopsy, operation, laboratory, or clinical)

If death was due to external cause (violence) fill in also the following: _____ Was injury an accident, suicide, or homicide?

Where did injury occur? _____ illness (Specify city or town, if outside of limits, the county, and also the state)

Did injury occur in a home, public place or industry? _____

Weather or injury _____ Nature of injury _____

(Signed) _____ Herbert B. Kennedy, M.D. (Address) _____ 1013 - 1st Nat. Bk. Bldg.

12. FILED _____ 7/31/33 (Signed) _____ (Local Registrar)

OFFICE OF THE REGISTRAR OF VITAL STATISTICS For the City of Atlanta

GEORGIA,
FULTON COUNTY.

Atlanta, Ga., 8/21/33

I hereby certify that the foregoing is a true and correct copy of the record of death Number 2979 of the series of 1933 for Mrs. Katie Hooks, as appears on file in the office of the Registrar of Vital Statistics of the City of Atlanta.

SEAL

(Signed)

LOCAL REGISTRAR

County, in this State, on the 1933 day of August, 1933,
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 \$2.80, per sworn statements fully and completely
ITEMIZED hereto attached.

Sworn to and subscribed before me,
Ordinary
County
(Seal of Ordinary)

H. H. Harrison

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.
I, Wm. H. J. Jones, Ordinary of said County, do certify
that I personally know H. H. Harrison, 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. Katie J. Hooks, while in life and that this was
the same person whose name appears on the Pension Roll of Fulton County, and
was paid a Pension of Thirty (\$30.00) Dollars
in said County for 1933, 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 16 day of Aug, 1933
(Seal of Ordinary) H. H. Harrison Ordinary
Fulton County

INSTRUCTIONS

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of _____, who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

Street and Number (No.) 1319 LaFrance NE.		Ward (If death occurred in a hospital, give the name instead of street and number.)	
FULL NAME Mrs. Katie Hooks		Date 1319 LaFrance NE.	
Residence (City or Town) Atlanta		(State) Georgia	
PERSONAL AND STATISTICAL PARTICULARS			
1. SEX female	2. COLOR or RACE white	3. MARRIAGE Married, Widowed	4. DEATH Widowed
5. DATE OF BIRTH (month, day, year) Jan. 15th, 1847		6. DATE OF DEATH (month, day, year) July 30th, 1933	
7. AGE 86		8. OCCUPATION Housework	
9. BIRTHPLACE Ga.		10. BIRTHPLACE Ga.	
11. BIRTHPLACE Ga.		12. BIRTHPLACE Ga.	
13. BIRTHPLACE Ga.		14. BIRTHPLACE Ga.	
15. BIRTHPLACE Ga.		16. BIRTHPLACE Ga.	
17. BIRTHPLACE Ga.		18. BIRTHPLACE Ga.	
19. BIRTHPLACE Ga.		20. BIRTHPLACE Ga.	
21. BIRTHPLACE Ga.		22. BIRTHPLACE Ga.	
23. BIRTHPLACE Ga.		24. BIRTHPLACE Ga.	
25. BIRTHPLACE Ga.		26. BIRTHPLACE Ga.	
27. BIRTHPLACE Ga.		28. BIRTHPLACE Ga.	
29. BIRTHPLACE Ga.		30. BIRTHPLACE Ga.	
31. BIRTHPLACE Ga.		32. BIRTHPLACE Ga.	
33. BIRTHPLACE Ga.		34. BIRTHPLACE Ga.	
35. BIRTHPLACE Ga.		36. BIRTHPLACE Ga.	
37. BIRTHPLACE Ga.		38. BIRTHPLACE Ga.	
39. BIRTHPLACE Ga.		40. BIRTHPLACE Ga.	
41. BIRTHPLACE Ga.		42. BIRTHPLACE Ga.	
43. BIRTHPLACE Ga.		44. BIRTHPLACE Ga.	
45. BIRTHPLACE Ga.		46. BIRTHPLACE Ga.	
47. BIRTHPLACE Ga.		48. BIRTHPLACE Ga.	
49. BIRTHPLACE Ga.		50. BIRTHPLACE Ga.	
51. BIRTHPLACE Ga.		52. BIRTHPLACE Ga.	
53. BIRTHPLACE Ga.		54. BIRTHPLACE Ga.	
55. BIRTHPLACE Ga.		56. BIRTHPLACE Ga.	
57. BIRTHPLACE Ga.		58. BIRTHPLACE Ga.	
59. BIRTHPLACE Ga.		60. BIRTHPLACE Ga.	
61. BIRTHPLACE Ga.		62. BIRTHPLACE Ga.	
63. BIRTHPLACE Ga.		64. BIRTHPLACE Ga.	
65. BIRTHPLACE Ga.		66. BIRTHPLACE Ga.	
67. BIRTHPLACE Ga.		68. BIRTHPLACE Ga.	
69. BIRTHPLACE Ga.		70. BIRTHPLACE Ga.	
71. BIRTHPLACE Ga.		72. BIRTHPLACE Ga.	
73. BIRTHPLACE Ga.		74. BIRTHPLACE Ga.	
75. BIRTHPLACE Ga.		76. BIRTHPLACE Ga.	
77. BIRTHPLACE Ga.		78. BIRTHPLACE Ga.	
79. BIRTHPLACE Ga.		80. BIRTHPLACE Ga.	
81. BIRTHPLACE Ga.		82. BIRTHPLACE Ga.	
83. BIRTHPLACE Ga.		84. BIRTHPLACE Ga.	
85. BIRTHPLACE Ga.		86. BIRTHPLACE Ga.	
87. BIRTHPLACE Ga.		88. BIRTHPLACE Ga.	
89. BIRTHPLACE Ga.		90. BIRTHPLACE Ga.	
91. BIRTHPLACE Ga.		92. BIRTHPLACE Ga.	
93. BIRTHPLACE Ga.		94. BIRTHPLACE Ga.	
95. BIRTHPLACE Ga.		96. BIRTHPLACE Ga.	
97. BIRTHPLACE Ga.		98. BIRTHPLACE Ga.	
99. BIRTHPLACE Ga.		100. BIRTHPLACE Ga.	

OFFICE OF THE REGISTRAR OF VITAL STATISTICS For the City of Atlanta

GEORGIA,
FULTON COUNTY.

Atlanta, Ga., 8/21/33

I hereby certify that the foregoing is a true and correct copy of the record of death Number 2979
of the series of 1933 for Mrs. Katie Hooks,
as appears on file in the office of the Registrar of Vital Statistics of the City of Atlanta.

(Signed)

SEAL

L. B. Harrison
LOCAL REGISTRAR

- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
6th. Ordinary should see that the back of this blank, when folded, is filled out.

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

PHONES: WALNUT 7848
WALNUT 7847

AWTRY & LOWNDES COMPANY
FUNERAL DIRECTORS
AMBULANCE SERVICE

21 Cain Street, N. W.

ATLANTA, GA.

8/3/33/

IN ACCOUNT WITH

Mrs. W.W. Corley,

No. 1319 LaFrance Street N.E.

Atlanta, Ga.

For the Funeral of Mrs. Katie J. Hooks	100.00
7/30/33/ Casket	25.00
Embalming	25.00
Hearse	10.00
Grave	10.00
Constitution	3.00
Journal	2.25
Georgian	2.55
	<u>\$152.80</u>

*This is for last no prob
did not receive*

H.B. Bankston

*and I am not
for me this is for received and
Credit to Mrs. Corley*

Jan. 5 / 0 1934
Received from Thomas H. Jeffries, Ordinary
Ninety & no/100 203 Dollars
on funeral expense of Mrs. Katie J. Hooks
\$90.00 by Mrs. J. Hooks

Received of Thomas H. Jeffries, Ordinary, 62 80
for the account of Katie J. Hooks. This amount has
not previously been paid and is now owing to me.

March 4th 1933.

Awtry & Lownds
Paul V. Ray

A Certificate

STATE OF GEORGIA, County of Fulton

IN RE: Expenses last illness and funeral Katie J. Hooks

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

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

This the 11 day of Aug, 1933.

(SEAL)

Thomas H. Jeffries, Ordinary

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

...ascertained that this pensioner:

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

This the 14 day of Aug., 1938.

(SEAL)

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

Oct
MARRIAGE LICENSE

OF

Augustus B. Hooks

AND

Katie J. Thomas

Issued Oct-29-1936 19

and Recorded on Page 59 Book

A. of Marriage Licenses.

Ordinary.

Georgia Williamson County.
I, J. B. Butler, Ordinary, of said
County, do hereby certify that the within is a
true and correct copy of marriage
license of Augustus B. Hooks
and Katie J. Thomas, as shown
upon the records of Ordinaries
of said
County.
Witness my hand and official
signature this 22 day of Aug,
1936
J. B. Butler

copy
MARRIAGE LICENSE

OF

Augustus B. Hooks

AND

Katie J. Thomas

Issued Oct-29-1866 19

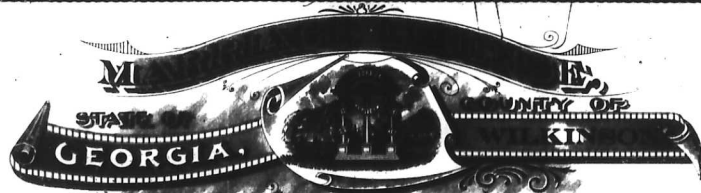
and Recorded on Page 59

Book

A. of Marriage Licenses.

Ordinary.

George Willinson County.
I J. E. Butler Ordaining I seal
County and Office by them as
true and correct copy of marriage
license of Augustus B. Hooks
and Katie J. Thomas as above
upon the record of Ordinance
I return my hand and official
signature Aug-22-1866
J. E. Butler Ordaining



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

You are hereby authorized to join
Augustus C. Hooks and *Katie J. Thomas*
 in the Holy State of Matrimony, according to the Constitution and
 Laws of this State and for so doing this shall be your License.
 And you are hereby required to return this License to me, with your
 Certificate hereon of the fact and date of the Marriage.

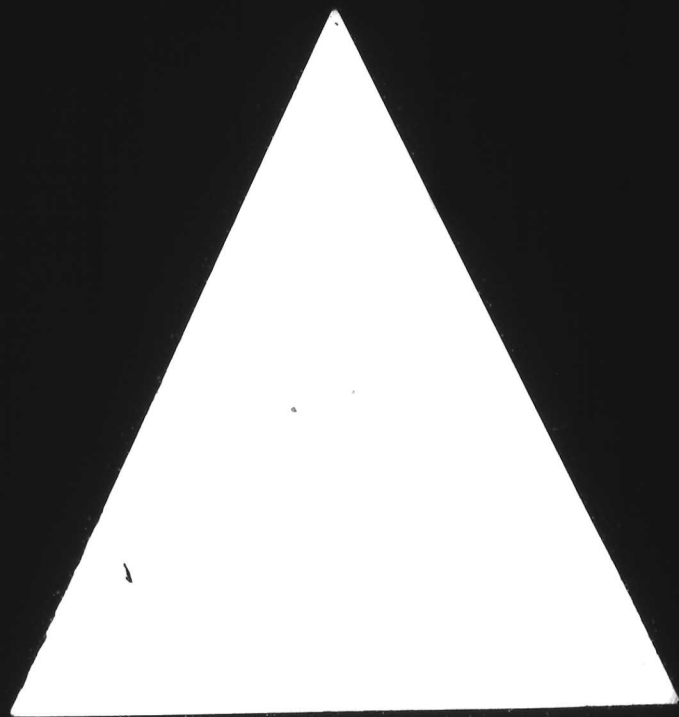
Oct 29 1866 day of _____ (L.S.)
 _____ Ordinary

STATE OF GEORGIA ~~CERTIFICATE~~ COUNTY OF WILKINSON

I Certify that *Augustus C. Hooks* and *Katie J. Thomas*
 were joined in Matrimony by me this *30* day of *Oct* 1866 *Twelve Hundred*

Recorded _____ 190 _____
 _____ Ordinary

E. J. Carter M. G.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____

herby authorizes

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

at _____

by _____

Witness my hand and seal this _____ day of _____

1897.

Executed in presence of _____

*She is ready to
Hobbs, M. J.
Aug 22 89
Fulton Co*

INDIGENT PENSION

1897.

Name _____

M. J. Hobbs

County _____

Fulton

Approved _____

7/8

1897

WARRANT HANDED TO

Appet

SEN. W. HARRISON, CLERK PROBATE, ATLANTA

8 Aug 1897

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

hereby authorize

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

at

by

Witness my hand and seal this day of 1897.

Executed in presence of

INDIGENT PENSION
1897.

Name *Mc R. Hooks*

County *Fulton*

Approved *7/8*

WARRANT MADE TO

app

8 Aug 1897

Questions for Applicant.

STATE OF GEORGIA,

Fulton County.

Mc R. Hooks of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1884, 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)
Mc R. Hooks - Atlanta, Fulton Co. Ga.
2. Where did you reside on January 1st, 1884, and how long have you been a resident of this State?
Atlanta, Ga. - U.S. Army Life
3. When and where were you born?
In DeKalb Co. Ga. in 1840.
4. When and where and in what company and regiment did you enlist or serve
In Co. K. 22nd Ga. Regt. - In Henry S. Co. Ga. August 1861
5. How long did you remain in such company and regiment?
Was surrendered at Appomattox Co. Va.
6. For how long a period did you discharge regular military duty?
Three years 7 mos.
7. When, where and under what circumstances were you discharged from service?
Discharged by Appomattox April 9th 1865 in Appomattox Co. Va.
8. What is your present occupation?
No employment
9. How much can you earn (gross) per annum by your own exertions or labor?
Nothing
10. What has been your occupation since 1865?
Have engaged in small business not
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? *2nd infirmity and poverty.*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?
Dislocation of left wrist and stiffening of same being violent. Has and extremely useless. At the time, I was in absence of the arm being permanent. Curious looking.
13. What property, effects or income do you possess and its gross value?
Nothing.
14. What property, effects or income did you possess in 1884, 1885 and 1886 and what disposition, if any, did you make of same?
A mule in 84 and which died in 85 and consequently nothing in 86.
15. In what County did you reside during those years and what property did you then return for taxation?
In Fulton Co. Ga. returning in 84 and 85 the same.
16. How were you supported during the years 1886 and 1890? By proceeds from
The work of children
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
About \$125.00 small amount of mule before I died.
18. What was your employment during 1890 and 1896? What pay did you receive in each year?
None.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
At present have 2 sons. Have no home. Only two sons age 14 & 16 have means of support by work at small wages.
20. Are you receiving any pension, if so what amount and for what disability?
None whatever.

Sworn to and subscribed before me this the

8 day of Aug 1897.

Mc R. Hooks

Ordinary.

of *Fulton* County.

Applicant.

Every Question MUST be Answered.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

, hereby authorize

of

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

at

by

Witness my hand and seal this

day of

1900.

Executed in presence of

(L. S.)

INDIGENT PENSION,

1900.

Name M. G. Hooks

County Fulton

Approved by payee 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED TO

July 31st 1900

Questions for Applicant.

STATE OF GEORGIA,

County.

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

1. What is your name and where do you reside? (Give State, County and post office.)
M. G. Hooks Georgia Fulton County Atlanta Ga
2. How long and since when have you been resident of this State?
Life - years 1840 to 1900
3. When and where were you born?
DeKalb Co Ga Oct 12 1840
4. When and where and in what company and regiment did you enlist or serve?
Henry County Ga Co K 22 4a Regiment Aug 31st 1861
5. How long did you remain in such company and regiment?
From Aug 31st 1861 to May the 9th 1865
6. For how long a period did you discharge regular military duty?
3 Years + Five Months
7. When, where and under what circumstances were you discharged from service?
At Appomattox Court house Va May 9th 1865
8. What is your present occupation?
Am not able to do manual labor
9. How much can you earn (gross) per annum by your own exertions or labor?
Nothing
10. What has been your occupation since 1865?
Farming when able to work
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third "blindness and poverty"?
First + Second
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
See Years Manual Arm and or Dislocated Wrist and Ulcer of the Throat
13. What property, effects or income do you possess, and its gross value?
Nothing
14. What property, effects or income did you possess in 1894, 1896, 1898, 1899 and 1900, and what disposition, if any, did you make of same?
Did not possess anything
15. In what County did you reside during those years, and what property did you then return for taxation?
Fulton County Did not return any property
16. How were you supported during the years 1898 and 1899?
By 2 little children of which has since died
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
about one hundred dollars did
18. What was your employment during 1898 and 1899? What pay did you receive in each year?
Was not able to work as manual labor and
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
yes wife and two little girls the girls work in cotton factory and my children own a little house in which they give to them by their grandmother
20. Are you receiving any pension? If so, what amount, and for what disability?
Do not receive any pension

Sworn to and subscribed before me this the

5th day of July 1900.

of Fulton County.

Applicant.

Every Question MUST Be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name and where do you reside? J. J. Albert
33 1/2 Sigmond St. Atlanta Ga
2. Are you acquainted with M. V. Books, the applicant; if so how long have you known him? yes about 40 years
3. Where does he reside, and how long and since when has he been a resident of this State? At Atlanta Ga. Nearly fifty years
4. When, where and in what company and regiment did he enlist, and how do you know? Aug 31 1861
4th Regt. Co. B 22 Ga. Infantry was
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Discharged through
illness with his arm Aug 31 1861 to May 9th 1862
he was a good soldier & surrendered as
an honorable man
7. What property, effects or income has the applicant? (Give your means of knowledge.) none that I know of. I live near him
and am acquainted with his circumstances
8. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? he did not have anything to
my knowledge
9. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? he had nothing to convey
10. What is the applicant's occupation and physical condition? he has no occupation
his physical condition is bad

11. Is the applicant unable to support himself by labor of any sort, if so, why? yes on
account of his physical condition
being unable to work
12. How was he supported during the years 1898 and 1899? by his family
13. What portion of his support for these two years was derived from his own labor or income? none

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? His left arm has been broken
near the wrist & is thick and
unable to work & poverty
15. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this
the 3 day of May 1900, J. J. Albert
M. V. Books Ordinary.

Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

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

Age, Paralysis & Disability renders him unable to perform manual labor
the knee is disabled from a hammer fracture with dislocation
of the left foot. I have examined him carefully and
find that he is physically unable to earn a support
by his own labor.

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
30 day of May 1900, M. V. Books Ordinary.
G. E. Murphy M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, M. V. Books, Ordinary in and for said County, hereby certify that the applicant M. V. Books resides in said County, and has been a bona fide resident of this State since the 30 day of May 1898, and that the witnesses, viz J. J. Albert
M. V. Books and G. E. Murphy, are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1898 none Dollars
of property, and in 1899 none Dollars of property.

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

Witness my hand and seal of office, this 30 day of May 1900.

M. V. Books Ordinary,
of Fulton County.

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 affidavit may be attached if black men are from Michigan.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

POWER OF ATTORNEY.
STATE OF GEORGIA,
County. }

I, _____ hereby authorize _____
of _____
to receive and receipt for the pension allowed and request that he remit same to
at _____
by _____

Witness my hand and seal, this _____ day of _____ 1901.
[L. S.]

Executed in presence of _____

Nov 19, 1901
Enlistment

CODE SECTION 104
(For Those Already Enrolled.)

No. *391*

INDIGENT
SOLDIER'S PENSION.
1901.

Name *Wm. H. H. H.*
County *Talbot*

WARRANT ISSUED
May 14 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
W. H. H.

no date

STATE OF GEORGIA

FOR APPLICATIONS HEREON PENSION ALLOWED

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears M. V. Hooks of Fulton 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 any time 18; that he is 62 years old and by occupation a carpenter that he enlisted in the military service of the Confederate States (or of the State of Fla) during the war between the States, and served for the term of 4 yrs in Company K, of 72th Regiment of Fla Vol; that his physical condition is as follows:

dislocation of left arm

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 1901. I have heretofore as a resident of _____ county been allowed a pension for the year 1 yet time

Sworn to and subscribed before me, this 4th day of January, 1901, by M. V. Hooks Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 4th day of January, 1901.



J. R. Richardson Ordinary Fulton County.

Note — The blank spaces must be filled.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

hereby authorize

of

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

at

by

Witness my hand and seal, this day of 1902.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

hereby authorize

of

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

at

by

Witness my hand and seal, this day of 1907

[L. S.]

Executed in presence of

(FOR THOSE ALREADY ENROLLED.)

No. 206

INDIGENT

SOLDIER'S PENSION

1902.

Name

M. L. Hooker

County

Fulton Co.

Co.

2nd Regiment

WARRANT ISSUED

1/4 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. L. Hooker

Gen. W. Lindsey, State Auditor, Atlanta.

no data

Hooker M. L.
Fulton Co.

(FOR THOSE ALREADY ENROLLED)

No. 123

INDIGENT

SOLDIER'S PENSION

1907.

Name

M. L. Hooker

County

Fulton Co.

Co.

2nd Regiment

WARRANT ISSUED

1/4 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. L. Hooker

Gen. W. Lindsey, State Auditor, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears M. V. Hooks of

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of Birth 1864, that he is 66 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company R, of 2nd Regiment of Inf; that his physical condition is as follows:

dislocation of left arm

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 _____ county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the

day of JAN 1902.

Ordinary.

STATE OF GEORGIA,

County.

I, John R. Wilkinson

Ordinary of said County,

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

Given under my official signature and seal, this

day of JAN 1902.

Ordinary.

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

County.

Personally appears M. V. Hooks of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of _____ 1840; that he is 66 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company R, of 22 th Regiment of Inf; that his physical condition is as follows: inferiority of growth

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 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 _____ County, been allowed a pension for the year 1901.

Sworn to and subscribed before me, this the

day of _____ 1902.

John R. Wilkinson Ordinary.

State of Georgia,

County.

I, John R. Wilkinson

Ordinary of said County,

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

Given under my official signature and seal this

day of JAN 1902.

Ordinary.

County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I

hereby authorize

of

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

by

Witness my hand and seal, this day of 1903.

Executed in presence of

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I

hereby authorize

of

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

at

by

Witness my hand and seal, this day of 1904.

Executed in the presence of

[L. S.]

Hoskey M. V.
Guthrie County
COMMISSIONER
(FOR THOSE ALREADY ENROLLED.)

No. 71

INDIGENT

**SOLDIER'S PENSION
1903.**

Name *M V Hoskey*

County

Co. *22nd* Regiment

WARRANT ISSUED

1/20 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

M

no data

Hoskey M. V.
Guthrie Co
COMMISSIONER
(FOR THOSE ALREADY ENROLLED.)

COMMISSIONER

(FOR THOSE ALREADY ENROLLED.)

No. 70

INDIGENT

**SOLDIER'S PENSION
1904.**

Name *M V Hoskey*

County

FULTON.

Co. *22* Regiment

WARRANT ISSUED

1/20 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

M

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears M. V. Hooks of Fulton 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 10th day of March 1884; that he is 32 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company A, of 22d Regiment of Inf; that his physical condition is as follows: I & P

that his property consists of the following items: I & P

of the value of I & P 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 Fulton county been allowed a pension for the year 1903.

Sworn to and subscribed before me, this 20th day of JAN 1903.

Ordinary.

STATE OF GEORGIA,

Fulton. County.

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

Given under my official signature and seal, this 20th day of JAN 1903.

day of JAN 1903.

Ordinary

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears M. V. Hooks of Fulton 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 10th day of March 1884; that he is 32 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company A, of 22d Regiment of Inf; that his physical condition is as follows: I & P

that his property consists of the following items: I & P

of the value of I & P 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 Fulton County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this 20th day of JAN 1904.

Ordinary.

STATE OF GEORGIA,

Fulton. County.

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

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

day of JAN 1904.

Ordinary

County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ }
COUNTY.

I, _____ hereby authorize

_____ of _____

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

_____ at _____

by _____

WITNESS my hand and seal, this _____ day of _____ 1905.

_____ [L. S.]

Executed in the presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ }
COUNTY.

I, _____ hereby authorize

_____ of _____

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

_____ at _____

by _____

WITNESS my hand and seal, this _____ day of _____ 1906.

_____ [L. S.]

Executed in the presence of _____

Hooker M. V.
Fulton County
YOUR SECTION 134.
(FOR THESE ALREADY ENROLLED.)

No. *117*

INDIGENT

SOLDIER'S PENSION
1905.

Name *M. V. Hooker*

County *WILCOX*

Co. *A* Regiment *22nd Regt*

WARRANT ISSUED

4/8 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H. H.

THE FULTON PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

Hooker M. V.
Fulton Co.

YOUR SECTION 134.
(FOR THESE ALREADY ENROLLED.)

No. *117*

INDIGENT

SOLDIER'S PENSION
1906.

Name *M. V. Hooker*

County *WILCOX*

Co. *A* Regiment *22nd Regt*

WARRANT ISSUED

4/8 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H. H.

THE FULTON PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

FOR VALENTINE HENRY LOUGHRAN ATTORNEY PENSIONER

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears W. V. Hooks of Fulton

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of _____ 18____; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company A, of 24th Regiment of La.; that his physical condition is as follows: Infirmary and poverty

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act approved December 16th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Fulton County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the _____ day of JAN 2 1905.

Ordinary.

W. V. Hooks
sworn

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this JAN 2 1905 day of _____ 1905.

Ordinary Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears W. V. Hooks of Fulton

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 _____ 1890; that he is 65 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company No., of 24th Regiment of La.; that his physical condition is as follows: Infirmary and poverty

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act approved December 16th, 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 Fulton County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the _____ day of JAN 1 1906.

Ordinary.

State of Georgia,

Fulton County.

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

Given under my official signature and seal, this JAN 1 1906 day of _____ 1906.

Ordinary Fulton County.

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

do certify that I am well acquainted with W. V. Hawks 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 JAN 2 1905
day of 1905.



Ordinary Fulton County.

Note.—The blank space must be filled.

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

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

Given under my official signature and seal, this JAN 1 1906
day of 1906.



Ordinary Fulton County.

Note.—The blank space must be filled.

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

61 *Hook, Margaret*
Fulton County
Kelly (Mrs)
01971415
No.

Widow's Application

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

County *Fulton*

Name *Margaret O. S. Hook*

Widow of *Martin W. Hook*

Company *22nd Sa Vol.*

Approved

J. W. LINDSEY,
Comptroller of Finance

CHAS. P. BYRD, State Printer, Atlanta.

10/27/1914

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Fulton County.

Personally before me comes Mrs Margaret A C Hooks of said County, who, after being duly sworn, on oath says, that she is the widow of Marlin V Hooks, to whom in the County of DeKalb State of Ga she was married on the 20 day of Nov 1914 and that she remained his wife, and resided with him to the date of his death in Aug 1914 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in Ga said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$6.00 in Fulton County for 1914 per annum, on account of being a soldier in Company W and Regiment Ga (Volunteers of State Militia).

At the death of Marlin V Hooks he was in the use and possession of the following property.

of the cash value of \$ None
 What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully.) None
 Acres land None \$
 Horses and Mules None \$
 Hogs, Cows, etc None \$
 Total Cash value of all property None \$

That she is now a bona fide resident citizen of said County of Fulton and she has so continuously resided since Nov day of 1914 or 88.5 years.

Sworn to and subscribed before me, this the 5 day of Sept 1914,
John W. Thompson Ordinary,
 of Fulton County.

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

STATE OF GEORGIA,

DeKalb County.

Personally before me comes J C Stephenson & D C Thompson known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs M A C Hooks who made the foregoing affidavit, is the lawful widow of Marlin V Hooks who died in Fulton County in said State of Ga on 14 day of Aug 1914 and that she has not since remarried. That she became the wife of Marlin V Hooks on the 20 day of Nov 1914 and that she and he had resided together as man and wife continuously since 1914 day of Nov 1914 and that the he was the same man who was on the pension roll of said State from Fulton County when he died.

Sworn to and subscribed before me, this the 28 day of Sept 1914,
James H. George Ordinary,
 of DeKalb County.

Widow's Application

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

Name Margaret A C Hooks
 Widow of Marlin V Hooks
 County DeKalb
 Approved 22 W. G. A. Doc

State of Georgia }
DeKalb County } To any Minister of the Gospel, Judge of the Superior Court, Justice of Inferior Court, or Justice of the Peace to celebrate

You are hereby authorized and permitted to join in the Honorable State of Matrimony Martin V. Hooks and Margaret A. G. Thomas, according to the Rites of your Church, provided there be no lawful cause to obstruct the same according to the Constitution and Laws of this State, and for so doing this shall be your sufficient License.

Given under my hand and seal this 15th day of November 1886.

J. B. Wilson, Ordinary.

I hereby certify that Martin V. Hooks and Margaret A. G. Thomas were joined together in the Holy Bands of Matrimony on the 20th day of November 1886 by me.

W. R. Pendley J. P.

Georgia, DeKalb County.

I, James R. George, Ordinary in and for said county do hereby certify that the above and foregoing copy of marriage license, as a true, correct and complete copy of marriage license issued to Martin V. Hooks and Margaret A. G. Thomas, as the same appears of record in my office, in Book B. Record of Marriages, Page 188.

In Testimony Whereof, I have hereto set my hand and affixed the seal of said Court of Ordinary at Decatur, Georgia, this 29th day of August, 1914.

James R. George
Ordinary DeKalb County, Georgia.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes T. J. Bond & W. H. Roane who after being sworn on oath says, that they are freeholders of said County, and that they know M. V. Hooks of said County and knew her said husband. M. V. Hooks at his death on the day of Aug 1914 that she and he were in the use, possession and control of the following property at his death to wit: None

of the value of \$ None That she is now in the use, possession and control of the following property to wit: None

of the value of \$ None

Sworn to and subscribed before me, this the 29 day of Sept 1914
John R. Wilkinson Ordinary.
of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

John R. Wilkinson Ordinary of said County, do certify, that, I know M. V. Hooks the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the day of Sept 29 1914

That I also know T. J. Bond & W. H. Roane witness as to marriage and I also know that all of the foregoing were duly sworn by me holder of said County that they are true and their statements are entitled to full faith and credit.

That the tax Books of Fulton County shows that None returned property to the amount of \$ None for 1908 \$ None for 1909 \$ None for 1910 \$ None

Sworn under my hand and official seal of office this 29 day of Sept 1914
(SEAL) John R. Wilkinson Ordinary.
Fulton County.

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

(M. 120.)
Margaret A. C. Hooks

Feb. 27, 1919
1919 Day Co
The Barclay & Brandon Co

Fulton Co

Approved & returned
for 201
4/23-1919
J.W. Deane
Care of Fulton

Died Feb. 27, 1919

Pa ✓

G. H. BRADSHAW, PRESIDENT AND MANAGER
S. M. BRADSHAW, VICE-PRESIDENT

Atlanta, Ga. March 7th 1919
M. Mrs. Margaret A. Hooks, deceased,
for funeral expenses of Mrs. Margaret A. Hooks,
To The Barclay & Brandon Co. Dr.
246 IVY STREET
Bell Phones: Ivy 788 and 185
Atlanta Phone 788

Feb. 27	To Casket	\$ 175	00
	" Embalming	15	00
	" Pallbearers' Gloves	25	00
	" Flowers to Hotel	25	00
	" " to Macedonia	15	00
	" Limousine	15	00
	" Constitution Notice	5	00
	" Journal Notice	5	15
		\$ 295	15

Personally appeared before me J.W. Deane who on oath says the foregoing account is just, true and correct to the best of his knowledge and belief. (Signed) J.W. Deane.

Subscribed and sworn to this 10 day of March, 1919.
J.W. Deane
Notary Public, Fulton County, Ga.
My commission expires, Jan. 9, 1921.

Application for Pension Due to a Deceased Pensioner

Under the Act of August 15, 1904

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

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes
G. H. Brandon of said County, who, after being sworn, on oath says, that
he knew Margaret A. C. Hoots of said County, and that he was on
the Widows Pension Roll Fulton County at the
time of her death, which occurred in Fulton County, in this
State, on the 27 day of February, 1919, and that
a Pension of Ninety Dollars was due him and
unpaid at the time of his death. That she left no widow or dependent children surviving him, and no estate
of any value sufficient to pay his funeral expenses, which amounted to the sum of \$296.15
Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me

this 7 day of March, 1919 } G. H. Brandon
Arthur R. Maubut Ordinary
Fulton County

GEORGIA, Fulton County.

March 27 1919
I, Arthur R. Maubut of said County, do certify
that I personally know G. H. Brandon, who is a resident
citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and
credit.

I also knew Mrs. Margaret A. C. Hoots while in life; that he
was the same person whose name appears on the Widows Pension
Roll of Fulton County, and was paid a Pension
of Eighty Dollars in said County for 1919, and
I now believe him to be dead.

Given under my hand and official seal, this 27 day of March, 1919.

Arthur R. Maubut Ordinary.
Fulton County.

Roll of Fucox County, and was paid a Pension
of Eighley Dollars in said County for 1919, and
I now believe him to be dead.

Given under my hand and official seal, this 27 day of March, 1919

Artem R. Hualbert Ordinary.

Fucox County.

Hooper James
Fulton Co.
for 1900

No. _____

INDIGENT PENSION

✓ 1909

Name *James F. Hooper*

County *Fulton*

Co. *7 1st Fla. Cav.*

Approved _____ 1909

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

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

8-27-09

POWER OF ATTORNEY. STATE OF GEORGIA.

COUNTY, }

I, _____

lawfully authorize

to execute and receive for the person above named and required that he shall make to _____

at _____

by _____

of _____

day of _____

1909

Executed in presence of _____

[L.S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____, hereby authorize

of

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

at _____ by _____

Witness my hand and seal, this _____ day of _____, 1909.

[L. S.]

Executed in presence of _____

INDIGENT PENSION

1909

JOHN W. LINDSEY,

WARRANT HANDLED TO

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

I, James H. Hopkin, of said State and County, desiring to avail himself of the Pension Act (Section 1864, Code), hereby submits his proofs, and after being duly sworn, true answers to make to the following questions, depose and swear as follows:

1. What is your name and where do you reside? (Give State, County and Parish.)

James H. Hopkin, Fulton County, Ga., Atlanta, Ga.

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

Twenty-two years

3. When and where were you born?

Colt County, Ga., 1844

4. When and where and in what company and regiment did you enlist or serve?

1864, 1st Co., 1st Cavalry, Company 8, 1st State Guard

5. How long did you remain in such company and regiment?

6 Months

6. When and where was your company and regiment surrendered and discharged?

in Atlanta, about the first of 1864

7. Were you present with your company and regiment when it was surrendered?

Yes

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?

Not present

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

not over \$50.00

10. What has been your occupation since 1865?

business most of time

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

second, "infirmary and poverty," or third, "blindness and poverty?"

infirmary 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.

Kidney and bladder trouble for the last 7 or 8 years

13. What property, real and personal, or income, do you possess, and its gross value?

None

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same?

had none

15. In what County did you reside during those years, and what property did you then return for taxation?

in Fulton most of time

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?

by my wife

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?

about \$125.00, my labor about \$60.00

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year?

Business

19. Have you a family? If so, who composes such family? Give their means of support, if any, and state their occupation.

2 sons, 1 daughter, all in business

20. Are you receiving any pension? If so, what amount and for what disability?

not

21. Have you ever made an application for pension before?

not

22. How many applications have you ever made and under what class?

not

Subscribed and sworn to before me this _____ day of _____, 1909.

John W. Lindsey Notary Public for Georgia.

County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Shulton COUNTY.

R. D. Bonie of said State and County, having been presented as a witness in support of the application of J. M. Hooper for pension under section 1284, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? R. D. Bonie in Shulton County, Atlanta, Ga.

2. Are you acquainted with J. M. Hooper the applicant; if so, how long have you known him? Since '61

3. Where does he reside, and how long and since when has he been a resident of this State? All of his life

4. When, where and in what company and regiment did he enlist, and how do you know? In Co. 1st Ga. State Guards

5. Were you a member of the same company and regiment? Yes

6. How long did he perform regular military duty? Six months

7. When and where was his command surrendered? Atlanta, Ga. 1st of 1864

8. Were you present when it surrendered? Yes

9. Was applicant present? Yes

10. If he was not present, where was he?

When did he leave his command? Jan 1864 For what cause? Mustered out

By what authority is he? By Government How do you know all of this? I was Captain of the Company to which he belonged

11. What property, effects or income has the applicant? (Give your means of knowledge.) he is my Brother-in-law & he owns any property & I do not know it

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? I know of no real estate

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I do not know anything of it

14. What is the applicant's occupation and physical condition? Light job work he has Bladder and Kidney trouble

15. Is the applicant unable to support himself by labor of any sort; if so, why? from the above application would suppose he is unable

16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? by his Mother & his Sister

17. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? I know of no real estate

18. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I do not know anything of it

19. What is the applicant's occupation and physical condition? Light job work he has Bladder and Kidney trouble

20. Is the applicant unable to support himself by labor of any sort; if so, why? from the above application would suppose he is unable

21. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? by his Mother & his Sister

22. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? I know of no real estate

23. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I do not know anything of it

24. What is the applicant's occupation and physical condition? Light job work he has Bladder and Kidney trouble

25. Is the applicant unable to support himself by labor of any sort; if so, why? from the above application would suppose he is unable

26. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? by his Mother & his Sister

27. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? I know of no real estate

28. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I do not know anything of it

29. What is the applicant's occupation and physical condition? Light job work he has Bladder and Kidney trouble

30. Is the applicant unable to support himself by labor of any sort; if so, why? from the above application would suppose he is unable

31. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? by his Mother & his Sister

32. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? I know of no real estate

33. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I do not know anything of it

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

COUNTY.

Personally came before me Dr. Frank Boland & J. E. Sommerfeld and J. M. Hooper, both known to me as reputable physicians

of said County, who, being severally sworn, say on oath that they have examined carefully

James F. Hooper, applicant for pension under Section 1284, Code, and after

such personal examination say that his precise physical condition is as follows:

Has a chronic disease of the kidneys (Bright's) with an acute attack about one month ago. Is weak and unable to do any physical work.

and that we have no interest in said pension being allowed.

Subscribed and sworn before me, this 1st day of July, 1907.

Frank K. Boland, M.D. Julius E. Sommerfeld, M.D.

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Shulton COUNTY.

I, John W. Wickham Ordinary, in and for said County, hereby certify

that the applicant, J. M. Hooper resides in said County, and has

been a bona fide resident of this State since the 1st day of July, 1897.

and that the witnesses, viz: R. D. Bonie & J. M. Hooper

are of trustworthy character, and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of _____ County shows that applicant

returned for taxation in his name in 1901 _____ Dollars of

property, and in 1902 _____ Dollars of property; in 1903

_____ Dollars of property; in 1904

_____ Dollars of property; in 1905

_____ Dollars of property; in 1906

_____ Dollars of property; in 1907

_____ Dollars of property.

In my opinion the foregoing claim is valid made in good faith.

Witness my hand and seal of office, this 1st day of July, 1907.

John W. Wickham Ordinary.

of Shulton County.

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant, and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.

3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the paper as above set out.

Wm. J. Harrison
11th Regt. Va.
20th June 1864

**Confederate
Soldier's Application**

✓ UNDER ACT 1910

County

Name

Company

Regiment

Approved

J. W. LEBLANC
Governor of Louisiana

11th

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

ORDINARY'S CERTIFICATE:

STATE OF GEORGIA,

FULTON COUNTY.

I John P. Wickham Ordinary of said County do certify that, I know J. R. Balling the applicant for pension. (he 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 appears to the service of husband, and J. R. Balling who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Return J. R. Balling Returned for Tax is for 1908 none for 1910 none

John P. Wickham under my hand and official seal of office this 21st

Day of Oct 1910

(SEAL)

John P. Wickham Ordinary,
Fulton County.

GEORGIA, Cobb County.

I, J. M. Gann, Ordinary of said county, do certify that I personally know Wm. A. Hooper, the applicant, and that she is the lawful widow of J. M. Hooper, was and was on the Service Pension Roll of said Fulton county, and was paid a Pension from Sixty Fulton county for 1911, and at the time of his death on the 23 day of December 1911, there was due to him and unpaid his Pension of Sixty Dollars from the State of Georgia, and I know Thos. H. Broun & H. D. Wynn, the within witnesses, and each of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 6 day of January 1912

Georgia Cobb County
J. M. Gann Ordinary, Cobb County

Certify that the Marriage Record of this County from 1865 to 1870 are very imperfect and without copies and incomplete what marriages occurred after 1870 have been made by after 1870
J. M. Gann
Ord. Cobb County

Hooper, T. M.

Fulton County

No. _____

19____

Application for Pension Due
Deceased Soldier

UNDER ACT 1891

To be paid the Widow or Dependent Children

BY

Wm. A. Hooper

Widow of J. M. Hooper

County Fulton

Wm. A. Hooper

Approved and paid

19____

J. W. LINDSEY,

Commissioner of Pensions.

GEORGIA, _____ County.

I hereby authorize and constitute _____ of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 19____, through my deceased husband _____, who was on _____

Pension Roll and paid from _____ for 19____

Witness my hand this _____ day of _____ 19____

Attested before me:

Application for Pension Due Deceased Soldier

To be paid to his widow or dependent children.
 UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA, Cobb County.
 Personally before me comes Mrs. Mary A. Harper, of said county,
 after being duly sworn, on oath says that she is the widow of T. M. Harper
 who was duly enrolled as a Private Pensioner from the county
 of Fulton and was paid a Pension of Eighty
 Dollars from Fulton county for 1911, and that the said
T. M. Harper died in Fulton county on
 the 22 day of Dec 1911, and at the time of his death a Pension of Eighty Dollars
 was due him from Fulton county and unpaid for 1912.
 Applicant further swears that she married the said T. M. Harper on
 the 10 day of Oct 1867, in Cobb county and
 State of Georgia and resided with him from the date of marriage to his death
 as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid
 to her.

Subscribed before me this 2nd day of Jan 1912
J. M. Gann Ordinary, } Mary A. Harper (L. S.)
Cobb County.

AFFIDAVIT OF WITNESS.

GEORGIA, Cobb County.
 Personally before me comes James H. Bowley & H. D. Mamer, who
 on oath says that he knew T. M. Harper while in life
 and that he knows Mrs. Mary Harper
 the above applicant; that he knows that she said T. M. Harper
 and Mary Pope were in due form of law married in the county
 of Cobb in the State of Ga on
 the 10 day of Oct 1867 and that they resided together
 as husband and wife from date of marriage to the day of his death on the 22nd day
 of December 1911, and I now know that she is his dependent widow.

Subscribed before me this 2nd day of January 1912
J. M. Gann Ordinary, } J. W. Balling
Cobb County. } Witness

NOTE: This form can be used by husband or wife children where there is no widow.
 The Ordinary must send in all these certified copy of marriage license attached.

were in due form of law married in the county
of Cash in the State of Ga on
the 10 day of October 1867 and that they resided together
as husband and wife from date of marriage to the day of his death on the 22nd day
of December 1891, and I now know that she is his dependent widow.
Signed and subscribed before me this 2nd day of January 1892
J. M. Gunn Ordinary, }
Cash County. } J. W. Balling
Warrant

Words in italics may be used by guardian or other children when there is no widow.
No Ordinary shall read in all cases certified copy of marriage license attached.

Hastings, John H.
Fullerton, Ca.
No. 1416
10th Jan 1911

INDIGENT PENSION
1909

Name John W. Norton
County Fullerton
Co. B-44 Regt. 100
Approved _____

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDLED TO

Delivered with valid receipt of _____
and Registered with _____
and _____

POWER OF ATTORNEY
STATE OF GEORGIA

County _____
I, _____
do hereby authorize and empower _____
to receive my land and cash value _____
_____ day of _____ 1911.
Signed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of

to receive and receipt for the pension allowed and request that he remit same to

at

by

Witness my hand and seal, this _____ day of _____, 190__.

[L. S.]

Executed in presence of

Hartley John H.
Faulkner Co.
No.
10/1/1911

INDIGENT PENSION.

1909

John H. Hartley
Faulkner Co.
No. 10/1/1911

JOHN W. LINDSEY,

WARRANT SHERIFF, SO

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

I, John H. Hartley of said State and County, desiring to avail himself of the Pension Act (Section 1284, Code), hereby submits his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.)
John H. Hartley, Georgia, Faulkner Co., 2nd State Ave., Atlanta.
2. How long and since when have you been a resident of this State? Don't know years
3. When and where were you born? Georgia, Faulkner Co., Dec 23rd 1843
4. When and where and in what company and regiment did you enlist or serve? Co. B 4th Ga Regiment, 6
Baldwin's Co. 17th 1862
5. How long did you remain in such company and regiment? from March 17th 1862
to April 24 1865
6. When and where was your company and regiment surrendered and discharged?
Appomattox, Virginia, April 9th 1865
7. Were you present with your company and regiment when it was surrendered? I was not
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was captured at Baldwinsville, April
24 1865 and was taken to Point Lookout, Md.
9. How much can you earn (gross) per annum by your own exertions or labor? About nothing
10. What has been your occupation since 1865? Housewife, and later on, Housewife
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Age and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight.

13. What property, real and personal, or income, do you possess, and its gross value? No property
and no income
14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? None

15. In what County did you reside during those years, and what property did you then return for taxation?
Meigs Co. Georgia, live in my own rent
16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?
By the occupation of my own
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Don't know, but do know that my income was not over \$100
18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? My pay was used to help support my family
19. Have you a family? If so, who composes such family? Give their means of support. Have they a home-stand, or other property? Their ages and how employed? Yes, three girls and
one boy, they have no home, but live in my own rent, and my support
is to help with the girls, and my boy is in the army
20. Are you receiving any pension? If so, what amount and for what disability?
I am not
21. Have you ever made an application for pension before? I have not
22. How many applications have you ever made and under what class? At least under any
class

Sworn to and subscribed before me this the

14th day of Oct, 1909,
John W. Lindsey
of Faulkner County.

John H. Hartley
Applicant.

Every Question Must Be Answered

Gen. G. A. } Personally carried
 Fulton Co. } before me F. M. Bridges
 who are each leg. that
 to the best of his knowledge & belief
 that Mr. Hooten applicant for a
 license we do not possess any
 property real or personal and has
 since bought Mrs. Hooten says of Mrs.
 Hooten owns a small cottage home
 on South street in Atlanta.

Their main dependence for a
 support is from the earnings
 of their daughters, all of whom are age

Mrs. Hooten has bought their
 supplies from me with few
 exceptions the past three years.
 The supplies has been bought and
 paid for by Mrs. M. Hooten.

I know of no other means
 of support except that already
 named. F. M. Bridges

Sworn to & Subscribed
 before me Oct 29th 1919

John A. Wilkinson
 Notary

I hereby certify that above written is a true
 character of the statements exhibited to full faith
 and credit

John A. Wilkinson
 Ordinance

NAME **John W. Hooten** YEAR **1911** COUNTY **Fulton**

WHEN AND WHERE BORN? **Resident of Georgia 66 years. Jasper County.**

RELEASED WHEN AND WHERE? **March 17th 1900, Goldsboro, North Carolina.**

RANK

COMPANY AND REGIMENT? **Co. B, 44th Georgia Regiment.**

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE? **April 2nd 1865, was captured at Petersburg, Va. taken to Point Lookout Prison.**

RELEASED. **Does not state when released.**

WHEN AND WHERE SURRENDERED? **Command surrendered; April 9th 1865, Appomattox Court House, Virginia.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? **Point Lookout Prison.**

DIED, WHEN AND WHERE?

BURIED,

WITNESSES. **E. M. Hadden - 2nd Lieut. of Company. John G. Key - Personal knowledge.**

No date.

Serial 4a

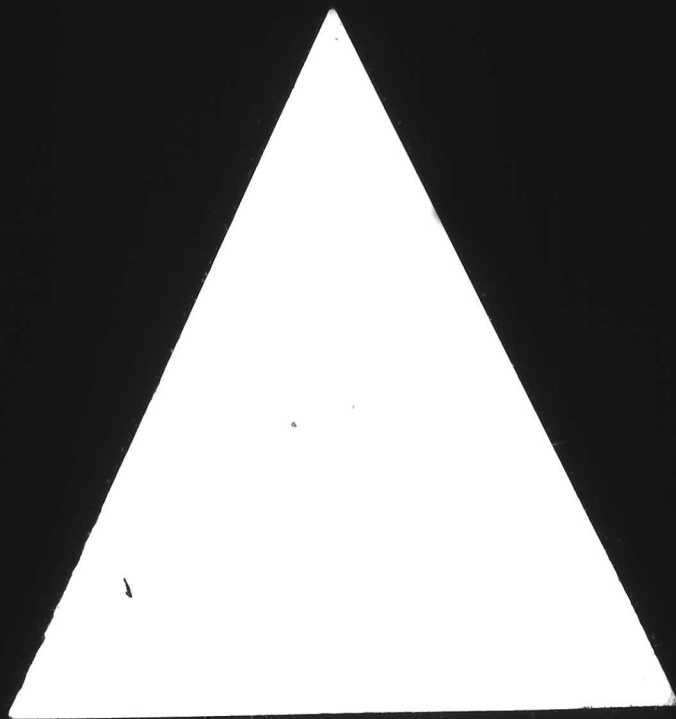
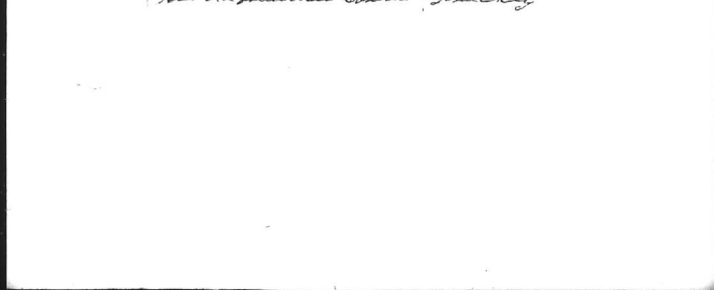
Feb 24th 1902.

John W. Norton

My old friend and Comrade.

I am trying to get our old
Brigade Badge to each one of my old
comrades. I. 444 4a. I sent you one
before you were in the front of
action so you can't keep it as a memento
of the past. I also sent you a copy
of my report of the People of the South
in the late war between the States -
how our people fought to remain free
and how our people ought to remain free.
I hope to have a local meeting of our
Brigade, composed of the 4. 12. 21 class.

444 4a. Right across the bottom of
Salmon Lake this morning if you can. I
am looking for the 4. 12. 21 class. If this letter
comes to you 4. 12. 21. I will send you one
and your address for your old comrades. I am
your old friend and Comrade John W. Norton



Hoover, H. L.
#265
Hoover, H.
Fulton Co

No. *938*

Application for Allowance

FOR

General disability to or from

Applicant *H. L. Hoover*

County *Fulton*

Amount *25*

Date of Warrant *May 17/88*

Entered on Record,

May 17 1888

C. A. H.

Secretary Executive Department.

Application for Allowance

No. 938

Amount \$25
Date of Warrant May 17/87.
Entered on Record.
May 17 1887
Chas. H. H.
County Fulton

Secretary Executive Department

STATE OF GEORGIA,
Fulton County

PERSONALLY appears *W. D. Robison* of *Fulton* 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 *1867* day of *Aug.*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *1st* *th* Regiment of *Volunteers* *Richburne* in Company *A*, of *'s* Brigade, in whilst engaged in such military service, at the battle of *Richburne* in the State of *Kentucky*, on the *24* day of *Aug.* 186*7*, he was wounded as follows: *Shot in the right arm, the bone broken, and the arm rendered useless.*

He has been unable to perform any manual labor since the above mentioned battle, and is now unable to do so.
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. *W. D. Robison*

Sworn to and subscribed before me, this *20* day of *January* 188*8*
W. D. Robison

NOTE.—State fully nature of *injury* which causes the disability, and *explain* particularly the extent of the disability.

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA,
Fulton County

PERSONALLY came before me *W. D. Robison* of the county of *Fulton* State of *Georgia*, who, being duly sworn, says that he was a commissioned officer in Company *D* of *2nd* Regiment of *Volunteers*, 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 *W. D. Robison*, as stated by him in said affidavit. Deponent further states that said *W. D. Robison* is a bona fide citizen of the State, and resides in *Fulton* county.
Sworn to and subscribed before me, this *27* day of *April* 188*8*
Nickman Meekly Elder

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 affidavits of three responsible citizens should be furnished.

STATE OF GEORGIA,

County)

PERSONALLY COME

citizens of

county, in said State,

who, being duly sworn, say that they are acquainted with

and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a *bona fide* citizen of this State, and resides in County, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this

day of 188

STATE OF GEORGIA,

County,

PERSONALLY COMES before me

W. L. Leachman

Ordinary of said county,

and both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have carefully examined and after such examination say that the applicant has been injured as follows:

I certify that the above named person is a bona fide citizen of this State, and that he is permanently disabled by the wounds received in the military service of the Confederate States.

Sworn to and subscribed before me, this

28 day of January 1888

J. M. Worley, M.D.

W. L. Leachman
ORDINARY

NOTE. The physicians will state fully the extent of the wound and the disability resulting therefrom.

STATE OF GEORGIA,

Georgia County.)

I,

W. L. Leachman

Ordinary of said county,

do certify that I am well acquainted with *Henry L. Worley* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in 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 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

day of *May* 1888
W. L. Leachman
Ordinary *Georgia* County.

POWER OF ATTORNEY

STATE OF GEORGIA,

County.)

Know all men by these presents, That I

of

county, in said State, do hereby appoint of my true and lawful attorney in fact, for me and in my name to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State, as stated in the foregoing affidavit). Hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this

day of 1888

[L. S.]

Executed in the presence of us:

Wm. L. Co. Fulton Co. Haver, H. A.

No. 168
APPLICATION FOR ALLOWANCE
FOR YEAR ENDING OCT. 31, 1889.

FOR
Lieut. Disability
Applicant *W. L. Co.*
County *Fulton*
Amount *50*
Date of Wound *Sept. 24*
Entered on Record *Feb. 20*
Disability *W. L. Co.*
Disability *W. L. Co.*
No additional data
Applicant

STATE OF GEORGIA.

Fulton County.

PERSONALLY appears *H. L. Haver* of *Fulton* 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 continuously since the *Twenty-fifth* day of *February* 1869; that he enlisted in the military service of the Confederate States (or of the State of *Tennessee*) during the war between the States, and served as a *private* in Company *4*, of *2d* Regiment of *Tennessee* Volunteers, *2d* Brigade; that whilst engaged in such military service, at the battle of *Richmond* and *7th* in the State of *7th*, on the *24th* day of *August* 1862, he was wounded as follows: *Ball entered the right bowell passing through the right ilium dislocating the right side and leg causing partial paralysis of the lower extremities and inguinal hernia resulting in chronic enteritis causing tenesmus and frequent bloody and mucous discharges disabling him from manual labor permanently.*
Dependent 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 *16th* day of *February* 1889
W. L. Co.
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.

Fulton County.

PERSONALLY comes before me *W. L. Co.* Ordinary of said county, *J. M. Boring* and *J. E. Collier*, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *H. L. Haver* and after such examination say that the applicant has been injured as follows: *Ball entering the right bowell passing through the right ilium dislocating the right side and leg causing partial paralysis of the lower extremities and inguinal hernia resulting in chronic enteritis causing tenesmus and frequent bloody and mucous discharges disabling him from manual labor permanently.*
Sworn to and subscribed before me, this *16th* day of *February* 1889
W. L. Co.
NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

STATE OF GEORGIA.

Fulton County.

I, *W. B. Lovell*, Ordinary of said county, do certify that I am well acquainted with *W. L. Hooper*, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit: *J. E. Ballin* and *J. M. Boney*, are

are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that *W. L. Hooper* before whom the foregoing affidavits were made and power of attorney was signed, is a resident of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *20* day of *February*, 188*8*.

Ordinary *W. B. Lovell* County *Fulton*

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

county, in said State, do hereby appoint

of *W. L. Hooper* 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*8*

Executed in the presence of us,

(11 S)

DIRECTION:

Send money to me as follows, by

to

P. O.

County, Georgia.

NOTES.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of 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.

STATE OF GEORGIA,

Fulton County.

I, W. L. Callahan Ordinary of said county, do certify that I am well acquainted with Henry L. Hoover 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 10th day of February 1896

W. L. Callahan

Ordinary

Fulton County.

STATE OF GEORGIA,

Fulton County.

I, W. L. Callahan Ordinary of said County, do certify that I am well acquainted with Henry L. Hoover 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 23rd day of Feb 1896.

W. L. Callahan

Ordinary

Fulton County.

1890.

Hoover, H. L.

APPLICATION FOR ALLOWANCE.

Dis' by body from

Applicant, H. L. Hoover

County, Fulton

Amount, 50.00

Date of warrant, Feb 10

Entered on record

Feb 10

1896

WARRANT HANDED TO

Applicant

Hoover, H. L.
Fulton
1891

PAID 1891

Application for Allowance

FOR THE YEAR ENDING OCTOBER 31, 1891.

Hoover, H. L.

Applicant, H. L. Hoover

County, Fulton

Amount, 50.00

Date of Warrant, Feb 10

Entered on record

Feb 10

1896

WARRANT HANDED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta, Ga.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears Henry L. Horn of Fulton county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the

day of 1868; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 7, of 2nd Regiment of Georgia Volunteers William's Brigade; that whilst engaged in such military service, at the battle of Richmond in the State of Virginia on the 29th day of August 1862, he was

wounded as follows: Lost the right hand of the right arm and right leg of the right arm rendering him incapable of performing the ordinary manual operations of life

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 75 dollars.

Sworn to and subscribed before me, this 10th day of February 1890.

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

KNOW ALL MEN BY THESE PRESENTS, That I

of Fulton 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 for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of February 1890.

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears Henry L. Horn of Fulton 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 1868; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 7, of 2nd Regiment of Georgia Volunteers William's Brigade; that whilst engaged in such military service at the battle of Richmond in the State of Virginia on the 29th day of August 1862, he was

wounded as follows: Lost the right hand of the right arm and right leg of the right arm rendering him incapable of performing the ordinary manual operations of life

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of 75 dollars, for 1890.

Sworn to and subscribed before me, this 23rd day of Feb 1891.

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

Know all Men by these Presents, That I

of Fulton County, State of Georgia, do hereby appoint

my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 23rd day of Feb 1891.

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

P. O.

County, Georgia.

STATE OF GEORGIA,

Fullon County.

I, *W. L. Leatham* Ordinary of said county, do certify that I am well acquainted with *W. L. Leatham* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this *10* day of *March* 189*2*.

Ordinary

County.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1901

Name *W. L. Leatham*

County *Fullon*

Disability *Body Maimed*

Amount, \$ *50*

Entered on record *met 10*

1892.

W. H. HARRISON.

Secretary of Pension Department

AGENT.

Application

Geo. W. Harrison, State Printer, Atlanta, Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA, }

County, }

Know all Men by these Presents, That I, _____ of _____ County, State of Georgia, do hereby appoint

_____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1893.

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by _____

STATE OF GEORGIA to _____ County, Georgia.

P. O.

Fullon Co
Henry H. L.
1893.

No. *1162*
Application for Allowance

Body Maimed
Fullon
Amount, 50
Date of Warrant, 3/10
Entered on record, 3/10
Warrant Handled by
Application

STATE OF GEORGIA

FOR APPLICANTS HEREFORE ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears Fuller County, H. L. Hoover of Fuller 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 1868; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 1st of 2 th Regiment of Georgia Volunteers Chapman's Brigade; that whilst engaged in such military service at the battle of Richmond in the State of Virginia, on the 29 day of August, 1862, he was wounded as follows:

Wounded through the bowels of hip & rendering him practically incompetent to perform the ordinary manual vocations of life

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

Five Dollars for 1891

Sworn to and subscribed before me this 10 day of March, 1892.

W. L. Leachman Ordinary.

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Know all Men by these Presents, That I,

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 10 day of March, 1892.

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to County, Georgia. P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears Fuller County, H. L. Hoover of Fuller 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 1868; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 1st of 2 th Regiment of Georgia Volunteers Chapman's Brigade; that whilst engaged in such military service at the battle of Richmond in the State of Virginia, on the 29 day of August, 1862, he was wounded as follows:

gun shot through the bowels and hip rendering him practically incompetent to perform the ordinary manual vocations of life

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

Five dollars, for 1891

Sworn to and subscribed before me, this 16 day of March, 1892.

W. L. Leachman Ordinary.

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

PERSONALLY appears Fuller County, H. L. Hoover of Fuller 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 1868; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 1st of 2 th Regiment of Georgia Volunteers Chapman's Brigade; that whilst engaged in such military service at the battle of Richmond in the State of Virginia, on the 29 day of August, 1862, he was wounded as follows:

gun shot through the bowels and hip rendering him practically incompetent to perform the ordinary manual vocations of life

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

Five dollars, for 1891

Sworn to and subscribed before me, this 16 day of March, 1892.

W. L. Leachman Ordinary.

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

Know all Men by these Presents, That I,

of

County, State of Georgia, do hereby appoint

of _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1894.

Executed in the presence of us

[L. S.]

DIRECTIONS.

Send money to me as follows, by _____

to _____
County, Georgia.

P. O.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

Know all Men by these Presents, That I, _____ of _____

County, State of Georgia, do hereby appoint

of _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1896.

Executed in presence of us

[L. S.]

DIRECTIONS.

Send money to me as follows, by _____

to _____
County, Georgia.

P. O.

Hoover, H. L.
(For These Already Enrolled.)
No. 1184
Soldier's Pension.
1894.

Name *H. L. Hoover*
County *Fulton*
Disability *Body wound*
Amount, \$ *50*

3/12 1894.
W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO
Applicant
Geo. W. Harrison, State Printer, ALABAMA.

SOLDIER'S PENSION.
1895.

(For These Already Enrolled.)

No. *66*

Name *H. L. Hoover*
County *Fulton*
Disability *Body wound*
Amount, \$ *50*

3/14 1895.
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Applicant
Geo. W. Harrison, State Printer, ALABAMA.

No Later

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

PERSONALLY appears H. L. Hoover of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18 68; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company F, of 2nd Regiment of Tennessee Volunteers, Cleburne's Brigade; that whilst engaged in such military service at the battle of Pickens in the State of Ky, on the 29th day of August, 1862, he was wounded as follows: gun shot wound through the bowels and hip and rendered him practically incompetent to perform the ordinary manual vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of Fifty dollars, for the year 1893.

Sworn to and subscribed before me, this, 13th day of March, 1894.
W. L. Calhoun Ordinary

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }

Fulton County. }

I, W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with H. L. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 13th day of March, 1894.



W. L. Calhoun
Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

Personally appears H. L. Hoover of Fulton

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18 68; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company F, of 2nd Regiment of Penn. Volunteers, Cleburne's Brigade; that whilst engaged in such military service at the battle of Pickens in the State of Kentucky, on the 29th day of August, 1862, he was wounded as follows: gunshot wound through the bowels and rendered him practically incompetent to perform the ordinary manual vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of Fifty dollars, for the year 1894.

Sworn to and subscribed before me, this, 13th day of March, 1895.
W. L. Calhoun Ordinary

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }

Fulton County. }

I, W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with H. L. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 13th day of March, 1895.



W. L. Calhoun
Ordinary Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 1896.

[L. S.]

Executed in presence of us _____

Hoover, H. L.
Fulton

ATTEST:
(For Those Already Enrolled.)

No. 270

SOLDIER'S PENSION.
1896.

Name *H. L. Hoover*

County *Fulton*

Disability *Body wounds*

Amount, \$ *3/4*

1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDY TO

affet

Geo. W. Harrison, State Printer, Atlanta.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 1897.

[L. S.]

Executed in presence of _____

Hoover, H. L.
Fulton Co
as before

(For Those Already Enrolled.)

No. 633

INVALID
SOLDIER'S PENSION.
1897.

Name *H. L. Hoover*

County *Fulton*

Disability *Body wounds*

Amount, \$ *50.00*

1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDY TO

affet

Geo. W. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County. }

Personally appears H.L. Hoover of Fulton

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 18⁸⁰; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company F, of 2nd Regiment of Tennessee Volunteers, Cleburne's Brigade; that whilst engaged in such military service in the State of Kentucky, on the 28th day of August 1862, he was wounded, injured or diseased as follows: a gun shot wound through the bowels and hip and rendering him practically incompetent to perform the ordinary manual vocation of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Fulton county been allowed a pension of Fifty dollars, for the year 1895.

Sworn to and subscribed before me, this, the

26th day of Feb'y 1896.

M. L. Calhoun, Clerk

NOTE—State fully the nature of wound or character of disease which caused the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }
Fulton County. }

I, M.L. Calhoun

Ordinary of said County,
H.L. Hoover

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 26th day of Feb'y 1896.



M. L. Calhoun

Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County. }

Personally appears H.L. Hoover of Fulton

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1865; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company F, of 2nd Regiment of Tennessee Volunteers, Cleburne's Brigade; that whilst engaged in such military service in the State of Kentucky, on the 29th day of Aug 1862, he was wounded, injured or diseased as follows:

Gun shot wound through the bowels and hip and rendering him practically incompetent to perform the ordinary manual vocation of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Fulton county been allowed an invalid pension of Fifty Dollars, for the year 1896.

Sworn to and subscribed before me, this, the

23 day of Feb'y 1897.

M. L. Calhoun, Clerk

NOTE—State fully the nature of wound or character of disease which caused the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }
Fulton County. }

I, H. H. Halsey

Ordinary of said County,

do certify that I am well acquainted with H.L. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 23rd day of Feb'y 1897.



H. H. Halsey

Ordinary Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1898.

[L. S.]

Executed in presence of _____

Hawley, H. R.
Gulton &
ACT OF MARCH 1891.
(For Those Already Enrolled.)
No. *2228*
**INVALID
SOLDIER'S PENSION.
1898.**
Name *H. R. Hawley*
County *Gulton*
Disability *Body injured*
Amount, \$ *50.00*
2/19 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

apch

SEE IN ORIGINAL, STATE PRINTING OFFICE.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1899.

[L. S.]

Executed in presence of _____

Hawley, H. R.
Gulton &
ACT OF MARCH 1891.
(For Those Already Enrolled.)
No. *1848*
**INVALID
SOLDIER'S PENSION.
1899.**
Name *H. R. Hawley*
County *Gulton*
Disability
Amount, \$ *50.00*
3/8 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

apch

SEE IN ORIGINAL, STATE PRINTING OFFICE.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears A. G. Hoover of Fulton 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 1868; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company C, of 2nd Regiment of Tenn Volunteers, Cabane's Brigade; that whilst engaged in such military service in the State of Tenn, on the 29th day of Aug, 1862, he was wounded, injured or diseased as follows:

Spine shot through in the back and in the

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 20th, 1898. I have heretofore under said law as a resident of Fulton county been allowed an invalid pension of 50 Dollars, for the year 1897.

Sworn to and subscribed before me, this, 19th day of July, 1898. POST-OFFICE W. H. Murray

Note.—State fully the nature of wound or character of disease which caused the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, A. G. Hoover Ordinary of said County, do certify that I am well acquainted with A. G. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 19th day of July, 1898.

W. H. Murray
Ordinary Fulton County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears A. G. Hoover of Fulton 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 1868; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company C, of 2nd Regiment of Tenn Volunteers, Cabane's Brigade; that whilst engaged in such military service in the State of Tenn, on the 29th day of Aug, 1862, he was wounded, injured or diseased as follows:

Wounded in bowels & hip.

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1898. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of 50 Dollars, for the year 1897.

Sworn to and subscribed before me, this, 19th day of March, 1899. POST OFFICE W. H. Murray

Note.—State fully the nature of wound or character of disease which caused the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, A. G. Hoover Ordinary of said County, do certify that I am well acquainted with A. G. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 19th day of March, 1899.

W. H. Murray
Ordinary Fulton County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1900.

[L. S.]

Executed in presence of _____

CODE SECTION 124

(For Those Already Enrolled.)

No. 562

INVALID

SOLDIER'S PENSION.

1900.

Name *H. L. Hoover*

County *Fulton*

Disability _____

Amount, \$ *50*

Warrant issued *July 5* 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

574

Geo. W. Harrison, State Printer, Atlanta.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____ day of _____ 1901.

STATE OF GEORGIA

[L. S.]

Executed in presence of _____

CODE SECTION 124

(For Those Already Enrolled.)

No. 218

DISABLED

SOLDIER'S PENSION.

1901.

Name *H. L. Hoover*

County *Fulton*

Disability *Wounded in War*

Amount, \$ *50*

Warrant issued *July 16* 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

574

Geo. W. Harrison, State Printer, Atlanta.

No date

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears H. L. Hoover of Fulton 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 1868; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company 4, of 2nd Regiment of Tenn Volunteers, Clayton's Brigade; that whilst engaged in such military service in the State of Scy, on the 29th day of August 1862, he was wounded, injured or diseased as follows:

Wounded in hip & bowels

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 Fulton County been allowed an invalid pension of Dollars, for the year 189 .

Sworn to and subscribed before me, this, 26th day of March, 1900. POST OFFICE Atlanta

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, W. H. Adams Ordinary of said County, do certify that I am well acquainted with H. L. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 5th day of March, 1900.

Ordinary Fulton County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears H. L. Hoover of Fulton 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 1868; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company 7, of 2nd Regiment of Tenn Volunteers, Clayton's Brigade; that whilst engaged in such military service in the State of Ga, on the 29th day of August 1862, he was wounded, injured or diseased as follows:

Wounded in hip & bowels

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of Dollars, for the year 1900.

Sworn to and subscribed before me, this 15th day of January, 1901. POST OFFICE Atlanta

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,

Fulton County.

I, John R. Wickham Ordinary of said County, do certify that I am well acquainted with H. L. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15th day of January, 1901.

Ordinary Atlanta County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____

day of _____ 1902.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____

day of _____ 1903.

[L. S.]

Executed in presence of _____

Hoover, H. L.

No. 137

DISABLED

SOLDIER'S PENSION

1902.

Name H. L. Hoover

County Fulton

Co. 2nd Regiment

Disability Arm and leg

Amount, \$ 50.00

11/24 1902

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

C. H. Hoover

Gen. W. H. Harrison, 10th Prison, Alabama.

No data

Hoover, H. L.

(FOR THOSE ALREADY ENROLLED.)

No. 110

DISABLED

SOLDIER'S PENSION

1903.

Name H. L. Hoover

County Fulton

Co. 2nd Regiment

Disability Arm and leg

Amount, \$ 50.00

11/24 1903

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

C. H. Hoover

Gen. W. H. Harrison, 10th Prison, Alabama.

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton County.

Personally appears W. L. Hoover of Fulton 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 1868; 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 F, of 2nd Regiment of 1st Volunteers, Claborn's Brigade; that whilst engaged in such military service in the State of Ky, on the 29th day of Aug 1862, he was wounded, injured or diseased as follows:

Wounded in hip & bowels

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 Fulton County, been allowed an invalid pension of Eighty Dollars, for the year 1901.

Sworn to and subscribed before me, this 1st day of JAN 1902, at Post-office W. L. Hoover

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,
Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with W. L. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 13 1902.

John R. Wilkinson Fulton County.
Ordinary.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1902.



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton County.

Personally appears W. L. Hoover of Fulton 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 1868; 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 F, of 2th Regiment of 1st Volunteers, Claborn's Brigade; that whilst engaged in such military service in the State of Ky, on the 29 day of Aug 1862, he was wounded, injured or diseased as follows:

Wounded in hip & bowels

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of 50 Dollars, for the year 1902.

Sworn to and subscribed before me, this 1st day of JAN 1903, at Post-office W. L. Hoover

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,
Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with W. L. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 13 1903.

John R. Wilkinson Fulton County.
Ordinary.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1903.



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

to receive and receipt for the pension paid hereon, and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 1904.

[L. S.]

Executed in the presence of _____

Audited Feb. 20 1889.

Wm. A. Mighel
COMPTROLLER GENERAL

Fulton

Maimed Soldiers.

Voucher No. 168

Amount \$50.

Paid to H. L. Hoover

For General disability

from 1889 to 1889

Feb. 20 1889

Included in Warrant No. _____
issued to Treasurer

1889

WARRANT CLERK

W. J. Campbell, State Printer, Constitution Job Office

Applicant

Hoover H. L.
Fulton Co

COUS SECTION 1200.
(FOR THOSE ALREADY ENROLLED.)

No. 114

DISABLED

SOLDIER'S PENSION
1904.

Name *H. L. Hoover*

County *Fulton*

Co. *F* Regiment *2 Heavy*

Disability *maimed in battle*

Amount \$ *Fifty*

1/2 of 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDER TO

Alph

JOHN W. LINDSEY, Commissioner, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears H. L. Hoover of Fulton 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 1868; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 7, of 2th Regiment of Volunteers Catkins's Brigade; that whilst engaged in such military service in the State of Georgia, on the 29 day of Aug 1862, he was wounded, injured or diseased as follows:

Wound in hip & femur

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1904. I have heretofore, under said law, as a resident of 50 Fulton County, been allowed an invalid pension of 50 Dollars, for the year 1903.

Sworn to and subscribed before me, this 21 day of JAN 21 1904, 1904.

J. P. Williams
Post-office Fulton

I, J. P. Williams, 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,

Fulton. County.

I, John R. Wilkinson, Ordinary of said County, do certify that I am well acquainted with H. L. Hoover the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this JAN 21 1904 day of JAN 21 1904, 1904.

J. P. Williams
Ordinary Fulton County.



NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January, 1, 1904.

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 768

Atlanta, Ga Feb 20 1889

Mr. H. L. Hoover of the County Fulton having filed his application in the Executive Department for an allowance under the Act approved October 24, 1867, as amended by Act

Dec. 24, 1888, and the same having been allowed for Several disability from body wound He is entitled to receive the sum of 50 Dollars for such disability, the same being an allowance due for the year ending October 24, 1889.

The Treasurer will pay the same and hold the receipt on this voucher, and return same to Executive Department for warrant.



By the Governor W. H. Warner

GOVERNOR

CLERK EXECUTIVE DEPARTMENT.

50.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

50 per above voucher, this

Dollars 1889

20 of Feb 20 H. L. Hoover

Adm
Post
here

day of

John Robertson
Ordinary
Fulton County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must be dated after January 1, 1864.

Audited

18

COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. 716

Amount \$ 50

Paid to Henry L. Hoover
For Disabled by
Body wound
July 10 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK.

W. J. Campbell, State Printer, Constitution Job Office.

Applicant

Audited

1891.

COMPTROLLER GENERAL.

1891.

Maimed Soldiers.

Voucher No. 1574

Amount \$ 50

Paid to Henry L. Hoover
For Disabled by
Body wound
July 10 1891

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

No. 716
STATE OF GEORGIA.
EXECUTIVE DEPARTMENT.

Atlanta, Ga., July 10 1890

Mr. Henry L. Hoover of the County
of Fulton 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

Disability by wound
He is entitled to receive the sum of Fifty 00/ Dollars
for such disability, the same being the allowance for the year ending October 24, 1890

The Treasurer will pay the same and hold his receipt on this voucher, and return same
to Executive Department for warrant

By the Governor,

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/

per above voucher, this

10 of July 1890
H. L. Hoover

1891.

No. 1574
STATE OF GEORGIA.
EXECUTIVE DEPARTMENT.

Atlanta, Ga., July 24 1891.

Mr. Henry L. Hoover of the County
of Fulton 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

Disability by bad exposure
He is entitled to receive the sum of Fifty 00/ Dollars
for such disability, the same being the allowance for the year ending October 24, 1891

The Treasurer will pay the same and hold his receipt on this voucher and return same to
Executive Department for warrant.

By the Governor,

W. H. Harrison

Sec'y EXECUTIVE DEPARTMENT.

\$ 50

RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

Fifty

per above voucher, this

24 of July 1891.
H. L. Hoover

State of Tennessee } J. M. Bearden
Rutherford County } Chancellor of the
4th Chancery Division of said
State hereby certify that
Richard Mackley, whose genu-
ine signature appears to the
foregoing, is now and
was at the date of executing these
obedient Master of the Chancery
Court of said County, duly ap-
pointed and qualified. And
that all his official acts are
entitled to full faith and credit.
Witness my hand and
seal of said Court, this
the 27th day of April, 1888
Walter S. Bearden
Chancellor & R. W. Dunn

Walter S. Bearden
Chancellor H¹st Division Tenn

*D. K. 1926-E-
Hopsan Susan
240 Popper St.
Fulton Co*

WIDOW'S APPLICATION

Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920.

County Fulton
Name Susan Hopsan
Widow of Haywood Hopsan
Date of Marriage Feb 8 1878
Company _____
Regiment Wheeler's Cal.
Approved John W. Clark

OCT 25

Chas. Macomber,
Commissioner of Pensions.

10-30-25-E-

STATE OF GEORGIA.

Fulton COUNTY.

Ordinary's Certificate

I, Optim Runcul
that I know Susan Hopsan

Ordinary of said County, do certify 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 she is now residing at*

the residence of her mother, that both of whom are now residents of said County and were duly sworn to by her before signing the foregoing affidavit and testimony the truth.

Given under my hand and official seal of Office this 14 day of Sept 1925.

(SEAL OF ORDINARY)

John W. Clark Ordinary.
County Fulton

Instructions:

1. Before any application is made, the Ordinary shall swear applicant under a three in the following words: "You are solemnly sworn to give true and correct answers to all the questions asked you and the evidence you shall give will be the truth only. So help you God."
2. Only widows who were married prior to January 1st, 1920, are eligible for pension.
3. Only widows who were married prior to January 1st, 1920, are eligible for pension.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the applicant or witness.
5. Affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the applicant or witness.
6. Affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the applicant or witness.
7. Affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the applicant or witness.
8. Affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the applicant or witness.
9. Affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the applicant or witness.
10. Affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the applicant or witness.

1926-E-
Hobbs
345 of Cooper St.
Fulton Co.
Fulton Co.

WIDOW'S APPLICATION

Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920.

County Fulton
Name Susan Hopson
Widow of Haywood Hopson
Date of Marriage Feb 8 1898
Company Wheeler's Caval
Regiment 1st
Approved John W. Toland

Commissioner of Pensions

10-30-25-E-

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.

I, William R. McRobert, Ordinary of said County, do certify that I know Susan Hopson she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know the widow who swears to the service of husband; that she is both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavit; and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 16 day of Oct 1925.
(SEAL OF ORDINARY) Wm. R. McRobert Ordinary.
of Fulton County

Instructions:

- Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
- Only widows who married prior to January 1st, 1865, are entitled.
- All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
- Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
- Fill out the back of the application carefully.
- Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is preferred.

APPLICATION FOR PENSION BY A WIDOW

Under Act of 1910, as Amended by Act of 1919, and Constitutional Amendment of 1920

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA.

Fulton COUNTY.

Personally appears before me, Susan Hopson, of said State and County and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, and submits testimony to support the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

- What is your name, and where do you reside? (Give Post Office and County)
Susan Hopson, 345 Cooper St Atlanta
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia?
all my life
- When, where and to whom were you married?
Dodge Co. Ga, 1898
to Haywood Hopson
- Have you married since the death of first and soldier husband?
no
- When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.)
1864 from Dodge Co. served about
8 mos. in Wheeler's Cavalry
- 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?
no
- If he was not present, state specifically and clearly where he was?
At hospital near
- When did he leave the Command?
Northville, Ga. did near
- For what cause did he leave?
injured in service of 1865
- By whose authority did he leave?
transferred to hospital where
he was treated for over a year
- For how long was his leave of absence granted?
In what way?
- What was his physical condition when he left his command?
Wounded & crippled
- What effort did he make to return to his Command?
unable on acct of wound
- In what way was he prevented from going back to Command?
- Has he captured by the enemy at any time?
no
- If so, when and where? In what prison was he held and when was he released?
- When and where did your first husband die?
Wm. Co. Ga in 1906
- Were you residing together when he died?
yes
- If not, how long had you resided apart?
no
- Are you now a widow?
yes
- Have you or your husband heretofore been paid a pension by the State?
no
- If so, when and for what cause were you or your husband placed on the roll?
never applied

Sworn to and subscribed before me, this

13 day of Aug 1925
D. J. Shivers Ordinary
of Fulton County

(SEAL OF ORDINARY)

Susan (X) Hopson
Applicant
mark

WIDOW'S APPLICATION

Under Act of 1910—As Amended by Act of 1915, and Constitutional Amendment of 1920.

County _____
 Name _____
 Widow of _____
 Date of Marriage _____
 Company _____
 Regiment _____
 Approved _____

C. E. MCGREGOR,
 Commissioner of Pensions.

Ordinary's Certificate

STATE OF GEORGIA.

Colquitt COUNTY.

I, *R. A. Cooper*, Ordinary of said County, do certify that I know *C. J. Coleman*, the applicant for pension, that ~~she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know~~ the witness who swears to the service of husband; that ~~both of them are now~~ ^{she is} residents of said County and ~~were~~ ^{was} duly sworn by me before signing the foregoing affidavit, and that ~~they are~~ ^{he is} truthful and trustworthy and ~~their~~ ^{his} statements are entitled to full faith and credit.

Given under my hand and official seal of office this *15* day of *October*, 192*5*.
 (SEAL OF ORDINARY) *R. A. Cooper* Ordinary.
Colquitt County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

Questions for Witness as to Service of Husband and Marriage

STATE OF GEORGIA.

Colquitt COUNTY.

of said State and County is hereby presented as a witness in support of the application of Susan Hopson for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? C. J. Coleman
2. How long and since when have you known Susan Hopson applicant
since the year 1900
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? Brookley County, Ga. & he has resided in the State of Georgia ever since I knew her
4. When and to whom was she married? 2/2/78 with W. H. Hopson How do you know? being married
5. How long and since when did you know W. H. Hopson her husband? since the year 1900 until his death in 1907
6. When and where did W. H. Hopson the husband of applicant, die? Feb. 14, 1907, in Huron County, Ga.
7. Were the applicant and her husband living together as husband and wife at the date of his death? They were living together then and had been so living since I first knew them
8. If not, how long did they live apart before his death?
Were they divorced? No
9. When, where and in what Company and Regiment did W. H. Hopson enlist?
(Give date and place) No not know of this and following questions
10. How did you obtain your information of this service?
11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.)
12. When and where was his Command surrendered or discharged? (Give date and place.)
13. Were you personally present with this Command when it was surrendered?
If not, where were you _____ and how came you there? _____
14. Was the husband of applicant personally present with his Command at its surrender?
If not where was he? _____ and how came him there? _____
When, where and for what cause did he leave his Command? (Give date.) _____
By whose authority did he leave his Command? _____
and how long was he granted leave? _____
How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically.) _____
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?
16. What effort did he make to return to his Command and how do you know this? _____
17. Was he captured as a prisoner? _____ If so, when and where?
In what prison was he held? _____ and when released? _____

Sworn to and subscribed before me, this the
15 day of October, 1925.
C. J. Coleman Ordinary
of Colquitt County.

(SEAL OF ORDINARY)

C. J. Coleman
(Witness)

17. Was he captured as a prisoner? If so, when and where?
In what prison was he held? and when released?

Sworn to and subscribed before me, this the

15 day of October, 1925

of Dodge Ordinary
of Dodge County.

(SEAL OF ORDINARY)

B. J. Coleman
(Witness)



Hon. Alvin Haskins, Ord. Pulaski Co.
J. C. McAllister
S. D. BOWEN
ORDINARY DODGE COUNTY
D. O. Kelly
Telfair
(M. Ral.)

EASTMAN, GEORGIA

September 10th, 1925.

Mr. Claude C. Mason,
C. O. Ordinary, Fulton County,
Atlanta, Ga.

Dear Sir:-

Replying to the enclosed letter of the 3rd, ins't. beg to say,
that I am willing to aid in the matter in any way that I can, but, as a
matter of fact, you will see by referring to the Acts of 1870, that Dodge
County was created in the year 1870, one year after this good lady was
married, and before Dodge was formed. Dodge was made out of the counties
of Pulaski, ~~Montgomery~~ Montgomery and Telfair Counties. Under the cir-
cumstances, not knowing just which of those counties she married in, it
will likely be necessary for you to write each of the Ordinaries of
those respective counties, and one of them will have the record you want,
and I will state, I believe cheerfully give you the information sought.
I am,

Very truly yours,
S. D. Bowen
Ordinary, Dodge County.

Atlanta, Ga.
August 13th, 1925.

Personally appeared before the undersigned, Susan Hopson,
being duly sworn says that she does not know of any living
witnesses to the service of her husband Haywood Hopson, deceased.
In the Confederate Army.

That she has been to the Soldiers Home and other places,
making inquiry, and has failed to find any one competent to
testify as witnesses to the service of Haywood Hopson.

Susan Hopson
her
maiden

Sworn to and subscribed before
me, this 13th day of August, 1925.

Claude C. Mason
C. O. Ordinary.

D. O. KELLY

ORDINARY, TELFAIR COUNTY
MCRAE, GEORGIA

Sept the 18th, 1925

My dear Sirs: I am the Clerk of Ordinary of Fulton

County, Georgia.

When I have searched faithfully over the old Records of
Fulton County, for the record of Marriage of Haywood,
Hopsen, and I fail to find any such
Record. I have looked through the records and to
1867, and I fail to find any
Record. It appears to be kept regular.
I am sorry that I can't be of
more service to you. If you can give me the names of some people
who were married in Fulton County, it might be that I
can find the record. The records are proof of marriage by witnesses, and then
I can certify to the fact that I fail to find the
record. After searching, there ^{ought} to be a record in such cases.

With kindest regards I remain Yours, Truly

D. O. Kelly
Ordinary
Telfair Co. Ga.

GEORGIA, FULTON COUNTY.

Personally appeared Mrs. Susan Hopsen, who makes
affidavit that she has made diligent search, and has been
unable to find any witness to the service of her husband,
Haywood Hopsen, who was a Confederate Veteran.

Sworn to and subscribed
before me, this 23rd day
of October, 1925.

William B. Wooten
C. O. Ordinary

Susan Hopsen

J. C. McALLISTER
ORDINARY MONTGOMERY COUNTY
MT. VERNON, GA.

Sept. 15, 1925.
Judge Thomas H. Dyer
Atlanta, Ga.

Dear Sir:-

In reply to yours of the 14th inst.
beg to say I have made a
thorough search of the marriage
records of this office, and do
not find any record of the
marriage of Lucie Rogers and
Herwood Hopson. If they married
in this County, they might have
got their license in an adjoining
County, DeKalb, Lawrence, Emanuel
or Talnall. I have no recollection
of any one living in this County
by the name of Hopson. and
sorry I have not the record for
you.
I guess you can get affidavit

J. C. McALLISTER
ORDINARY MONTGOMERY COUNTY
MT. VERNON, GA.

from someone who knew of her
marriage, and get her applica-
tion through O. K.

Very truly yours,
J. C. McAllister.

September 14, 1925.

Hon. D. O. Kelly,
Ordinary Polkair County,
Macon, Ga.

Dear Judge:

We are assisting the widow of a Confederate Veteran to secure a Confederate Widow's Pension and, in order to complete her application, it will be necessary that she attach thereto a certified copy of her marriage record.

She states that her maiden name was Susie Rogers and that she was married to Raywood Hopson in your County in 1869. If this marriage is recorded in your County and you can furnish Mrs. Hopson with a copy of same, without charge, it will be greatly appreciated. I am sure, as she is entirely dependent and is in great need of the pension.

Kindly advise.

Very truly yours,

C. G. ORDINARY.

September 14, 1925.

Hon. J. C. Hamilton,
Ordinary Montgomery County,
Macon, Ga.

Dear Sir:

We are assisting the widow of a Confederate Veteran to secure a Confederate Widow's Pension and, in order to complete her application, it will be necessary that she attach thereto a certified copy of her marriage record.

She states that her maiden name was Susie Rogers and that she was married to Raywood Hopson in your County in 1869. If this marriage is recorded in your County and you can furnish Mrs. Hopson with a copy of same, without charge, it will be greatly appreciated. I am sure, as she is entirely dependent and is in great need of the pension.

Kindly advise.

Very truly yours,

ORDINARY

September 3, 1925.

Hon. Alger Haskins,
Ordinary Pulaski County,
Rockinghamville, Ga.

Dear Judge:

We are assisting the widow of a Confederate Veteran to secure a Confederate Widow's Pension and, in order to complete her application, it is necessary that she attach thereto a certified copy of her marriage record.

She states that her maiden name was Susie Rogers and that she was married to Raywood Hopson in your County in 1869. If this marriage is recorded in your County and you can furnish Mrs. Hopson with a copy of same, without charge, it will be greatly appreciated. I am sure, as she is entirely dependent and is in great need of the pension.

Kindly advise.

Very truly yours,

C. G. ORDINARY.

September 3, 1925.

Hon. S. P. Brown,
Ordinary Dodge County,
Rothman, Ga.

Dear Judge:

We are assisting the widow of a Confederate Veteran to secure a Confederate Widow's Pension and, in order to complete her application, it is necessary that she attach thereto a certified copy of her marriage record.

She states that her maiden name was Susie Rogers and that she was married to Raywood Hopson in your County in 1869. If this marriage is recorded in your County and you can furnish Mrs. Hopson with a copy of same, without charge, it will be greatly appreciated. I am sure, as she is entirely dependent and is in great need of the pension.

Kindly advise.

Very truly yours,

C. G. ORDINARY.

We are assisting the widow of a Confederate Veteran to secure a Confederate Widow's Pension and, in order to complete her application, it is necessary that she attach thereto a certified copy of her marriage record.

She states that her maiden name was Gussie Rogers and that she was married to Raywood Hopson in your County in 1866. If this marriage is recorded in your County and you can furnish Mrs. Hopson with a copy of same, without charge, it will be greatly appreciated, I am sure, as she is entirely dependent and in great need of the pension.

Kindly advise.

Very truly yours,

C.S. CHURCHMAN.

Veteran to secure a Confederate Widow's Pension and, in order to complete her application, it is necessary that she attach thereto a certified copy of her marriage record.

She states that her maiden name was Gussie Rogers and that she was married to Raywood Hopson in your County in 1866. If this marriage is recorded in your County and you can furnish Mrs. Hopson with a copy of same, without charge, it will be greatly appreciated, I am sure, as she is entirely dependent and in great need of the pension.

Kindly advise.

Very truly yours,

C.S. CHURCHMAN.

August 15, 1926.

Mr. Charlie Rodgers,
Eastman, Ga.

Dear Sir:

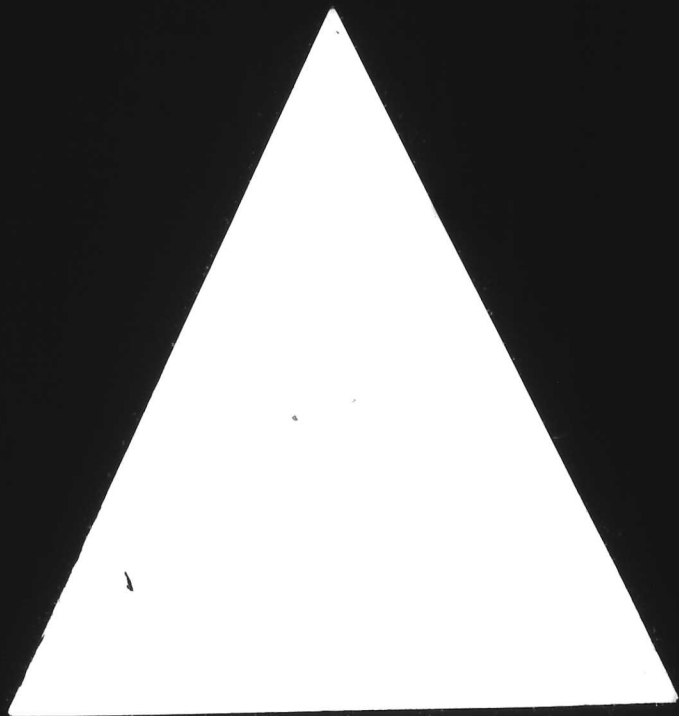
Mrs. Susan Hopson is seeking to complete her application for a widow's pension and, in order to do so, will have to secure the affidavit of someone who has known her for a number of years.

She gave us your name as an old friend of her husband and herself and we have, therefore, prepared the enclosed affidavit and will appreciate it if you will sign and swear to this affidavit before the Ordinary of your County (and have him attach his seal thereto) then return same to this office to be attached to Mrs. Hopson's application.

Your prompt attention to this matter will be appreciated by both Mrs. Hopson and this office.

Very truly yours,

C.S. CHURCHMAN.



Power of Attorney.

STATE OF GEORGIA.

County. }

I, _____, hereby authorize _____ of _____

to receive and receipt for the pension allowed, and request that he remit same to _____

at _____

by _____

Witness my hand and seal, this _____

day of _____

1900.

Executed in presence of _____

[L. S.]

No. _____

INDIGENT PENSION.

1800.

1902.

Name W. A. P. P. P.

County Lowndes

City Bay View

Approved _____ 1900.

JOHN W. LINDSEY,

Commissioner of Prisons.

WILLIAM HARRIS, JR.

Gen. W. Steadman, State Printer, Atlanta.

8/25-1902

Power of Attorney.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____ County, Georgia, to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ day of _____ 1900.

Witness my hand and seal, this _____ day of _____ 1900.

Executed in presence of _____

Questions for Applicant.

STATE OF GEORGIA,

County. }

I, W. H. Napson of said State and County, desiring to avail himself of the Pension Act (Section 1284, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (give State, County and post office) Sworn County Greenville, GA
2. How long and since when have you been a resident of this State? 53 years since 9 day of April 1847
3. When and where were you born? April 1847, Sworn County, GA
4. When and where and in what company and regiment did you enlist or serve? May 1864, 4th W. M. Cavalry, Co. F, 7 Regt. Cavalry
5. How long did you remain in such company and regiment? about two months
6. For how long a period did you discharge regular military duty? about 20 months
7. When, where and under what circumstances were you discharged from service? Were you with your command at the time? Had typhoid pneumonia and was laid up for 12 months, was not
8. What is your present occupation? Blacksmith
9. How much can you earn (gross) per annum by your own exertions or labor? nothing
10. What has been your occupation since 1865? Blacksmithing
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? None
12. If upon the first ground, state how long you have been in such condition that you could not support 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? Had typhoid pneumonia in June 1864 which caused my legs to become weak until I cannot walk without crutches
13. What property, effects or income do you possess, and its gross value? None
14. What property, effects or income did you possess in 1894, 1896, 1896, 1897, 1898 and 1899, and what disposition, if any, did you make of same? None
15. In what County did you reside during those years, and what property did you then return for taxation? Sworn County Returned nothing
16. How were you supported during the years 1896 and 1899? by my wife & children
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Cost about \$100 contributed now
18. What was your employment during 1896 and 1899? When pay did you receive in each year? don't know blacksmith & lived with son
19. Have you a family? If so, who composes such family? Give their means of support? My wife & 4 children they have no means of support
20. Are you receiving any pension? If so, what amount, and for what disability? none

Sworn to and subscribed before me this the _____ day of _____ 1900.

W. H. Napson Applicant.
J. J. Lee Ordinary,
Sworn County.

INDIGENT PENSION.

1890.

1900.

W. H. Napson

Sworn

J. J. LINDSEY,

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Pulaski COUNTY.

A M Donaldson of said State and County, having been presented as a witness in support of the application of W. H. Hagan for pension under Section 1254, Code, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? A M Donaldson
Pulaski County, Ga
2. Are you acquainted with W. H. Hagan the applicant; if so, how long have you known him? 25 years
3. Where does he reside, and how long and since when has he been a resident of this State? Marion County - since 1864 - I have known him since 1844 - when he was 7th Regt - 4th Div - 1st Corps - I was with him
4. When, where and in what company and regiment did he enlist, and how do you know? about May 1864 - Madison Co. - 7th Regt - 4th Div - 1st Corps - I was with him
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Were you present with command when discharged? from May until June about 2 months - being captured by Union - got a furlough to go back home - and before the expiration of furlough etc was sent
7. What property, effects or income has the applicant? (Give your means of knowledge.)
don't know but to the best of my knowledge - only a house - and I have known him all my life

8. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? don't know but he had
any

9. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
don't know but to the best of my knowledge - I have known him all my life

10. What is the applicant's occupation and physical condition? he is a Carpenter in
Quitman - does a little blacksmith work - sitting down
and is unable to stand on his feet

11. Is the applicant unable to support himself by labor of any sort, if so, why? he is unable
to support himself being a bad cripple

12. How was he supported during the years 1896 and 1899? don't know

13. What portion of his support for those two years was derived from his own labor or income?
don't know

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? he is a Carpenter in
Quitman - does a little blacksmith work - sitting down
and is unable to stand on his feet
and is unable to support himself being a bad cripple

15. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this 16th day of May 1900
A M Donaldson Witness.

P. M. Gaff Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Marion COUNTY.

Personally came before me C. H. McCor and J. H. Grewer both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully W. H. Hagan applicant for pension under Section 1254, Code, and after

such personal examination say that his precise physical condition is as follows:

He has Contusion of the tendons in
both feet with atrophy of the
muscles of the lower legs, rendering
him almost helpless and confining him to a
crutches all the time.

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 16 day of June 1900
J. H. Grewer Ordinary.

C. H. McCor
J. H. Grewer

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Marion COUNTY.

I, J. H. Grewer Ordinary in and for said County, hereby certify that the applicant W. H. Hagan resides in said County, and has been a bona fide resident of this State since the 1 day of Jan 1890 and that the witnesses, viz: William Hagan and J. H. Grewer 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 the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and before same was signed.

I further certify that the tax digests of Marion County show that no returned for taxation in his name in 1898 no of property, and in 1899 no Dollars of property.

In my opinion the foregoing claim is no made in good faith.

Witness my hand and seal of office, this 16 day of June 1900
J. H. Grewer Ordinary,
Marion County.

NOTE.
1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answer make to each of the questions asked of you and the evidence you shall give will be the whole truth, so help you God."
2. Additional affidavits may be attached if local custom are immaterial.
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.

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 Section 1254, Code? has a Cancer in his
intestines

15. What interest have you in the recovery of a pension by this applicant?

Sworn to and subscribed before me, this

the 16th day of May, 1902

Witness.

returned for taxation in his name in 1898.

of property, and in 1899 no Dollars of property.

In my opinion the foregoing claim is made in good faith.

Witness my hand and seal of office, this 16 day of June, 1902

J. J. [Signature] Ordinary,
of Green County.

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 forms are furnished.
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.

Received on Office 17/11/80
 2000 05
 and Not at Bill
 of Intensity unpermitted system

~~Hornely, Charles~~
~~Y. Lutter~~
~~Wm. for [illegible]~~

Confederate Soldier's Application.

UNDER ACT 1910.

County Guelter
Name Charles D. Hearnby
Company A
Residence 214 E. 4th

Approved: W. L. ...
Special Agent in Charge

9/3-10

Pension Office 11/25/10

and held at Point Lookout

Soldier's Application

UNDER ACT 1910.

Confederate

County Stullman

Name Charles H. Hornsby

Company A

Regiment 21st Va

Approved

W. LINDSEY,
Commissioner of Pensions

CHAS. F. STEIN, State Printer, Atlanta

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Stullman County, Charles H. Hornsby of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office)
Charles H. Hornsby, Stullman Co. Ga. East Point
2. How long and since when have you been a continuous resident citizen of this State?
73 years since 1838
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
Army of Confederate States
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
1861 June 17th, Campbell's Co. 2nd Artillery
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge)
4 years till 1st April 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service?
9th April 1865, Appomattox Va
7. Were you actually present with your Command when it was surrendered or discharged?
No
8. If you were not actually present, state specifically and clearly where you were was in prison at Point Lookout
9. a. Where was your Command when you left it?
Ran Petersburg Va
b. When did you leave the Command?
March 1865
c. For what cause did you leave?
State prisoner
d. By whose authority did you leave?
Nothing
e. For how long was your leave granted? In what way?
Nothing
f. Why did you not return to your Command after leave expired?
Nothing
g. In what way were you prevented?
Nothing
h. What effort did you make to return?
Nothing
i. Were you captured during the war?
Yes
j. If so, when, and where? In what prison were you held and when were you released?
March 1865, Ran Petersburg Va. Point Lookout, June 1865
10. 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.)
Nothing
11. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price?
Nothing
12. 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.)
Nothing
13. What annual or monthly income or earnings of yourself and wife and the source derived have you?
No income day laborer
14. Are you drawing a pension of any amount from this State or the United States?
No
15. Have you ever applied for the Georgia Pension and had it refused and for what cause it was not allowed?
No

Sworn to and subscribed before me, this

27th day of Sept, 1910, at Stullman County, Georgia
Charles H. Hornsby
Charles H. Hornsby

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Fulton County.

William J. Bullard

of said State and County is hereby presented as a witness in support of the application of E. D. Hornsby for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make the questions propounded, answers as follows:

1. What is your name and where do you reside? W. J. Bullard
Fulton Co. Ga.
2. How long and since when have you known E. D. Hornsby the applicant?
About 5 years since 1860
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? Fulton Co. Ga. since 1860
I have lived near him ever since with him
4. When, where and in what Company and Regiment did E. D. Hornsby fight during war from 1861 to 1865? (Give date and place) June 1861 Camp Bull Co. Ga
Co. 31st Ga. Reg.
5. How did you obtain your information of this Service? I was with him
in same Co.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) from June 17th 1861 till March 1865
7. When and where was his Command surrendered or discharged (give date and place) 9th April 1865 Appomattox Va.
8. Were you personally present at the Surrender? No. I was captured
9. If not, where were you and how came you there? I was in prison
captured the 6th day of April 1865
10. Was the applicant personally present with his Command at surrender? No
11. If not where was he and how came him there? In Prison
Captured about the 9th of March 1865
12. When did he leave his Command? 9th March 1865 Where was his Command when he left it? Near Petersburg for what cause did he leave? Captured
By whose authority did he leave? By the authority of the Command and how long was he granted leave? None 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? In Prison
How do you know?
14. What effort did he make to return to his Command and how do you know?

15. Was applicant captured as a prisoner. Yes If so, when and where? May March 1865
at Petersburg In what prison was he held? At the Libby Prison and when released?
after the surrender of the Army

Sworn to and subscribed before me, this the

27th day of Sept 1910

Harrell W. Hester Ordinary

Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.

Personally before me comes James M. Shaw who on oath says that he are residents residing in said County and we know E. D. Hornsby the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.)

No property

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) Nothing
2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant? None
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full value?

or was it made to obtain a pension?

Sworn to and subscribed before me, this the

27th day of Sept 1910

Harrell W. Hester Ordinary,

Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.

John Burcheson Ordinary of said County, certify that I know the applicant E. D. Hornsby for Pension is the person he represents himself to be and resides in said County. That I also know W. J. Bullard the witness swearing to the service and James M. Shaw who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavits and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of E. D. Hornsby shows that _____ and wife value for tax in 1908 \$ None for 1909 \$ None for 1910 \$ None

Sworn under my hand and official seal of office this 17th day of Oct 1910

John Burcheson Ordinary,

Fulton County.

NOTES 1. Before the questions are submitted the Ordinary shall require applicant and all witnesses to the following words and give them to the whole truth, so help you God.
2. Additional affidavits may be obtained if facts require so.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property he is in his possession, use or control of self and wife, affidavit of freeholders unnecessary.

13. In what way was he prevented from returning to this Command? Am. Prison
How do you know?

14. What effort did he make to return to his Command and how do you know?

15. Was applicant captured as a prisoner? Yes If so, when and where? 14th March 1905
Retained In what prison was he held? Rock Island and when released?
after the surrender of the Army

Sworn to and subscribed before me, this the 27th day of Sept 1910 at W. J. Brallard
Wassell & Anderson of Ill County.

That I also know W. J. Brallard the witness swearing to the
said County. That I also know James McLean who are freeholders, that
service and James McLean 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 W. J. Brallard shown that none and wife
value for tax is in 1908 \$ none for 1909 \$ none for 1910 \$ none

Sworn under my hand and official seal of office this 12th day of Oct 1910
John D. Braxton Ordinary,
of Will County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses to the following words
and give shall be the whole truth & help you God.
2. Additional affidavits may be attached if blank spaces are available.
3. All affidavits must be sworn before the Ordinary and certified by him.
4. If applicant has no property as all in his possession, use or control of self and wife, affidavit of freeholders
necessary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____, hereby authorize

to receive and receipt for the pension allowed, and request that he remit same to

by _____ at _____

Witness my hand and seal, this _____ day of _____ 1900.

Executed in presence of _____ [L. S.]

Hornby, J. M.
Fulton County

ODDE SEC. 1884.
(For Those Already Enrolled.)

NO. *570*

INDIGENT
SOLDIER'S PENSION,
1900.

Name *J. M. Hornby*
County *Fulton*

WARRANT ISSUED

Jan 18 1900.

JOHN. W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

M. H.
Geo. W. Harrison, State Printer, Atlanta.

Carl find

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of _____

to receive and receipt for the pension allowed, and request that he remit same to

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1900.

[L. S.]

Executed in presence of _____

CODE REC. 1904.
(For These Already Enrolled.)

NO. 570

INDIGENT

SOLDIER'S PENSION,

1900.

Name *J. M. Hornsby*
County *Fulton*

WARRANT ISSUED

July 17 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

J. M. Hornsby

Geo. W. Harrison, State Printer, Atlanta.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of _____

to receive and receipt for the pension allowed and request that he remit same to

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1901.

[L. S.]

Executed in presence of _____

CODE REC. 1904.
(For These Already Enrolled.)

No. 405

INDIGENT

SOLDIER'S PENSION.

1901.

Name *J. M. Hornsby*
County *Fulton*

WARRANT ISSUED

July 16 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

J. M. Hornsby

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears J. M. Hornsby of Fulton 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 _____ 1887; that he is 67 years old and by occupation a Printer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 3 years in Company 5, of 2nd Regiment of Miss. Bat.; that his physical condition is as follows:

General Debility

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 1900. I have heretofore as a resident of Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, the 17th day of January 1900, by J. M. Hornsby Ordinary.

State of Georgia,

Fulton County.

I, J. M. Hornsby Ordinary of said County, do certify that I am well acquainted with J. M. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 17th day of January 1900.



Ordinary Fulton County.

NOTE.—The blank spaces must be filled.
NOTE.—A Affidavit should not be attested before January 1st, 1901.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears J. M. Hornsby of Fulton 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 _____ 1887; that he is 68 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 3 years in Company 5, of 2nd Regiment of Miss. Bat.; that his physical condition is as follows:

General Debility

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 1901. I have heretofore as a resident of Fulton county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this the 3rd day of January 1901, by J. M. Hornsby Ordinary.

STATE OF GEORGIA,

Fulton County.

I, J. M. Hornsby Ordinary of said County, do certify that I am well acquainted with J. M. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 3rd day of January 1901.



Ordinary Fulton County.

NOTE.—The blank spaces must be filled.
NOTE.—A Affidavit should not be attested before January 1st, 1901.

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 Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, the 17th day of January 1900. J. M. Hornsby Ordinary.

State of Georgia,

Fulton County.

I, J. M. Hornsby Ordinary of said County, do certify that I am well acquainted with J. M. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 17th day of January 1900.



Ordinary Fulton County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1900.

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 Fulton county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this, the 3rd day of January 1901.

J. R. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton County.

I, J. R. Wilkinson Ordinary of said County, do certify that I am well acquainted with J. M. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 3rd day of January 1901.



Ordinary Fulton County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____ of _____

to receive and receipt for the pension allowed and request that he remit same to

_____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1902.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension allowed and request that he remit same to _____

at _____

by _____

Witness my hand and seal, this _____ day of _____, 1902.

[L. S.]

Executed in presence of _____

Howard G. M.

Fulton Co.

COULD NOT FIND
(FOR THOSE ALREADY ENROLLED.)

No. 67

INDIGENT

SOLDIER'S PENSION
1902.

Name *JM Kennedy*
County *Fulton*

Co. *G* Regiment *2nd*
Miss

WARRANT ISSUED

1/14 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

JM

John W. Lindsey, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J M Hornsby of Fulton.

County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of 1884; that he is 34 years old and by occupation a carpenter that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company 4, of 2nd Regiment of Miss; that his physical condition is as follows:

Good Ability

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 Fulton county been allowed a pension for the year 1 901.

Sworn to and subscribed before me, this the

day of JAN 13 1902.

J M Hornsby

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson,

Ordinary of said County,

do certify that I am well acquainted with J M Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 13 1902.

Ordinary

Fulton County.

Note.—The blank spaces must be filled.
Note.—Affidavits should not be attested before January 1st, 1902.



I, John H. Wilkinson, Ordinary of said County,
do certify that I am well acquainted with J M Homsey
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 13 1902 1902.



Ordinary

WILSON County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

STATE OF GEORGIA.
 POWER OF ATTORNEY.

STATE OF GEORGIA.

County of Fulton

To certify and record for the purpose allowed, and request that he send copies to the

Recorded in presence of _____ day of _____ 1898.

Witness my hand and seal this _____ day of _____ 1898.

RECORDED IN THE OFFICE OF THE CLERK OF THE SUPREME COURT

NOTARY PUBLIC

Witness my hand and seal this _____ day of _____ 1898.

Witness my hand and seal this _____ day of _____ 1898.

Witness my hand and seal this _____ day of _____ 1898.

Witness my hand and seal this _____ day of _____ 1898.

Witness my hand and seal this _____ day of _____ 1898.

Witness my hand and seal this _____ day of _____ 1898.

Witness my hand and seal this _____ day of _____ 1898.

INDIGENT PENSION

1898.

Name John W. Housley

County Fulton

Approved 5/9 1898.

RICHARD JOHNSON,

WARRANT HANDED TO

app

PRINTED BY THE STATE PRINTER, ATLANTA.

STATE OF GEORGIA.

-COUNTY.

I, _____, hereby authorize _____

of

to receive and receipt for the pension allowed, and request that he remit same to _____

at _____ by _____

Witness my hand and seal this _____ day of _____ 1898.

Executed in presence of)

-(L. S.)

STATE OF GEORGIA.

Fullton _____ County

John W. Hornsby 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).
John W. Hensley - Fulton County, Ga. P.O. Constitution
2. How long and since when have you been a resident of this State?
from 1862 to this County. lived here for fifty two years.
3. When and where were you born? In 1846 - Fulton Co., Georgia
4. When and where and in what company and regiment did you enlist or serve? in Company H. 42^d Ga. Cavalry in 1862 - served until close of war - enlisted in Fulton County
5. How long did you remain in such company and regiment? three years

9. For how long a period did you discharge regular military duty? *all the time I was in*
 10. *Wino, where and under what circumstances were you discharged from service?*
after the war was declared from Camp Douglas
in Illinois when I had been just a prisoner for 3 months.
 11. What is your present occupation? *Nothing new.*
 12. How much can you earn (gross) per annum by your own exertions or labor? *Nothing yet.*
 13. What has been your occupation since 1865? *Nothing else I can work.*
 14. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty" *age and poverty.*
 15. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? *My disease on something it hurts so that I can't do any more fingers or grasp anything to do any work, and this body is tired.*
 16. What property, effects or income do you possess, and its gross value? *None at all.*
 17. What property, effects or income did you possess in 1864, 1865, 1866 and 1867, and what disposition, if any, did you make of same? *None.*

16. In what County did you reside during those years, and what property did you then return for taxation?
De Kalb County but owned & returned no property for taxation
16. How were you supported during the years 1886 and 1897? *My wife & children were sustaining & sent little I sent to myself*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *About 100.00 contributed very little income 50.00*
18. What was your employment during 1886 and 1897? What pay did you receive in each year?
In 1886 nothing. In 1897 40 dollars per annum little or no support
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? *I have 1 wife & 4 children - the chief one is short & pale something to help on a little, working on railroad. The other 3 are small daughters & help for mother at home. I am making a few dollars per year*
20. Are you receiving any pension? If so, what amount, and for what disability?

Sworn to and subscribed before me this the

28 day of March 1909

day of _____, 1898

2. Accept

61

INDIGENT PENSION

1991

之

County -

Approved

RICHARD JOHNSON

WARRANT HANDLED TO

Relief

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

M. L. G. Culburn, of said State and County, having been presented as a witness in support of the application of John W. Kennedy for pension under the Act approved December 16th, 1891, and after being duly sworn, do hereby answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Atlanta, Ga.
2. Are you acquainted with John W. Kennedy the applicant; if so how long have you known him? Yes, from his arrival in this State 25 years.
3. Where does he reside; and how long and since when has he been a resident of this State? He resides in Fulton County, South East District; Eight years.
4. When, where and in what company and regiment did he enlist, and how do you know? By seeing him in the service; he was in the 1st Georgia Cavalry, was Captain of said company.
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About 2 1/2 years.
7. What property, effects or income has the applicant? (Give your means of knowledge.) He has no property, effects or income.

8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? None.

9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom? None that I know of.

10. What is the applicant's occupation and physical condition? He has no occupation and is crippled.

11. Is the applicant unable to support himself by labor of any sort; if so, why? Yes, he is unable to support himself, because he is crippled, his hands are useless, and he cannot do any work.

12. How has he been supported during the years 1896 and 1897? By his family.

13. What portion of his support for these two years was derived from his own labor or income? None.

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 16th, 1891. He was once a soldier in the Confederate Army, and was disabled by a wound in the back of his head, which rendered him unable to perform any manual labor.

15. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this 25th day of March 1898.

M. L. G. Culburn Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me John W. Kennedy and John P. Kennedy, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully

John W. Kennedy, applicant for pension under the Act of 1894, and after personal examination say that his present physical condition is as follows:

Inguinal rupture on left side.
and
condition such as to prevent him doing manual labor.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this 30th day of March 1898.

A. O. Bell M.D. Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I M. L. G. Culburn, Ordinary in and for said County, hereby certify that the applicant John W. Kennedy resides in said County, and has been a bona fide resident of this State since the 1st day of March 1898.

and that the witnesses, viz: M. L. G. Culburn J. A. Bell and John P. Kennedy are of trustworthy character, and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1896 none Dollars of property, and in 1897 none Dollars of property.

In my opinion the foregoing claim is not made in good faith.

Witness my hand and seal of office, this 30th day of March 1898.

M. L. G. Culburn Ordinary of Fulton County.

NOTE: When the questions are answered, the Ordinary shall read the applicant and the witnesses in the following words: "I shall now read to each of the questions asked of you, and the evidence you shall give will be the whole truth, as you say it." An additional affidavit may be attached if blank spaces are furnished. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____, hereby authorize

of _____

to receive and receipt for the pension allowed, and request that he remit same to

at _____

by _____

Witness my hand and seal this _____ day of _____ 1890.

Executed in presence of _____

(L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of _____

to receive and receipt for the pension allowed, and request that he remit same to

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1900.

Executed in presence of _____

(L. S.)

CODE SEC. 1264.

(For Those Already Enrolled.)

No. 478

INDIGENT

SOLDIER'S PENSION,

1899.

Name *John W. Lindsey*
County FULTON

WARRANT ISSUED

2/14 1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

Phot.

Geo. W. Harrison, State Printer, Atlanta.

No data

CODE SEC. 1264.

(For Those Already Enrolled.)

No. 1362

INDIGENT

SOLDIER'S PENSION,

1900.

Name *John W. Lindsey*
County FULTON

WARRANT ISSUED

July 23 1900.

JOHN. W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Phot.

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County.

Personally appears John H. Hornsby of FULTON

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 Birth day of 1846; that he is 52 years old and by occupation a General; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 years in Company K, of 42nd Regiment of Ga; that his physical condition is as follows:

General Ability

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 16th, 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 FULTON county been allowed a pension for the year 1898.

Sworn to and subscribed before me, this, the

14 day of January, 1899.

Ordinary.

State of Georgia,

FULTON County.

I, W. H. HULSEY

Ordinary of said County,

do certify that I am well acquainted with John H. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 24, 1899.

Ordinary FULTON

County.

Note.—The blank space must be filled.

Note.—A Affidavit should not be attested before January 1st, 1899.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County.

Personally appears John H. Hornsby of FULTON

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 Birth day of 1846; that he is 53 years old and by occupation a General; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 years in Company K, of 42nd Regiment of Ga; that his physical condition is as follows:

General Ability

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 16th, 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 Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, the

22 day of January, 1900.

Ordinary.

State of Georgia,

FULTON County.

I, W. H. HULSEY,

Ordinary of said County,

do certify that I am well acquainted with John H. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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, 1900.

Ordinary FULTON

County.

Note.—The blank space must be filled.

Note.—A Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

_____ of

to receive and receipt for the pension allowed and request that he remit same to

_____ at

by _____

Witness my hand and seal, this _____ day of _____ 1901.

[L. S.]

Executed in presence of

Notary John W. Lindsey
Indigent County

CODE SECTION 15A.

(For Those Already Enrolled.)

No. *488*

INDIGENT

SOLDIER'S PENSION.

1901.

Name

John W. Lindsey

County

Indigent

WARRANT ISSUED

1901.

Jan 14

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H.

Geo. W. Harrison, State Printer, Atlanta.

Ms. 100

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears John W. Hornsby of Fulton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of Jan 1846; that he is 54 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Geo) during the war between the States, and served for the term of 3 yrs in Company R, of 42 th Regiment of Geo; that his physical condition is as follows:

Gen Disability

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 1901. I have heretofore as a resident of Fulton county been allowed a pension for the year 1900

Sworn to and subscribed before me, this 5th day of January 1901, John W. Hornsby Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John D. Wilkerson Ordinary of said County, do certify that I am well acquainted with John W. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 13th day of Jan 1901.

John D. Wilkerson Ordinary Fulton County.



Note—The blank spaces must be filled.
Note—Affidavit should not be attested before January 1st, 1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension allowed and request that he remit same to

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1902.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension allowed, and request that he remit same to

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1907.

[L. S.]

Executed in presence of _____

INDIGENT

SOLDIER'S PENSION

1902.

Name *John W. Lindsey*
County *Fulton*

Co. *A* Regiment *42*

WARRANT ISSUED

1902.

114

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey

John W. Lindsey, State Prison, Atlanta.

no date

Hornby & W.

Fulton Co.

Cons. Service 1894.

(FOR THOSE ALREADY ENROLLED)

No. *194*

INDIGENT

SOLDIER'S PENSION

1907.

Name *J. H. Hornby*

County _____

Co. *26* Regiment *14*

WARRANT ISSUED

1907.

114

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey

John W. Lindsey, State Prison, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County. Fulton.
 Personally appears John W. Hornsby of Fulton.
 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 _____ 1846; 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 Ga) during the war between the States, and served for the term of 3 yrs in Company K of 4th Regiment of Ga; that his physical condition is as follows: Ignor Orbitely

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 Fulton. county been allowed a pension for the year 1901

Sworn to and subscribed before me, this _____ day of JAN 13 1902 John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton. County.)
 I, John R. Wilkinson, Ordinary of said County, do certify that I am well acquainted with J W Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 10 1902 John R. Wilkinson

Ordinary Fulton. County.

Note.—The blank spaces must be filled.
 Note.—Affidavit should not be attested before January 1st, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton. County.)
 Personally appears J W Hornsby of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1846; that he is 61 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company No. 148 th Regiment of Ga; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items _____

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of _____ County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this _____ day of _____ 1907 John R. Wilkinson Ordinary.

State of Georgia,

Fulton. County.)
 I, John R. Wilkinson, Ordinary of said County, do certify that I am well acquainted with J W Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 2 1907 John R. Wilkinson

Ordinary Fulton. County.

Note.—The blank spaces must be filled.
 Note.—Affidavit should not be attested before January 1st, 1907.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension allowed and request that he remit same to _____

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1903.

Executed in presence of _____ [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension allowed, and request that he remit same to _____

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1904.

Executed in the presence of _____ [L. S.]

Hornby, John W.
Fulton
CODE SECTION 154.
(FOR THOSE ALREADY ENROLLED.)

No. 58

INDIGENT

**SOLDIER'S PENSION
1903.**

Name *John W. Hornby*

County _____

Co. *A* Regiment *42nd*

WARRANT ISSUED

1/20 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

1/24

Geo. W. Harrison, State Printer, Atlanta.

no data

Hornby, John W.
Fulton
CODE SECTION 154.
(FOR THOSE ALREADY ENROLLED.)

No. 100

INDIGENT

**SOLDIER'S PENSION
1904.**

Name *John W. Hornby*

County *Fulton*

Co. *B* Regiment *42nd*

WARRANT ISSUED

1/20 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

1/24

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears John W. Cornsby of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1886; that he is _____ 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 3 yrs in Company H, of 12th Regiment of ga; that his physical condition is as follows: 3 & P

that his property consists of the following items: _____

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Fulton county been allowed a pension for the year 1 _____

Sworn to and subscribed before me, this the _____ day of JAN 1903.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with John W. Cornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this _____ day of JAN 1903.

John R. Wilkinson Ordinary _____ County.

Note.—The blank spaces must be filled.
Note.—An affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J. W. Cornsby of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1886; 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 3 yrs in Company H, of 12th Regiment of ga; that his physical condition is as follows: 3 & P

that his property consists of the following items: _____

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of _____ County been allowed a pension for the year 1 _____

Sworn to and subscribed before me, this the _____ day of _____ 1904.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with J. W. Cornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this JAN 20 1904 day of _____.

John R. Wilkinson Ordinary Fulton County.

Note.—The blank spaces must be filled.
Note.—An affidavit should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of _____

to receive and receipt for the pension allowed, and request that he remit same to

at _____

by _____

WITNESS my hand and seal, this _____ day of _____ 1905.

[L. S.]

Executed in the presence of _____

Horneady, J. M.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

No. *43*

INDIGENT

**SOLDIER'S PENSION
1905.**

Name *J. M. Horneady*
County *Fulton*
Co. *H. Regiment 42nd Reg.*

WARRANT ISSUED

44 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

WHL
THE FRANKLIN PRINTING AND LITHOGRAPH CO., ATLANTA, GA.

no date

Horneady, J. M.
Fulton Co.

(FOR THOSE ALREADY ENROLLED.)

No. *130*

INDIGENT

**SOLDIER'S PENSION
1906.**

Name *J. M. Horneady*
County *Fulton*
Co. *H. Regiment 42nd Reg.*

WARRANT ISSUED

45 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

WHL
THE FRANKLIN PRINTING AND LITHOGRAPH CO., ATLANTA, GA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of _____

to receive and receipt for the pension allowed, and request that he remit same to

at _____

by _____

WITNESS my hand and seal, this _____ day of _____ 1906.

[L. S.]

Executed in the presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J. St. Harnesby of Fulton

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 60 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 yrs. in Company A, of 42nd Regiment of Inf.; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items:

of the value of Dollars. I am now earning, by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion of 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 2 day of JAN, 1905. J. St. Harnesby Ordinary. mark

STATE OF GEORGIA.

Fulton County.

I, J. St. Harnesby Ordinary of said County,

do certify that I am well acquainted with J. St. Harnesby the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this JAN 2, 1905 day of , 1905.

Ordinary Fulton County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears J. St. Harnesby of Fulton

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 all his life 1846; that he is 60 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 yrs. in Company A, of 42nd Regiment of Inf.; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items:

of the value of Dollars. I am now earning by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion of labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 2 day of JAN, 1906. J. St. Harnesby Ordinary. mark

State of Georgia,

Fulton County.

I, J. St. Harnesby Ordinary of said County,

do certify that I am well acquainted with J. St. Harnesby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this JAN 1, 1906 day of , 1906.

Ordinary Fulton County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1906.

Ordinary _____ County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1906.



Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1906.

Ordinary John W. Wilkinson Fulton County.

NAME Hornsey, John W. YEAR 1898 COUNTY Fulton

WHEN AND WHERE BORN? In 1846 - Fulton County, Georgia

ENLISTED WHEN AND WHERE? 1862 - Fulton County

RANK

COMPANY AND REGIMENT? Company E, 42nd Georgia Regiment

NAME OF CAPTAIN AND COLONEL? W. L. Calhoun, Captain of same Company

WOUNDED?

CAPTURED, WHEN AND WHERE? Witness says applicant was captured in the battle of Jonesboro, Georgia and imprisoned at Camp Dougless, Illinois nine months

RELEASED? At Camp Dougless, Illinois at close of war.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? In prison

DIED, WHEN AND WHERE?

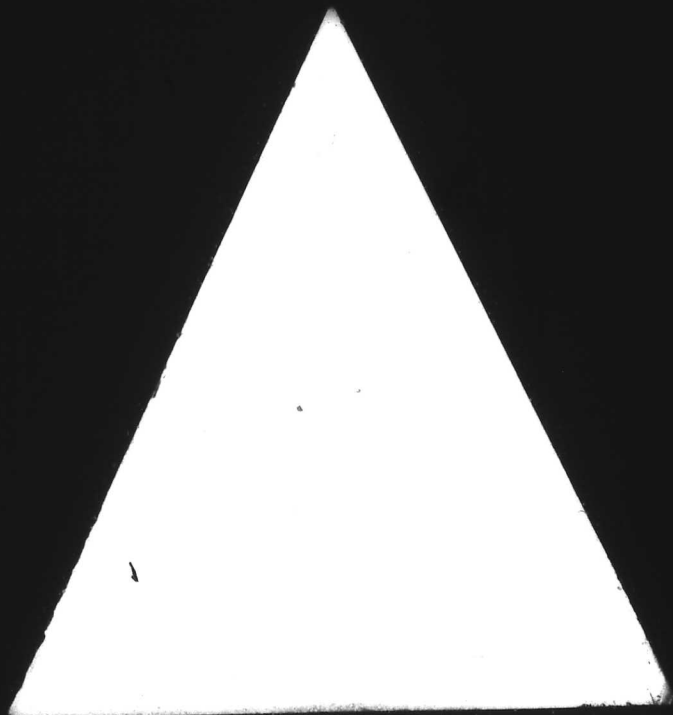
BURIED.

WITNESSES. None

BURIED.

WITNESSES. None

17



Excreted in presence of

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County

Personally came before me

W. Longine

both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully

Joseph L. Hornsby, applicant for pension under Section 1284,

Code, and after such personal examination say that his precise physical condition is as follows:

I have examined Joseph L. Hornsby and find him to be a man of about 48 years of age, of fair complexion, and of average height and weight. He is a native of Georgia, and has resided in this State since 1861. He is a member of the 30th Georgia Regiment, and has served in the Civil War. He is now a private in the 30th Georgia Regiment, and is entitled to a pension under Section 1284, Code.

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this 1st day of September, 1909.

John W. Longine, M.D. Ordinary

John W. Longine, M.D. Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County

I, John W. Longine, Ordinary, in and for said County, hereby certify that the applicant, Joseph L. Hornsby, resides in said County, and has been a bona fide resident of this State since the 1st day of 1861, and that the witness, viz., J. L. Hornsby, are of trustworthy character, and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions the applicant and each witness took the oath herein prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digest of County shows that applicant returned for taxation in his name in 1901. Dollars of property, and in 1903. Dollars of property; in 1904. Dollars of property; in 1905. Dollars of property; in 1906. Dollars of property; in 1907. Dollars of property; in 1908. Dollars of property; in 1909. Dollars of property.

In my opinion the foregoing claim is in good faith.

Witness my hand and seal of office, this 1st day of September, 1909.

John W. Longine, Ordinary, Fulton County.

NOTES.

1. Before any questions are answered, the Ordinary shall swear applicant, and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.

3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Campbell County

G. P. Longine

of said State and County, having been presented as a witness in support of the application of J. L. Hornsby for pension under section 1284, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? G. P. Longine-- Fairburn Ga.

2. Are you acquainted with J. L. Hornsby the applicant; if so, how long have you known him? Yes Sir. Have known him about 48 years--since 1861.

3. Where does he reside, and how long and since when has he been a resident of this State? In Fulton Co. Ga. About 48 years to my knowledge.

4. When, where and in what company and regiment did he enlist, and how do you know? Nov 1861 at Griswoldville Ga. in Co. "K"-- 30th Ga. Reg't-- Ga. Vol.

I was a member of same company.

5. Were you a member of the same company and regiment? Yes Sir.

6. How long did he perform regular military duty, about 2 3/4 years, or from Nov. 1861 to July 1864, at which latter time I was captured.

7. When and where was his command surrendered? I can't say because I was in Federal Prison at "Camp Chase" at close of war.

8. Were you present when it surrendered? No Sir. In Prison.

9. Was applicant present? No Don't know, but think he was also in Prison.

10. If he was not present, where was he? In Prison, I think.

When did he leave his command? Don't know. For what cause? Don't know.

By what authority he left? Captains, I think. How do you know all of this? I served in same company as did applicant, J. L. Hornsby, from Nov. 1861 to July 1864. After that I know not of his service, or course.

11. What property, estate or income has the applicant? (Give your means of knowledge.) Don't know, only know of his service.

12. What property, estate or income did the applicant possess in 1903, 1904, 1905, 1906, 1907, 1908 and 1909? Don't know.

and what disposition, if any, did he make of same?

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? Don't know.

14. What is the applicant's occupation and physical condition? Don't know.

15. Is the applicant unable to support himself by labor of any sort; if so, why? Don't know.

16. How was he supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? Don't know.

17. What portion of his support for these four years was derived from his own labor or income? Don't know.

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1284, Code. Can't do so, as I have not known much of him since the war.

19. Who composes family? What property have they? Children's ages and their earning capacity? Don't know.

20. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this 1st day of September, 1909.

G. P. Longine, Ordinary, Fairburn Ga.

John W. Longine, Ordinary, Fulton County.

John W. Longine, Ordinary, Fulton County.

John W. Longine, Ordinary, Fulton County.

John W. Longine, Ordinary, Fulton County.

John W. Longine, Ordinary, Fulton County.

John W. Longine, Ordinary, Fulton County.

John W. Longine, Ordinary, Fulton County.

John W. Longine, Ordinary, Fulton County.

John W. Longine, Ordinary, Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY

I,

hereby authorize

to receive and receipt for the pension allowed and request that he remit same to

at

by

Witness my hand and seal, this

day of

190

Executed in presence of

(L. S.)

INDIGENT PENSION

1907

Name

County

Age

Approved

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Ordinary will certify to the Applicant, Company and Regiment to which he is entitled above.

Order to which shall be paid.

930007

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY

Joseph L. Hornsby said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.)
Joseph L. Hornsby, late of Hornsby, Union County Ga
2. How long and since when have you been a resident of this State?
Sixty eight years, since May 23, 1841 to Sept 8, 1909
3. When and where were you born? May 23, 1841, Union County Ga
4. When and where and in what company and regiment did you enlist or serve?
Nov. 1861, Greenville Ga. Co. K 20th Ga Reg
5. How long did you remain in such company and regiment? From time of enlistment until captured by the U.S. Army at Nashville Tenn. in the Battle of Decatur Dec. 16, 1864
6. When and where was your company and regiment surrendered and discharged? Dec. 16, 1864, at Nashville Tenn. Discharged at Camp Chase Ohio June 2, 1865
7. Were you present with your company and regiment when it was surrendered? Yes, with the company
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was captured by the U.S. Army at Nashville Tenn. in the Battle of Decatur Dec. 16, 1864
9. How much did you take (cash) for addition to your own clothing or food? None
10. What has been your occupation since 1865? Farming & Lumbering
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Age & Poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight.
Now or six years

Every Question MUST Be Answered.

13. What property, real and personal, or income, do you possess, and its gross value? None
14. What property, real or personal, did you possess in 1903, 1904, 1905, 1906, 1907 and 1908 and what disposition, if any, by sale or gift, have you made of same? I owned no property during either of the years above mentioned
15. In what County did you reside during those years, and what property did you then return for taxation? I resided in Union County, No property for tax
16. How were you supported during the years 1903, 1904, 1905, 1906, 1907, 1908 and 1909? By the U.S. Government, my family's aid
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? Approximately \$100.00
18. What was your employment during 1903, 1904, 1905, 1906, 1907, 1908 and 1909? What pay did you receive in each year? Farming, Lumbering, etc. Family, Real Estate, my support
19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed? In the U.S. Army, 1861-1865, 1866-1867, 1868-1869, 1870-1871, 1872-1873, 1874-1875, 1876-1877, 1878-1879, 1880-1881, 1882-1883, 1884-1885, 1886-1887, 1888-1889, 1890-1891, 1892-1893, 1894-1895, 1896-1897, 1898-1899, 1900-1901, 1902-1903, 1904-1905, 1906-1907, 1908-1909, 1910-1911, 1912-1913, 1914-1915, 1916-1917, 1918-1919, 1920-1921, 1922-1923, 1924-1925, 1926-1927, 1928-1929, 1930-1931, 1932-1933, 1934-1935, 1936-1937, 1938-1939, 1940-1941, 1942-1943, 1944-1945, 1946-1947, 1948-1949, 1950-1951, 1952-1953, 1954-1955, 1956-1957, 1958-1959, 1960-1961, 1962-1963, 1964-1965, 1966-1967, 1968-1969, 1970-1971, 1972-1973, 1974-1975, 1976-1977, 1978-1979, 1980-1981, 1982-1983, 1984-1985, 1986-1987, 1988-1989, 1990-1991, 1992-1993, 1994-1995, 1996-1997, 1998-1999, 2000-2001, 2002-2003, 2004-2005, 2006-2007, 2008-2009, 2010-2011, 2012-2013, 2014-2015, 2016-2017, 2018-2019, 2020-2021, 2022-2023, 2024-2025, 2026-2027, 2028-2029, 2030-2031, 2032-2033, 2034-2035, 2036-2037, 2038-2039, 2040-2041, 2042-2043, 2044-2045, 2046-2047, 2048-2049, 2050-2051, 2052-2053, 2054-2055, 2056-2057, 2058-2059, 2060-2061, 2062-2063, 2064-2065, 2066-2067, 2068-2069, 2070-2071, 2072-2073, 2074-2075, 2076-2077, 2078-2079, 2080-2081, 2082-2083, 2084-2085, 2086-2087, 2088-2089, 2090-2091, 2092-2093, 2094-2095, 2096-2097, 2098-2099, 2100-2101, 2102-2103, 2104-2105, 2106-2107, 2108-2109, 2110-2111, 2112-2113, 2114-2115, 2116-2117, 2118-2119, 2120-2121, 2122-2123, 2124-2125, 2126-2127, 2128-2129, 2130-2131, 2132-2133, 2134-2135, 2136-2137, 2138-2139, 2140-2141, 2142-2143, 2144-2145, 2146-2147, 2148-2149, 2150-2151, 2152-2153, 2154-2155, 2156-2157, 2158-2159, 2160-2161, 2162-2163, 2164-2165, 2166-2167, 2168-2169, 2170-2171, 2172-2173, 2174-2175, 2176-2177, 2178-2179, 2180-2181, 2182-2183, 2184-2185, 2186-2187, 2188-2189, 2190-2191, 2192-2193, 2194-2195, 2196-2197, 2198-2199, 2200-2201, 2202-2203, 2204-2205, 2206-2207, 2208-2209, 2210-2211, 2212-2213, 2214-2215, 2216-2217, 2218-2219, 2220-2221, 2222-2223, 2224-2225, 2226-2227, 2228-2229, 2230-2231, 2232-2233, 2234-2235, 2236-2237, 2238-2239, 2240-2241, 2242-2243, 2244-2245, 2246-2247, 2248-2249, 2250-2251, 2252-2253, 2254-2255, 2256-2257, 2258-2259, 2260-2261, 2262-2263, 2264-2265, 2266-2267, 2268-2269, 2270-2271, 2272-2273, 2274-2275, 2276-2277, 2278-2279, 2280-2281, 2282-2283, 2284-2285, 2286-2287, 2288-2289, 2290-2291, 2292-2293, 2294-2295, 2296-2297, 2298-2299, 2300-2301, 2302-2303, 2304-2305, 2306-2307, 2308-2309, 2310-2311, 2312-2313, 2314-2315, 2316-2317, 2318-2319, 2320-2321, 2322-2323, 2324-2325, 2326-2327, 2328-2329, 2330-2331, 2332-2333, 2334-2335, 2336-2337, 2338-2339, 2340-2341, 2342-2343, 2344-2345, 2346-2347, 2348-2349, 2350-2351, 2352-2353, 2354-2355, 2356-2357, 2358-2359, 2360-2361, 2362-2363, 2364-2365, 2366-2367, 2368-2369, 2370-2371, 2372-2373, 2374-2375, 2376-2377, 2378-2379, 2380-2381, 2382-2383, 2384-2385, 2386-2387, 2388-2389, 2390-2391, 2392-2393, 2394-2395, 2396-2397, 2398-2399, 2400-2401, 2402-2403, 2404-2405, 2406-2407, 2408-2409, 2410-2411, 2412-2413, 2414-2415, 2416-2417, 2418-2419, 2420-2421, 2422-2423, 2424-2425, 2426-2427, 2428-2429, 2430-2431, 2432-2433, 2434-2435, 2436-2437, 2438-2439, 2440-2441, 2442-2443, 2444-2445, 2446-2447, 2448-2449, 2450-2451, 2452-2453, 2454-2455, 2456-2457, 2458-2459, 2460-2461, 2462-2463, 2464-2465, 2466-2467, 2468-2469, 2470-2471, 2472-2473, 2474-2475, 2476-2477, 2478-2479, 2480-2481, 2482-2483, 2484-2485, 2486-2487, 2488-2489, 2490-2491, 2492-2493, 2494-2495, 2496-2497, 2498-2499, 2500-2501, 2502-2503, 2504-2505, 2506-2507, 2508-2509, 2510-2511, 2512-2513, 2514-2515, 2516-2517, 2518-2519, 2520-2521, 2522-2523, 2524-2525, 2526-2527, 2528-2529, 2530-2531, 2532-2533, 2534-2535, 2536-2537, 2538-2539, 2540-2541, 2542-2543, 2544-2545, 2546-2547, 2548-2549, 2550-2551, 2552-2553, 2554-2555, 2556-2557, 2558-2559, 2560-2561, 2562-2563, 2564-2565, 2566-2567, 2568-2569, 2570-2571, 2572-2573, 2574-2575, 2576-2577, 2578-2579, 2580-2581, 2582-2583, 2584-2585, 2586-2587, 2588-2589, 2590-2591, 2592-2593, 2594-2595, 2596-2597, 2598-2599, 2600-2601, 2602-2603, 2604-2605, 2606-2607, 2608-2609, 2610-2611, 2612-2613, 2614-2615, 2616-2617, 2618-2619, 2620-2621, 2622-2623, 2624-2625, 2626-2627, 2628-2629, 2630-2631, 2632-2633, 2634-2635, 2636-2637, 2638-2639, 2640-2641, 2642-2643, 2644-2645, 2646-2647, 2648-2649, 2650-2651, 2652-2653, 2654-2655, 2656-2657, 2658-2659, 2660-2661, 2662-2663, 2664-2665, 2666-2667, 2668-2669, 2670-2671, 2672-2673, 2674-2675, 2676-2677, 2678-2679, 2680-2681, 2682-2683, 2684-2685, 2686-2687, 2688-2689, 2690-2691, 2692-2693, 2694-2695, 2696-2697, 2698-2699, 2700-2701, 2702-2703, 2704-2705, 2706-2707, 2708-2709, 2710-2711, 2712-2713, 2714-2715, 2716-2717, 2718-2719, 2720-2721, 2722-2723, 2724-2725, 2726-2727, 2728-2729, 2730-2731, 2732-2733, 2734-2735, 2736-2737, 2738-2739, 2740-2741, 2742-2743, 2744-2745, 2746-2747, 2748-2749, 2750-2751, 2752-2753, 2754-2755, 2756-2757, 2758-2759, 2760-2761, 2762-2763, 2764-2765, 2766-2767, 2768-2769, 2770-2771, 2772-2773, 2774-2775, 2776-2777, 2778-2779, 2780-2781, 2782-2783, 2784-2785, 2786-2787, 2788-2789, 2790-2791, 2792-2793, 2794-2795, 2796-2797, 2798-2799, 2800-2801, 2802-2803, 2804-2805, 2806-2807, 2808-2809, 2810-2811, 2812-2813, 2814-2815, 2816-2817, 2818-2819, 2820-2821, 2822-2823, 2824-2825, 2826-2827, 2828-2829, 2830-2831, 2832-2833, 2834-2835, 2836-2837, 2838-2839, 2840-2841, 2842-2843, 2844-2845, 2846-2847, 2848-2849, 2850-2851, 2852-2853, 2854-2855, 2856-2857, 2858-2859, 2860-2861, 2862-2863, 2864-2865, 2866-2867, 2868-2869, 2870-2871, 2872-2873, 2874-2875, 2876-2877, 2878-2879, 2880-2881, 2882-2883, 2884-2885, 2886-2887, 2888-2889, 2890-2891, 2892-2893, 2894-2895, 2896-2897, 2898-2899, 2900-2901, 2902-2903, 2904-2905, 2906-2907, 2908-2909, 2910-2911, 2912-2913, 2914-2915, 2916-2917, 2918-2919, 2920-2921, 2922-2923, 2924-2925, 2926-2927, 2928-2929, 2930-2931, 2932-2933, 2934-2935, 2936-2937, 2938-2939, 2940-2941, 2942-2943, 2944-2945, 2946-2947, 2948-2949, 2950-2951, 2952-2953, 2954-2955, 2956-2957, 2958-2959, 2960-2961, 2962-2963, 2964-2965, 2966-2967, 2968-2969, 2970-2971, 2972-2973, 2974-2975, 2976-2977, 2978-2979, 2980-2981, 2982-2983, 2984-2985, 2986-2987, 2988-2989, 2990-2991, 2992-2993, 2994-2995, 2996-2997, 2998-2999, 3000-3001, 3002-3003, 3004-3005, 3006-3007, 3008-3009, 3010-3011, 3012-3013, 3014-3015, 3016-3017, 3018-3019, 3020-3021, 3022-3023, 3024-3025, 3026-3027, 3028-3029, 3030-3031, 3032-3033, 3034-3035, 3036-3037, 3038-3039, 3040-3041, 3042-3043, 3044-3045, 3046-3047, 3048-3049, 3050-3051, 3052-3053, 3054-3055, 3056-3057, 3058-3059, 3060-3061, 3062-3063, 3064-3065, 3066-3067, 3068-3069, 3070-3071, 3072-3073, 3074-3075, 3076-3077, 3078-3079, 3080-3081, 3082-3083, 3084-3085, 3086-3087, 3088-3089, 3090-3091, 3092-3093, 3094-3095, 3096-3097, 3098-3099, 3100-3101, 3102-3103, 3104-3105, 3106-3107, 3108-3109, 3110-3111, 3112-3113, 3114-3115, 3116-3117, 3118-3119, 3120-3121, 3122-3123, 3124-3125, 3126-3127, 3128-3129, 3130-3131, 3132-3133, 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3316-3317, 3318-3319, 3320-3321, 3322-3323, 3324-3325, 3326-3327, 3328-3329, 3330-3331, 3332-3333, 3334-3335, 3336-3337, 3338-3339, 3340-3341, 3342-3343, 3344-3345, 3346-3347, 3348-3349, 3350-3351, 3352-3353, 3354-3355, 3356-3357, 3358-3359, 3360-3361, 3362-3363, 3364-3365, 3366-3367, 3368-3369, 3370-3371, 3372-3373, 3374-3375, 3376-3377, 3378-3379, 3380-3381, 3382-3383, 3384-3385, 3386-3387, 3388-3389, 3390-3391, 3392-3393, 3394-3395, 3396-3397, 3398-3399, 3400-3401, 3402-3403, 3404-3405, 3406-3407, 3408-3409, 3410-3411, 3412-3413, 3414-3415, 3416-3417, 3418-3419, 3420-3421, 3422-3423, 3424-3425, 3426-3427, 3428-3429, 3430-3431, 3432-3433, 3434-3435, 3436-3437, 3438-3439, 3440-3441, 3442-3443, 3444-3445, 3446-3447, 3448-3449, 3450-3451, 3452-3453, 3454-3455, 3456-3457, 3458-3459, 3460-3461, 3462-3463, 3464-3465, 3466-3467, 3468-3469, 3470-3471, 3472-3473, 3474-3475, 3476-3477, 3478-3479, 3480-3481, 3482-3483, 3484-3485, 3486-3487, 3488-3489, 3490-3491, 3492-3493, 3494-3495, 3496-3497, 3498-3499, 3500-3501, 3502-3503, 3504-3505, 3506-3507, 3508-3509, 3510-3511, 3512-3513, 3514-3515, 3516-3517, 3518-3519, 3520-3521, 3522-3523, 3524-3525, 3526-3527, 3528-3529, 3530-3531, 3532-3533, 3534-3535, 3536-3537, 3538-3539, 3540-3541, 3542-3543, 3544-3545, 3546-3547, 3548-3549, 3550-3551, 3552-3553, 3554-3555, 3556-3557, 3558-3559, 3560-3561, 3562-3563, 3564-3565, 3566-3567, 3568-3569, 3570-3571, 3572-3573, 3574-3575, 3576-3577, 3578-3579, 3580-3581, 3582-3583, 3584-3585, 3586-3587, 3588-3589, 3590-3591, 3592-3593, 3594-3595, 3596-3597, 3598-3599, 3600-3601, 3602-3603, 3604-3605, 3606-3607, 3608-3609, 3610-3611, 3612-3613, 3614-3615, 3616-3617, 3618-3619, 3620-3621, 3622-3623, 3624-3625, 3626-3627, 3628-3629, 3630-3631, 3632-3633, 3634-3635, 3636-3637, 3638-3639, 3640-3641, 3642-3643, 3644-3645, 3646-3647, 3648-3649, 3650-3651, 3652-3653, 3654-3655, 3656-3657, 3658-3659, 3660-3661, 3662-3663, 3664-3665, 3666-3667, 3668-3669, 3670-3671, 3672-3673, 3674-3675, 3676-3677, 3678-3679, 3680-3681, 3682-3683, 3684-3685, 3686-3687, 3688-3689, 3690-3691, 3692-

... he was 55 years of age, and was married
and physically afflicted, that he cannot serve
any thing.

" 20. I have no interest whatever in the
applicant's recovery--

Answered under a
and was not a doctor
in the 29th day of the month
John C. Wilkins

John C. Wilkins

PORTED,

WITNESSES. Samuel Wilkins - same Regiment -- No date.
G. F. Longino, Captain - same command -- No date.

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I, _____, hereby authorize

to receive and accept for the pension allowed and request that he remit same to _____

at _____ day of _____ 190 _____ by _____

Witness my hand and seal this _____ day of _____ 190 _____

Executed in presence of _____

[SEAL]

Harmelby, Julia
Off. Com. Dist.

AOT DEC. 16, 1901.

Indigent

No. _____

WIDOW'S PENSION,
190 _____

Mrs. *Julian Harmelby*

County of *Gulton*

Widow of *Wm. G.*

Warrant issued _____ 190 _____

and handed to _____

J. W. LINDSEY,
Commissioner of Pensions.

Geo. W. Harrison, State Printer.

7/15/01

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

_____ of _____
to receive and receipt for the pension allowed and request that he remit same to _____

_____ at _____ by _____

Witness my hand and seal this _____ day of _____ 1901

Executed in presence of _____

[SEAL]

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

COUNTY OF Fulton

Personally came Mrs. Julian Hornsby

who sways on oath she is the

widow of Wm G Hornsby

to whom, in the County of

Fulton

State of Georgia

she was married on the

10th

day of Octo

18 56, that she remained his wife up to the 4th

day of Novr

190 1, at which time he died, and that she has not since married.

At the time of his death he was a resident of Fulton County, in said State of

Georgia, and was on the Indigent pension roll of the State of Georgia, having been allowed

a pension of \$ 60.00 per annum on account of being a soldier in Company Joe Thompson

Artillery Georgia his papers are now on file at Capital

What affliction have you and how does it effect you?

Indigestion, Rheumatism

What have you been doing to earn a support since 1st of January, 1900? Have been

living with my daughter, assisted by m

What property or effects had you on 1st January, 1900? None

What have you acquired since, and what income have you now? Nothing

What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose?

None whatever

Deponent further says that she is now a resident of Fulton County and has

continuously resided in the State of Georgia since the 10th day of Octo 18 56.

She applies for the pension provided by Act of the General Assembly, approved December 18, 1901.

Sworn to and subscribed before me this 10th day of June 190 3

Mrs Julian Hornsby John R. Williamson

Ordinary of Fulton County.

—Note.—All blank spaces must be filled before signing.

Hornsby, Julian (Widow)
OK. Com. Act
ACT DEC. 18, 1901
No. _____
WIDOW'S PENSION,
190 _____
Mrs. Julian Hornsby
County of Fulton
Widow of Wm G.
190 _____
Warrent issued _____
and forward to _____
J. W. LINDSEY,
Commissioner of Pensions,
7/15/03

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, } Personally came _____
COUNTY OF Ang Shaw } John A. Defoor and
known to me to be reputable and truthful person who says
on oath that from his own personal knowledge Mrs. Julian Kernsby
who made the foregoing affidavit is the widow of W. B. Kernsby
who died in Alabam County and State of Alabam on the
4th day of Nov 1892, and that she has not since married, that she became his
wife on the 10th day of Oct 1856, and so remained up to the time of his death,
and that she has resided in this State continuously since the 10th day of Oct 1856
With what affliction does she suffer? Indigestion, Rheumatism
What property or income had she on 1st January, 1900? None
What has she in her possession and control now? Nothing
How was she supported in 1900 and 1901? By my husband
I have no personal interest in the pension asked for.
Sworn to and subscribed before me this 10th day of June 1903
John A. Defoor
John R. Wilkinson
Ordinary Fulton County, Georgia.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA, } Personally came before me _____
COUNTY OF Fulton } W. A. Smith M.D.
and J. M. Cain, M.D., both of whom are known to me to be reputable
physicians, who say on oath that they personally know Mr. Julian Kernsby
mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her
earning a support) She is fifty six years of age and
suffer from Rheumatism and Indigestion
Sworn to and subscribed before me this 10th day of June 1903
W. A. Smith M.D.
J. M. Cain, M.D.
Ordinary of Fulton County.

CERTIFICATE OF ORDINARY OF THE COUNTY OF APPLICANT'S RESIDENCE.

STATE OF GEORGIA, } John R. Wilkinson Ordinary,
COUNTY OF Fulton } in and for said County of Fulton
State of Georgia, hereby certify that I am acquainted with Mrs. Julian Kernsby
the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me
by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia continuously
since the 10th day of Oct 1856, and has not lived out of the
State since that date. I also certify that the witnesses, to-wit: John A. Defoor
Ang Shaw and _____, whose testimony she
presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith and credit as such,
and that the full text of the affidavit was read to and understood by them before same was signed. I am fully
satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses to read or hear
read the proofs they sign.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 17th
day of July 1903
John R. Wilkinson
Ordinary.

NOTES.

The pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The
marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the
death of such husband.
Proofs by one witness and two physicians will be accepted when it is shown that the same can not be furnished,
but in all cases the most 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.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of _____

to receive and receipt for the pension paid hereon, and request that he remit same to

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1904.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of _____

to receive and receipt for the pension paid hereon, and request that he remit same to

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1905.

[L. S.]

Executed in presence of _____

Hornaby Julia
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. 41

INDIGENT
WIDOW'S PENSION
FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

My husband Hornaby

Fulton.

County,

Widow of

John W. Lindsey

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

123, 1904.

AND HANDED TO

John W. Lindsey

Geo. W. Madison, State Printer, Atlanta.

Hornaby Julia
Fulton County
TO THOSE HERETOFORE PAID.

1905.

No. 66

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

My Julia Hornaby

OF

Fulton

County,

Widow of

John W. Lindsey

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

123, 1905.

AND HANDED TO

John W. Lindsey

Geo. W. Madison, State Printer, Atlanta.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2.

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton. } Julian Hornsby

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since 1856. That she is the Widow of Mrs. J. B. Hornsby who was a soldier in Company Joe Thompson's Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of 186, and served in the Army up to 1891. That he died on the 4th day of Nov 1902.

270

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 1856 10 Oct

I have been allowed an Indigent pension as a resident of Fulton, County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, Julian Hornsby
this 10th day of 1904 1904
John R. Wilkinson Ordinary. Post Office Marble

State of Georgia, } John R. Wilkinson
County, } Ordinary of said County, certify that I am well acquainted with Mrs. Julian Hornsby, 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 1st day of Oct 1856.

Given under my official signature and seal, this 10th day of 1904.



John R. Wilkinson
Ordinary of Fulton County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA, } PERSONALLY COMES MRS.
County of Fulton. } Julia Hornsby

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since all her life. That she is the Widow of H. S. Hornsby who was a soldier in Company of the Joe Thompson's Regiment of Artillery Volunteers, that he enlisted in said regiment on or about the month of December 1864, and served in the Army up to 1864. That he died on the 4th day of November 1903.

(Indigent Pensioner)

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 1856.

I have been allowed an Indigent pension as a resident of Fulton, County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, Julia Hornsby
this 10th day of JAN 2 1905 1905
John R. Wilkinson Ordinary. Post Office 32 Union St

State of Georgia, } John R. Wilkinson
County, } Ordinary of said County, certify that I am well acquainted with Mrs. Julia Hornsby, 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 1st day of 18.

Given under my official signature and seal, this 10th day of JAN 2 1905 1905.



John R. Wilkinson
Ordinary of Fulton County

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

of _____

to receive and receipt for the pension paid hereon, and request that he remit same to

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1906.

[L. S.]

Executed in presence of _____

Hornby, Julia
Fulton County
To Those Hereofore Paid.

1906.

No. 13

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO
Mr. Julia Hornby
OF
Fulton County

Widow of *W. C. Hornby*
C. J. Thompson, Register.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1906.

AND HANDED TO

W. C. Hornby
AND RECEIVED FROM THE REGISTER OF PENSIONS, ATLANTA, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

of _____

to receive and receipt for the pension paid hereon, and request that he remit same to

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1907.

[L. S.]

Executed in presence of _____

Hornby, Julia
Fulton Co.

To Those Hereofore Paid.

1907.

No. 15

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO
Mr. Julia Hornby
OF
Fulton County

Widow of *W. C. Hornby*
C. J. Thompson, Register.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1907.

AND HANDED TO

W. C. Hornby
AND RECEIVED FROM THE REGISTER OF PENSIONS, ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

Julia Karnsley

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State

continuously ever since 1837. That she is the Widow of

W. B. Karnsley who was a soldier in Company
of the 1st Georgia Regiment of Artillery

Volunteers, that he enlisted in said regiment on or about the month of November

1862, and served in the Army up to April 1865. That he died on

the 4 day of November 1862.

(Indigent Pensioner)

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 1856.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 1 day of JAN 1 1906 1906.
John R. Wilkinson Ordinary.

Julia Karnsley
Post Office 117 Eastchapel

State of Georgia,
Fulton County.

I, John R. Wilkinson
Ordinary of said County, certify that I am well

acquainted with Mrs. Julia Karnsley, 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 1837.

Given under my official signature and seal, this 1 day of JAN 1 1906 1906.

Official Seal

John R. Wilkinson
Ordinary of Fulton County.

NOTE—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

Julia Karnsley

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State

continuously ever since all her life. That she is the Widow of

W. B. Karnsley who was a soldier in Company
of the 1st Georgia Regiment of Artillery

Volunteers, that he enlisted in said regiment on or about the month of November

1862, and served in the Army up to April 1865. That he died on

the 4 day of November 1862.

Heard Livable

(No record)

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 1856.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 2 day of JAN 2 1907.
John R. Wilkinson Ordinary.

Mrs. Julia Karnsley
Post Office 141 Stangerson

State of Georgia,
Fulton County.

I, John R. Wilkinson
Ordinary of said County, certify that I am well

acquainted with Mrs. Julia Karnsley, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18.

Given under my official signature and seal, this 2 day of JAN 2 1907.

Official Seal

John R. Wilkinson
Ordinary of Fulton County.

NOTE—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1907.

East Point, Ga. Jan 14 1912

Mrs J S Hensley for Mrs Julia Ann Hensley
funeral expenses

To A. C. Hemperley, Dr.

SOUTH MAIN STREET
OFFICE BOTH PHONES 95 E F

RESIDENCE PHONE BELL 39-L
ATLANTA PHONE 99

Jan 16	Washed & Bled	25 00
	Embalming	1 00 00
	House	5 00
✓	Expenses for House & spring	
	House and RR fare	31 00
		<u>\$ 71 00</u>

I am also a signed A. C. Hemperley
A. C. Hemperley
Claudia Mason cad

Application for Pension Due to a Deceased Pensioner

UNDER THE ACT OF AUG. 15, 1904, TO BE PAID TO THE ORDINARY FOR
FUNERAL EXPENSES AND EXPENSES OF LAST ILLNESS.

Georgia, Duluth County.

Personally before me, the Ordinary of said County, comes
John S. Hensley of said County, who, after being sworn, on oath says that
he knew Julia Ann Hensley of said County, and that he was on
the Duluth Pension Roll Duluth County at the
time of his death, which occurred in Duluth County, in this
State, on the 19 day of January, 1917, and that
a Pension of Twenty Dollars was due him and
unpaid at the time of his death. That he left no widow or dependent children surviving him, and no
estate of any value sufficient to pay his funeral expenses, which amounted to the sum of \$ 71 00
Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me
this 14 day of January, 1912.
A. C. Hemperley Ordinary
Duluth County

Georgia, Duluth County.

I, Claudia Mason Ordinary of said County, do certify
that I personally know A. C. Hemperley, who is a resident
citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and
credit.

I also knew Mrs Julia Ann Hensley while in life; that he
was the same person whose name appears on the Duluth Pension
Roll of Duluth County, and was paid a Pension
of Twenty Dollars in said County for 1917 and
I now believe him to be dead.

Given under my hand and official seal, this 17 day of April, 1912.
Claudia Mason Ordinary
Duluth County.

I also knew John L. Sullivan while in life; that he
was the same person whose name appears on the Edward L. Sullivan Pension
Roll of Dublin County, and was paid a Pension
of Eighty Dollars in said County for 1916 and
I now believe him to be dead.

Given under my hand and official seal, this 17 day of April, 1916

David C. Sullivan Ordinary,
Dublin County.

Hornsbly, Sarah B. Wm
Fulton County
 Approved for 1917

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
 Husband Was on the Pension Roll
 of Georgia.

County *Fulton*
 Name *Mrs Sarah B. Hornsbly*
 Widow of *Geo. W. Hornsbly*
 Company *11*
 Regiment *30 Ga*
 Date of Husband's Death *Dec 3 1866*
 Date of Marriage *July 6 1865*
 Approved *John W. Clark*
14 Aug. 27

OK

Commissioner of Pensions

1-8-27
10:00 AM
10:15 AM

STATE OF GEORGIA

Ordinary's Certificate

Fulton COUNTY.

I, *Geo. H. Jeffries* Ordinary of said County, do certify that I know *Mrs Geo W Hornsbly*, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1897; that I also know *W O Mc Young*, the witness as to marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this *6* day of *Jan* 189*7*
 (SEAL OF ORDINARY)
Geo. H. Jeffries Ordinary,
Fulton County

Instructions.

1. Before any certificate is returned the Ordinary must receive application and the witness in the following words: "I so solemnly swear that you will use answer made by me in the following manner: I will not make any statement which you and the evidence are lawfully entitled to know."
2. Additional affidavits will be the truth. So help you God."
3. The Ordinary must be sworn before he can act as Ordinary.
4. All affidavits must be made before the Ordinary of the County of residence.
5. The Ordinary must be sworn before he can act as Ordinary.
6. Affidavits must be made before the Ordinary of the County of residence.
7. Affidavits must be made before the Ordinary of the County of residence.
8. Affidavits must be made before the Ordinary of the County of residence.
9. Affidavits must be made before the Ordinary of the County of residence.
10. Affidavits must be made before the Ordinary of the County of residence.
11. Affidavits must be made before the Ordinary of the County of residence.
12. Affidavits must be made before the Ordinary of the County of residence.
13. Affidavits must be made before the Ordinary of the County of residence.
14. Affidavits must be made before the Ordinary of the County of residence.
15. Affidavits must be made before the Ordinary of the County of residence.
16. Affidavits must be made before the Ordinary of the County of residence.
17. Affidavits must be made before the Ordinary of the County of residence.
18. Affidavits must be made before the Ordinary of the County of residence.
19. Affidavits must be made before the Ordinary of the County of residence.
20. Affidavits must be made before the Ordinary of the County of residence.

TO PAY-
1930. \$ 118.50
Cig. & C. Tax. 60
TOTAL

For FULTON County

Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

THOS. H. JEFFRIES, Ordinary

For: MRS. SARAH D. HORNSEY
(Name of Pensioner)

Date of Death: DEC 3, 1934

Amount: \$ 60.78 + 118.50

PAID TO ORDINARY ON THIS CLAIM:

(1935)	FUND FROM WHICH PAID	
1-25	C & C	60.78
2-15	1930	118.50
TOTAL		179.28

Approved, and ordered paid,

[Signature]
L. L. WILSON,
Director, Veterans Service Office.

MAR 8 1936

WIDOW'S APPLICATION

To Be Put on Roll in Her Own Right When
Husband Was on the Pension Roll
of Georgia.

County: Fulton
Name: Mrs. Sarah D. Hornsey
Widow of: Geo. A. Hornsey
Company: 1
Regiment: 30 Ga
Date of Husband's Death: Dec 3, 1934
Date of Marriage: July 6, 1915
Approved: Geo. W. Wilson
14 Aug. 27

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.

I, Thos. H. Jeffries Ordinary of said County, do certify that I know Mrs. Geo. A. Hornsey, the applicant for pension; that she is the person she represents herself to be, and that she is continuously a bona fide resident of said County since January 1st, 1920; that I also know W. O. Wilson, the witness as to marriage, and that both the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 6 day of Aug, 1934
(SEAL OF ORDINARY) Thos. H. Jeffries Ordinary,
Fulton County

Instructions.

- Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
- All affidavits must be made before the Ordinary of the County of residence.
- Only widows who are married prior to first January, 1881, are entitled.
- Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
- Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because Disabled Pensioners made no proof of service and were not required to do so.

Application for Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)
(To be disbursed by the Ordinary)

GEORGIA, FULTON County:

Before me, the Ordinary of said County, comes HOWARD L. CARMICHAEL, of said County, who, after being duly sworn, on oath says that he knew MRS. SARAH D. HORNSEY, late of said County, a Confederate pensioner, and that said person is the identical person named and described in the attached certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted to the sum of \$ 178.50, as shown by sworn statements FULLY and COMPLETELY ITEMIZED, hereto attached.

Sworn to and subscribed before me,
this the END day of FEB, 1935.
W. D. McKenzie C.G. Ordinary.

Howard L. Carmichael

CERTIFICATE OF THE ORDINARY

GEORGIA, FULTON County.

I certify that HOWARD L. CARMICHAEL, who subscribed to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and credit. I further certify that I knew MRS. SARAH D. HORNSEY, the deceased pensioner referred to in the foregoing affidavit and that said deceased was at the time of death regularly enrolled as a pensioner on the records of file in my office. I further certify that said deceased pensioner is the identical person named and described in the attached certified copy of burial certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses of last illness and burial for which claim is made.

Given under my hand and seal of office, this the END day of FEB, 1935.
(Seal of Ordinary) W. D. McKenzie Ordinary.

INSTRUCTIONS.

- 1st. Certified copy of Burial Certificate must accompany this application.
- 2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 3rd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of _____ who died without owning sufficient property to pay this bill.
- 4th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed and signed as indicated.
- 5th. The completed voucher—this blank and the bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 6th. Return this application, and attached bills, properly receipted, to the Veterans Service Office.
- 7th. Ordinary should see that the back of this blank, when folded, is filed out.
- 8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.
- 9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

APPLICATION FOR PENSION BY A WIDOW

**Whose Deceased Husband Was on the Pension Roll of Georgia. (Not to be
Used by the Widow of a Disabled Soldier Pensioner.)**

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. J. L. Hornsby of said County, who, after having been duly sworn, says that she is the widow of J. L. Hornsby to whom, in the County of Fulton State of Ga she was married on the 6 day of June, 1885, and that she remained his wife, and resided with him to the date of his death in Dec 31, 1924 and that she has not since his death remarried; at the time of his death he was a resident of Fulton County, in said State of Georgia, and he was on the Fulton Co Pension Roll of the State and paid a pension of \$2.00 in Fulton County for 1924 (per annum), on account of being a soldier in Company A Regiment 304th (Volunteers or State Militia).

That she is now a bona fide resident citizen of said State of Georgia and she has, continuously, resided there since Birth day of 19.

Sworn to and subscribed before me, this the

5 day of January, 1937.
Charles R. Maubert Ordinary Mrs. J. L. Hornsby
of Fulton County. (Applicant)

(SEAL OF THE ORDINARY.)

Affidavit of Witness to Prove Marriage and Date of Death of Husband.

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes W. D. McKenzie known to be a responsible and truthful person, residing in said County, who after having been duly sworn, says that of deponent's own personal knowledge, Mrs. J. L. Hornsby, who made the foregoing affidavit, is the lawful widow of J. L. Hornsby who died in Fulton County in said State of Ga on the 31 day of Dec, 1924, and that she has not since remarried; that she became the wife of J. L. Hornsby on the 6 day of June, 1885; that she and he had resided together as husband and wife, continuously, since to the date of his death, 1924 and that she was the same man who was on the pension roll of said State Ga from Fulton County _____ when he died.

Sworn to and subscribed before me, this the

5 day of Jan, 1937.
Arthur R. Maubert Ordinary W. D. McKenzie
of Fulton County.

(SEAL OF ORDINARY)

9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

(SEAL OF ORDINARY)

WATER-TIGHTLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. Cause of death should be stated so that it may be determined whether the death was due to natural causes or to violence. Exact statement of occupation is very important. Was disease contracted if not at place of death?

CERTIFICATE OF DEATH
GEORGIA DEPARTMENT OF PUBLIC HEALTH
Bureau of Vital Statistics



1. PLACE OF DEATH

County Fulton

City or Town East Point, Ga. Length of residence in this city or town, Yr. Mo. Da. Non-Resident (Yes or No).

Street and Number (No.) R. F. D. (Street) _____

Registered No. 619

2. FULL NAME Mrs Sarah Hornsby.

Residence (City or Town) East Point

(If death occurred in a hospital, give name thereof and number) _____

_____ Ward _____

(Street and Number) R. F. D. (State) Ga.

PERSONAL AND STATISTICAL PARTICULARS

1. SEX Female **A. COLOR or RACE** White **1. Single, Married, Widowed, Divorced (write the word)** Widowed

2. DATE OF BIRTH (month, day, year) June 24, 1894

3. AGE 21 Years 9 Months 3 Days If less than one day, Hours. Minutes.

4. OCCUPATION (a) Trade, profession or particular kind of work done, as cabinet maker, bookbinder, etc. _____
(b) Industry or business in which engaged, as cotton mill, sawmill, bank, etc. _____
(c) Date deceased last worked at this occupation (month and year) _____
(d) Total years of this occupation _____

5. BIRTHPLACE (P. O. Address) Ga.

6. HOME, SAN Diego.

7. BIRTHPLACE (P. O. Address) Ga.

8. MAIDEN NAME Evelyn Brown.

9. BIRTHPLACE (P. O. Address) Ga.

10. INFORMATION (Signed) S. M. Hornsby.
(Address) West Point, Ga.

11. BURIAL PLACE (Cemetery) Rethel Cemetery
(Precinct) East Point - Ga. Date Dec. 5, 1915
(Signed) Howard L. Hammond.
(Address) East Point, Ga.

12. UNDERTAKER (Signed) _____
(Address) _____

MEDICAL CERTIFICATE OF DEATH

13. DATE OF DEATH Dec. 5, 1915 5:00 P. M. (Hour)

14. I HEREBY CERTIFY, That I attended the deceased from Aug. 1st. 10:30 A. M. Dec. 5, 1915

I first saw the Dec. 1st. 1915 death is said to have occurred on the date and hour stated above. The principal cause of death and related causes of importance in the order of onset and duration of each:

Endocarditis.

Other contributory causes of importance:

What test confirmed diagnosis? (Specify whether autopsy, creosol, laboratory, or clinical)

If death was due to natural causes (violence) fill in also the following:

Was injury an accident, suicide, or homicide?

Where did injury occur (House, lot or block, if remote of town, county, and also the street)

Did injury occur in a home, public place or industry?

Manner of injury

Nature of injury

(Signed) T. F. Guffin M.D.
(Address) East Point, Ga.

15. FILED Dec. 10, 1915

(Signed) Wm J. Gilbert

This is to certify that this is a true and correct
copy of the death certificate of Mrs Sarah Hornsby
as appears on the records of this office.

W. B. Bryant Clerk.
Deputy Local Registrar.

Sworn to and subscribed before me
this 2nd, day of February 1935.

H. B. Buchanan
Notary Public Fulton County Ga.

FULTON COUNTY



GEORGIA

THOMAS H. JEFFRIES
ORDINARY AND
Judge of the Court of Ordinary of Fulton County
ATLANTA, GA.
January 7th, 1935.

Hon. John W. Clark,
Pension Commissioner,
State Capitol,
Atlanta, Ga.

Dear Sir:-

Enclosed please find application for Mrs.
Joseph L. Hornsby, to be placed on the widows pension
roll.

Yours truly,

Thomas H. Jeffries
ORDINARY.

East Point, Ga., February 1, 1935

Mrs. Sarah Hornsby, (Deceased)

East Point, Ga. R.F.D.

Howard L. Carmichael
FUNERAL HOME
Superior Ambulance Service

Calhoun 1134-39

1934		
Rec. 3 Casket & Box		\$140.00
Embalming		15.00
Hearse		10.00
Dress		13.00

		\$178.00

The above bill is just, true and unpaid.

Howard L. Carmichael

Sworn to and subscribed before
me this 2nd. day of February, 1935.

C. C. Ordinary
C.C. ORDINARY

FULTON COUNTY



GEORGIA

THOMAS H. JEFFRIES
ORDINARY
Judge of the Ordinary of Fulton County
ATLANTA, GA.
January 7th, 1935.

Hon. John W. Clark,
Pension Commissioner,
State Capitol,
Atlanta, Ga.

Dear Sir:-

Enclosed please find application for Mrs.
Joseph L. Hornsby, to be placed on the widows pension
roll.

Yours truly,

Thos H. Jeffries
ORDINARY.

East Point, Ga., Feb. 1, 1935

Mrs. Sarah Hornsby, (Deceased)

East Point, Ga. R.F.D.

Howard L. Carmichael
FUNERAL HOME
Superior Ambulance Service

Calhoun 1138-39

1934		
Dec. 3 Casket & Box		\$140.00
Embalming		15.00
Hearse		10.00
Dress		13.00

		\$178.00

The above bill is just, true and unpaid.

Howard L. Carmichael

Sworn to and subscribed before
me this 2nd day of February, 1935.

C. C. Ordinary
C.C. ORDINARY

Received of Thomas H. Jeffries, Ordinary, \$ 178.00
for the account of Sarah L. Hornsby. This amount
has not previously been paid and is owing to me.
March 8, 1935.

Howard L. Carmichael

MARRIAGE LICENSE

State of Georgia--Tulton County

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to Solemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony Mr J. L. Kennedy

and Miss Sarah Duggs

According to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON, TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 5th day of July 1865

Samuel Duggs L.S.
Ordinary

I hereby certify that Mr J. L. Kennedy
and Miss Sarah Duggs

were joined together in the HOLY BANS OF MATRIMONY

on the 6th day of July 1865, by me. James E. Lee J.P.

State of Georgia,
Tulton County.

S. S.

ORDINARY'S OFFICE

ATLANTA, GA. Sam D 1927

Charles Duggs Clerk Court of Ordinary of said County, hereby certify
that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

Mr J. L. Kennedy
and Miss Sarah Duggs

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.

Charles Duggs
Clerk Court of Ordinary.

that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

Mr. J. L. Kennedy
and Mrs. L. L. Kennedy

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.

Clara M. Mason
Clerk Court of Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I,

of

do hereby authorize

at

by

Witness my hand and seal this

day of

1896.

Executed in presence of

Richard Johnson
Sec

No. 734
Hornshy N. S.
Butler Co.

INDIGENT PENSION

1895.

Name *How G. Hornshy*

County *Fulton*

Ground

July 11 1896

RICHARD JOHNSON,

Secretary Education Department

WARRANT HANGED TO

Apptch

Geo. W. Harrison, State Printer, Albany.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

hereby authorize

of

to receive and receipt for the pension allowed and request that he remit same to

at

by

Witness my hand and seal this

day of

1895.

Executed in presence of

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his goods, 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) *William B. Armstrong, Atlanta, DeKalb Co., Ga.*
2. Where did you reside on January 1st, 1864, and how long have you been a resident of this State? *Atlanta, continuous residence, not over 10 years.*
3. When and where were you born? *At Ga. Co. 1774th 1836*
4. Did you volunteer in the Confederate Army or in the Georgia Militia? *Vol. Co. S. A.*
5. When and where did you enlist? *Nov. 1864, Atlanta Camp, Georgia.*
6. In what company and regiment did you enlist? *Co. Thompson, Artillery, 1st Regt.*
7. How long did you remain in that company and regiment? *Five months.*
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? *never any transfer.*

9. For how long a period did you discharge regular military duty? *Feb. Aug. 1865.*
10. When, where and under what circumstances were you discharged from service? *Discharged May 1865, under parole, from Fort Sumter, Augusta, Ga.*
11. What is your present occupation? *none from inability.*
12. How much can you earn per annum by your own exertions or labor? *nothing.*
13. What has been your occupation since 1865? *When able, assisting son on farm.*
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? *possibly \$100 if able to work, from son.*
15. What is your present physical condition and how long have you been in such condition? *(32) I am unable to perform much manual labor, suffering from Rheumatism, Kidney & Bladder & Chronic Dysentery, continuing in Co. & 3, I am able to work.*
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"? *Second.*
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *I am suffering almost continuously since 1865, unable to see, unable to hear, and have lost out a very much assistance from others, many & having been almost entirely dependent.*
18. What property, effects or income do you possess? *absolutely nothing.*
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? *Not a thing, and the lot in Co. is absolute blue, & for immediate support & relief.*
20. In what County did you reside during those years and what property did you then retain for taxation? *DeKalb Co. Had nothing at that time.*
21. How were you supported during the years 1893 and 1894? *By the last army.*
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 100 per year, mostly by the Co. & son.*
23. What was your employment during 1893 and 1894? What pay did you receive in each year? *only assisting by what work I could do, and no money for it.*
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support. *With living 18 years & 10 months, 16. 8/18, apparently at painting and the amount of money they receive is small.*

approved Johnson & Co.
No. 734 N. E.
Harris & Co.
INDIGENT PENSION
1895.

Wm. B. Armstrong
DeKalb Co.

July 11/96
RICHARD JOHNSON,
Secretary & Recording Agent

EXHIBIT RETURNED TO
Appch

25. Are you receiving a pension under any law of this State if so what amount and for what disability?

none have been received for any kind

Sworn to and subscribed before me this the
28th day of March 1895. } *W. L. Kearney* Applicant.
M. L. Keachum Ordinary
of *Fulton* County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton County.

Samuel Plym of said State and County, having been presented as a witness in support of the application of *W. L. Kearney* for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *Samuel Plym 14 Perry St. Atlanta Ga*
2. Are you acquainted with *W. L. Kearney* the applicant, if so how long have you known him? *yes since 1868*
3. Where does he reside, and how long has he been a resident of this State? *Campbell Hill Augusta Ga. since 1868*
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? *yes he was in regular Confederate army military*
5. When, where and in what company and regiment did he enlist? *Atlanta Ga. Joe Thompson Artillery Co. Hardee's Regt*
6. Were you a member of the same company and regiment? *yes was a member and*
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? *from 1862 to Aug 1863 that he was a good soldier went to Hospital sick about Aug 1863*

8. What property, effects or income has the applicant? (Give your means of knowledge.) *none - known from personal observation and from state records.*
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? *nothing*

10. What is the applicant's occupation and physical condition? *not occupation physically unable to perform work*

11. Is the applicant unable to support himself by labor of any sort, if so, why? *yes physically unable to perform manual labor*

12. How was he supported during the years 1893 and 1894? *by the assistance of his four*

13. What portion of his support for these two years was derived from his own labor or income? *nothing*

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? *Old age, and some degree of the stages and kidneys make it impossible for him to*

15. What interest have you in the recovery of a pension by this applicant? *not any*

Sworn to and subscribed before me, this
the 27th day of March 1895. } *W. L. Kearney* Applicant, Witness
M. L. Keachum Ordinary
of *Fulton* County.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me *Louis H. Reid and G. W. Willitt* Doctors of medicine, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully *Samuel Plym* applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

Suffering with Rheumatism, Cystitis, Chronic inflammation of Rectum & Prostate, and an infirm stomach & bowels, and general nervous prostration resulting therefrom which is of long standing & from want of necessary treatment & consideration has totally incapacitated him

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this
the 27th day of March 1895. } *Louis H. Reid and G. W. Willitt* Physicians
A. R. Etheridge Sworn to and subscribed before me, this
A. P. Fulton Clerk. *29th day of March 1895.*

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, *M. L. Keachum* Ordinary in and for said County, hereby certify that the applicant *W. L. Kearney* resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: *Samuel Plym, Louis H. Reid and G. W. Willitt* are of trustworthy character and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions, the applicant and each witness took the oath herein prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same were signed.

I further certify that the tax digests of *Fulton* County show that applicant returned for taxation in his name in 1893, *nothing* dollars of property, and in 1894, *nothing* dollars of property.

Witness my hand and seal of office, this 29th day of March 1895.

M. L. Keachum Ordinary
of *Fulton* County.

NOTE. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: - You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 1897.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

State of Georgia,

County.

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 1898.

[L. S.]

Executed in presence of _____

Hornby, W. L.
Fulton Co
JUN 15 1897.
(For Those Already Enrolled.)

No. 48

INDIGENT

Soldier's Pension.

1897.

Name *Wm. L. Hornby*
County *Fulton*

July 11 1897.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT RETURNED TO

affet

no data

Hornby, W. L.
Fulton Co
JUN 15 1898.
(For Those Already Enrolled.)

No. 369

INDIGENT

SOLDIER'S PENSION.

1898.

Name *Wm. L. Hornby*
County *Fulton*

WARRANT ISSUED

1/12 1898.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT RETURNED TO

affet

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Mr. E. Hornsby of Fulton,

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 4th day of November 1826; that he is 61 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Fla. C. S. A.) during the war between the States, and served for the term of 1 in Company 1, of 1st th Regiment of the Thompsons Artillery; that his physical condition is as follows: He suffered from General paresis of the lower extremities, general nervous condition, resulting from neglect 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 1897. I have heretofore as a resident of Fulton county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, 11th day of January 1897.

W. H. H. H. H. Ordinary.

STATE OF GEORGIA,

Fulton County.

I, J. H. H. H. H. Ordinary of said County,

do certify that I am well acquainted with Mr. E. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1897.



Ordinary Fulton County.

NOTE—The blanks spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Mr. E. Hornsby of Fulton,

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 4th day of November 1826; that he is 62 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Fla. C. S. A.) during the war between the States, and served for the term of 1 in Company 1, of 1st th Regiment of the Thompsons Artillery; that his physical condition is as follows: General paresis of the lower extremities, general nervous condition, resulting from neglect 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 1898. I have heretofore as a resident of Fulton county been allowed a pension for the year 1897.

Sworn to and subscribed before me, this, 12th day of January 1898.

W. H. H. H. H. Ordinary.

State of Georgia,

Fulton County.

I, J. H. H. H. H. Ordinary of said County,

do certify that I am well acquainted with Mr. E. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 12th day of January 1898.



Ordinary Fulton County.

NOTE—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____, hereby authorize

of _____

to receive and receipt for the pension allowed, and request that he remit same to

at _____

by _____

Witness my hand and seal this _____ day of _____ 1899.

Executed in presence of _____

(L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of _____

to receive and receipt for the pension allowed, and request that he remit same to

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1900.

Executed in presence of _____

[L. S.]

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 479

INDIGENT

SOLDIER'S PENSION,

1899.

Name *Wm. B. Housley*
County FULTON

WARRANT ISSUED

1899

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

appt

Chas. W. Harrison, State Printer, Atlanta.

W. B. Housley

CODE SEC. 1284.

(For Those Already Enrolled.)

No. 178

INDIGENT

SOLDIER'S PENSION,

1900.

Name *Wm. B. Housley*
County FULTON

WARRANT ISSUED

July 15 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Wm. B. Housley

Chas. W. Harrison, State Printer, Atlanta.

W. B. Housley

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County.

Personally appears Wm. S. Hornsby of FULTON

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 4th day of Nov 1836; that he is 63 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of _____ in Company _____ of _____ Regiment of Col Thompson's Artillery; that his physical condition is as follows: Wight's Brigade
Severe General Debility

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 16th, 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 FULTON county been allowed a pension for the year 1898.

Sworn to and subscribed before me, this, the 18th day of Jan 1899, Wm. S. Hornsby
M. S. Hornsby Ordinary.

State of Georgia,

FULTON County.

I, W. H. HULSEY

Ordinary of said County,

do certify that I am well acquainted with Wm. S. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 18 day of Jan 1899.

M. S. Hornsby
Ordinary FULTON County.

NOTE.—The blank spaces must be filled.

NOTE.—A Affidavit should not be attested before January 1st, 1899.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County.

Personally appears Wm. S. Hornsby of FULTON

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 4th day of Nov 1836; that he is 64 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of _____ in Company _____ of _____ Regiment of Col Thompson's Artillery; that his physical condition is as follows: Wight's Brigade
Severe General Debility

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 16th, 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 Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this, the 15th day of Jan 1900, Wm. S. Hornsby
M. S. Hornsby Ordinary.

State of Georgia,

FULTON County.

I, W. H. HULSEY

Ordinary of said County,

do certify that I am well acquainted with Wm. S. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15 day of Jan 1900.

M. S. Hornsby
Ordinary FULTON County.

NOTE.—The blank spaces must be filled.

NOTE.—A Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

_____ of

to receive and receipt for the pension allowed and request that he remit same to

_____ at

by _____

Witness my hand and seal, this _____ day of _____ 1901.

—[L. S.]

Executed in presence of _____

*George W. Miller, Jr.
Supt. Ga. Pen.*

CODE SECTION 15A

(For Those Already Enrolled.)

No. 430

INDIGENT

SOLDIER'S PENSION.
1901.

Name

John W. Lindsey

County

Gulton

WARRANT ISSUED

Jan'y 14 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John W. Lindsey

Gen. W. Lindsey, State Prison, Atlanta.

no date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Wm. S. Hornsby of Fulton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 11th day of Nov 1836; that he is 65 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of then) during the war between the States, and served for the term of 11 months in Company 11th of the 11th Regiment of Vol that his physical condition is as follows:

Thermal then Disability
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 1901. I have heretofore as a resident of Fulton county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 2nd day of January 1901. Wm. S. Hornsby
Quorl W. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton County.

I, Quorl W. Wilkinson Ordinary of said County, do certify that I am well acquainted with Wm. S. Hornsby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 2nd day of January 1901.

Quorl W. Wilkinson
Ordinary Fulton County.



Note—The blank spaces must be filled.
Note—Affidavit should not be received before January 1st, 1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

_____ of _____
to receive and receipt for the pension allowed and request that he remit same to

_____ at _____

by _____

Witness my hand and seal, this _____ day of _____ 1902.

[L. S.]

Executed in presence of _____

Henry, Am. G.
Fulton Co. 34
GOS. ENROLLMENT NO.
(FOR THOSE ALREADY ENROLLERS.)

No. 60

INDIGENT
SOLDIER'S PENSION
1902.

Name *Wm. G. Kennedy*
County *Fulton.*

Wright, Wm. G.
WARRANT ISSUED
Wm. G. Kennedy
1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Wm. G. Kennedy
Gen. W. Lindsey, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears Wm G Hornby of Fulton.

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 4 day of Nov 1886, 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 Geo) during the war between the States, and served for the term of _____ in Company _____ of _____ Regiment of Jo Thompson Artillery Geo William Hornby that his physical condition is as follows: Hornby Geo Hornby

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 16th, 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 Fulton county been allowed a pension for the year 1 901

Sworn to and subscribed before me, this the _____ day of JAN 13 1902 1902, _____ Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with Wm G Hornby the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 13 1902 1902, _____

Ordinary Fulton County.

Note.—The blank spaces must be filled.
Note.—Affidavits should not be attested before January 1st, 1902.



County. I John R. Wilkinson Ordinary of said County,
do certify that I am well acquainted with Wm. J. Hornby
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 13 1902
John R. Wilkinson
Ordinary Fulton County.



Note.—The blank space must be filled.
Note.—A affidavit should not be attested before January 1st, 1902.

Substance

INDIGENT PENSION:

1909

H. A. Hough

Co. F 20th So. Quartz Regt.

JOHN W. LINDSEY

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

RECEIVED HANDED NO
1000

Pension office 10/1/08
 Applicant was a U.S. soldier and became a resident and citizen of Ga in 1898. Not entitled to pension under the present law. He belongs to that class covered by the new Constitutional amendment for whom the legislature did not provide.
 J.W. Lindsey, Com. of Pensions

Sept 15th Mr. Quinlan
at suggestion of Judge Reed. I send this affi-
davit of 1909 as evidence. The witness to this is
pled. The Captain was on Picket to watch Strummen
when he left on 4/25/20.
Yours truly, G.D. Hough

[Signature]

Mounted in pr

With my hand and, this

by

MUSCOGBR.

MUSCOCODE
B. A. J. Singh
COUNTRY
New Road 9, Ordunary

STATE OF GEORGIA,

POWER OF ATTORNEY.

POWER OF ATTORNEY.

STATE OF GEORGIA,

MUSCOGEE.

COUNTY.

G. A. Hough

Wm. Reed Jr. Ordinary

MUSCOGEE

hereby authorizes

to receive and receipt for the pension allowed and request that he remit same to

at Okmulgee

by

Witness my hand and seal, this

26th day of

May

1904

Executed in presence of

J. A. Hough

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

Muscogee County.

Reb. G. A. Hough

of said State and County, desiring to avail himself of the Pension Act (Section 1864, Civil), hereby submits his oath, and after being duly sworn

truth answers to make to the following questions, before and answer as follows:

1. What is your name and where do you reside? G. A. Hough, Okmulgee, Muscogee

2. How long and since when have you been a resident of this State? Since July 1878

3. When and where were you born? Okmulgee, Ga.

4. When and where and in what company and regiment did you enlist or serve? 1st Regt. U.S.C.V., 2nd

Company, U.S.C.V., 1862 to 1865, U.S.C.V.

5. How long did you remain in such company and regiment? 1st one year

6. When and where was your company and regiment surrendered and discharged? At Okmulgee, Ga.

7. Were you present with your company and regiment when it was surrendered? I was not

8. If not present, state immediately and clearly where you were, what you left your command, for what cause and by whose authority? I left with a large number on the 20th of April, 1865, by authority of the officers, to go to my home.

9. How much can you earn (gross) per annum, by your own exertions or labor? About \$200.00

10. What has been your occupation since 1865? Merchant and general trading.

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Age and poverty, infirmary.

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. One eye has been blind since 1862, I have had a large number of complications from which I have suffered much.

13. What property, real and personal, or income, do you possess, and its approximate value? No property at all, except a little household goods.

14. What property, real or personal, did you possess in 1861, 1862, 1863, 1864, 1865, 1866 and 1867, and what disposition, if any, by sale or gift, have you made of same? None whatever, only that given above.

15. In what County did you reside during these years, and what property did you then return for taxation? Okmulgee, Muscogee, Ga. No property.

16. How were you supported during the years 1861, 1862, 1863, 1864, 1865, 1866 and 1867? By my family and by the aid of friends.

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About \$200.00 per year.

18. What was your employment during 1861, 1862, 1863, 1864, 1865, 1866 and 1867? What pay did you receive in each year? None.

19. Have you a family? If so, who compose such family? Give their means of support. Have they a home-stand, or other property? Their age and how employed? I have a family, my wife and daughter, dependent upon myself.

20. Are you receiving any pension? If so, what amount and for what disability? I receive a pension for total blindness.

21. Have you ever made an application for pension before? Yes, in 1865, in 1866, in 1867, in 1868, in 1869, in 1870, in 1871, in 1872, in 1873, in 1874, in 1875, in 1876, in 1877, in 1878, in 1879, in 1880, in 1881, in 1882, in 1883, in 1884, in 1885, in 1886, in 1887, in 1888, in 1889, in 1890, in 1891, in 1892, in 1893, in 1894, in 1895, in 1896, in 1897, in 1898, in 1899, in 1900, in 1901, in 1902, in 1903, in 1904, in 1905, in 1906, in 1907, in 1908, in 1909, in 1910, in 1911, in 1912, in 1913, in 1914, in 1915, in 1916, in 1917, in 1918, in 1919, in 1920, in 1921, in 1922, in 1923, in 1924, in 1925, in 1926, in 1927, in 1928, in 1929, in 1930, in 1931, in 1932, in 1933, in 1934, in 1935, in 1936, in 1937, in 1938, in 1939, in 1940, in 1941, in 1942, in 1943, in 1944, in 1945, in 1946, in 1947, in 1948, in 1949, in 1950, in 1951, in 1952, in 1953, in 1954, in 1955, in 1956, in 1957, in 1958, in 1959, in 1960, in 1961, in 1962, in 1963, in 1964, in 1965, in 1966, in 1967, in 1968, in 1969, in 1970, in 1971, in 1972, in 1973, in 1974, in 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2197, in 2198, in 2199, in 2200, in 2201, in 2202, in 2203, in 2204, in 2205, in 2206, in 2207, in 2208, in 2209, in 2210, in 2211, in 2212, in 2213, in 2214, in 2215, in 2216, in 2217, in 2218, in 2219, in 2220, in 2221, in 2222, in 2223, in 2224, in 2225, in 2226, in 2227, in 2228, in 2229, in 2230, in 2231, in 2232, in 2233, in 2234, in 2235, in 2236, in 2237, in 2238, in 2239, in 2240, in 2241, in 2242, in 2243, in 2244, in 2245, in 2246, in 2247, in 2248, in 2249, in 2250, in 2251, in 2252, in 2253, in 2254, in 2255, in 2256, in 2257, in 2258, in 2259, in 2260, in 2261, in 2262, in 2263, in 2264, in 2265, in 2266, in 2267, in 2268, in 2269, in 2270, in 2271, in 2272, in 2273, in 2274, in 2275, in 2276, in 2277, in 2278, in 2279, in 2280, in 2281, in 2282, in 2283, in 2284, in 2285, in 2286, in 2287, in 2288, in 2289, in 2290, in 2291, in 2292, in 2293, in 2294, in 2295, in 2296, in 2297, in 2298, in 2299, in 2300, in 2301, in 2302, in 2303, in 2304, in 2305, in 2306, in 2307, in 2308, in 2309, in 2310, in 2311, in 2312, in 2313, in 2314, in 2315, in 2316, in 2317, in 2318, in 2319, in 2320, in 2321, in 2322, in 2323, in 2324, in 2325, in 2326, in 2327, in 2328, in 2329, in 2330, in 2331, in 2332, in 2333, in 2334, in 2335, in 2336, in 2337, in 2338, in 2339, in 2340, in 2341, in 2342, in 2343, in 2344, in 2345, in 2346, in 2347, in 2348, in 2349, in 2350, in 2351, in 2352, in 2353, in 2354, in 2355, in 2356, in 2357, in 2358, in 2359, in 2360, in 2361, in 2362, in 2363, in 2364, in 2365, in 2366, in 2367, in 2368, in 2369, in 2370, in 2371, in 2372, in 2373, in 2374, in 2375, in 2376, in 2377, in 2378, in 2379, in 2380, in 2381, in 2382, in 2383, in 2384, in 2385, in 2386, in 2387, in 2388, in 2389, in 2390, in 2391, in 2392, in 2393, in 2394, in 2395, in 2396, in 2397, in 2398, in 2399, in 2400, in 2401, in 2402, in 2403, in 2404, in 2405, in 2406, in 2407, in 2408, in 2409, in 2410, in 2411, in 2412, in 2413, in 2414, in 2415, in 2416, in 2417, in 2418, in 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2641, in 2642, in 2643, in 2644, in 2645, in 2646, in 2647, in 2648, in 2649, in 2650, in 2651, in 2652, in 2653, in 2654, in 2655, in 2656, in 2657, in 2658, in 2659, in 2660, in 2661, in 2662, in 2663, in 2664, in 2665, in 2666, in 2667, in 2668, in 2669, in 2670, in 2671, in 2672, in 2673, in 2674, in 2675, in 2676, in 2677, in 2678, in 2679, in 2680, in 2681, in 2682, in 2683, in 2684, in 2685, in 2686, in 2687, in 2688, in 2689, in 2690, in 2691, in 2692, in 2693, in 2694, in 2695, in 2696, in 2697, in 2698, in 2699, in 2700, in 2701, in 2702, in 2703, in 2704, in 2705, in 2706, in 2707, in 2708, in 2709, in 2710, in 2711, in 2712, in 2713, in 2714, in 2715, in 2716, in 2717, in 2718, in 2719, in 2720, in 2721, in 2722, in 2723, in 2724, in 2725, in 2726, in 2727, in 2728, in 2729, in 2730, in 2731, in 2732, in 2733, in 2734, in 2735, in 2736, in 2737, in 2738, in 2739, in 2740, in 2741, in 2742, in 2743, in 2744, in 2745, in 2746, in 2747, in 2748, in 2749, in 2750, in 2751, in 2752, in 2753, in 2754, in 2755, in 2756, in 2757, in 2758, in 2759, in 2760, in 2761, in 2762, in 2763, in 2764, in 2765, in 2766, in 2767, in 2768, in 2769, in 2770, in 2771, in 2772, in 2773, in 2774, in 2775, in 2776, in 2777, in 2778, in 2779, in 2780, in 2781, in 2782, in 2783, in 2784, in 2785, in 2786, in 2787, in 2788, in 2789, in 2790, in 2791, in 2792, in 2793, in 2794, in 2795, in 2796, in 2797, in 2798, in 2799, in 2800, in 2801, in 2802, in 2803, in 2804, in 2805, in 2806, in 2807, in 2808, in 2809, in 2810, in 2811, in 2812, in 2813, in 2814, in 2815, in 2816, in 2817, in 2818, in 2819, in 2820, in 2821, in 2822, in 2823, in 2824, in 2825, in 2826, in 2827, in 2828, in 2829, in 2830, in 2831, in 2832, in 2833, in 2834, in 2835, in 2836, in 2837, in 2838, in 2839, in 2840, in 2841, in 2842, in 2843, in 2844, in 2845, in 2846, in 2847, in 2848, in 2849, in 2850, in 2851, in 2852, in 2853, in 2854, in 2855, in 2856, in 2857, in 2858, in 2859, in 2860, in 2861, in 2862, in 2863, in 2864, in 2865, in 2866, in 2867, in 2868, in 2869, in 2870, in 2871, in 2872, in 2873, in 2874, in 2875, in 2876, in 2877, in 2878, in 2879, in 2880, in 2881, in 2882, in 2883, in 2884, in 2885, in 2886, in 2887, in 2888, in 2889, in 2890, in 2891, in 2892, in 2893, in 2894, in 2895, in 2896, in 2897, in 2898, in 2899, in 2900, in 2901, in 2902, in 2903, in 2904, in 2905, in 2906, in 2907, in 2908, in 2909, in 2910, in 2911, in 2912, in 2913, in 2914, in 2915, in 2916, in 2917, in 2918, in 2919, in 2920, in 2921, in 2922, in 2923, in 2924, in 2925, in 2926, in 2927, in 2928, in 2929, in 2930, in 2931, in 2932, in 2933, in 2934, in 2935, in 2936, in 2937, in 2938, in 2939, in 2940, in 2941, in 2942, in 2943, in 2944, in 2945, in 2946, in 2947, in 2948, in 2949, in 2950, in 2951, in 2952, in 2953, in 2954, in 2955, in 2956, in 2957, in 2958, in 2959, in 2960, in 2961, in 2962, in 2963, in 2964, in 2965, in 2966, in 2967, in 2968, in 2969, in 2970, in 2971, in 2972, in 2973, in 2974, in 2975, in 2976, in 2977, in 2978, in 2979, in 2980, in 2981, in 2982, in 2983, in 2984, in 2985, in 2986, in 2987, in 2988, in 2989, in 2990, in 2991, in 2992, in 2993, in 2994, in 2995, in 2996, in 2997, in 2998, in 2999, in 3000, in 3001, in 3002, in 3003, in 3004, in 3005, in 3006, in 3007, in 3008, in 3009, in 3010, in 3011, in 3012, in 3013, in 3014, in 3015, in 3016, in 3017, in 3018, in 3019, in 3020, in 3021, in 3022, in 3023, in 3024, in 3025, in 3026, in 3027, in 3028, in 3029, in 3030, in 3031, in 3032, in 3033, in 3034, in 3035, in 3036, in 3037, in 3038, in 3039, in 3040, in 3041, in 3042, in 3043, in 3044, in 3045, in 3046, in 3047, in 3048, in 3049, in 3050, in 3051, in 3052, in 3053, in 3054, in 3055, in 3056, in 3057, in 3058, in 3059, in 3060, in 3061, in 3062, in 3063, in 3064, in 3065, in 3066, in 3067, in 3068, in 3069, in 3070, in 3071, in 3072, in 3073, in 3074, in 3075, in 3076, in 3077, in 3078, in 3079, in 3080, in 3081, in 3082, in 3083, in 3084, in 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3196, in 3197, in 3198, in 3199, in 3200, in 3201, in 3202, in 3203, in 3204, in 3205, in 3206, in 3207, in 3208, in 3209, in 3210, in 3211, in 3212, in 3213, in 3214, in 3215, in 3216, in 3217, in 3218, in 3219, in 3220, in 3221, in 3222, in 3223, in 3224, in 3225, in 3226, in 3227, in 3228, in 3229, in 3230, in 3231, in 3232, in 3233, in 3234

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

Fullerton County, of said State and County, hereby applies for the pension provided by Act of 1890, 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).
Geo. A. Hough, in Atlanta, Fullerton, Atlanta,
2. How long and since when have you been a continuous resident citizen of this State?
Twelve years, since July 1878
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
From Newbury, N.C. Entire war
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
First year Co. G. 2d S.C. Inf. in Co. 2d S.C. Inf. 2d S.C. Inf.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge).
Three years, April 20, 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service?
At Appomattox, North Carolina
7. Were you actually present with your Command when it was surrendered or discharged? No
8. If you were not actually present, state specifically and clearly where you were.
One day at Fort Mifflin, Ohio, to see Major Smith
- a. Where was your Command when you left it? At Appomattox, N.C.
- b. When did you leave the Command? April 20, 1865
- c. For what cause did you leave? He gave me 10 days leave to go home
- d. By whose authority did you leave? Regimental Officer
- e. For how long was your leave granted? In what way? Indefinite
- f. Why did you not return to your Command after leave expired? Deserding from prison
- g. In what way were you prevented? War ended
- h. What effort did you make to return?
- i. Were you captured during the war? No
- j. If so, when, and where? In what prison were you held and when were you released?
9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value).
A small amount of household furniture
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None
11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list).
Small amount of household furniture
12. What annual or monthly income or earnings of yourself and wife and the source derived have you? About two hundred dollars
13. Are you drawing a pension of any amount from this State or the United States? No
14. Have you ever applied for the Georgia Pension and had it refused? and for what reason it was not allowed? Yes, refused by Georgia Pension Board, on the ground that I was not entitled to it.

Sworn to and subscribed before me, this the _____ day of _____ 1910, at _____
Geo. A. Hough
Ordinary

Confederate
Soldier's Application.

UNDER ACT 1910.

County Fullerton
Name Geo. A. Hough
Company 2
Regiment 2d S.C. Inf.

Approved

Geo. A. Hough
J. W. LINDSEY,
Notary Public for Georgia

CHAS. F. STEEL, State Printer, Atlanta.

934/1943

Grant me, Subscribed *Ordinary Public Judge*
of *Hambley* County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Hambley County.

Personally before me come *H. F. Salanky* who *swears*
says that they are free holders residing in said County and we know *that*
the applicant for pension and we know the property that is now in the use, possession and control of himself
and wife and of its cash value to wit: *(Make List by item and value)*

goods
probably \$100 one hundred dollars

1. What property, if any, has been sold or given away by the applicant or his wife since 1910.

See Books of Fulton County Clerk in
property in Fulton County for 1900, 1909 & 1910
Expir under my hand & Seal this
Sept 2nd 1911
Minellie M. Anderson
Secy

ORDINARY'S CERTIFICATE

STATE OF GEORGIA

Fulton COUNTY

I, Walter H. Hough

Ordinary of said County, do certify that I

know Walter H. Hough the applicant for this position, and that she is the person who represents herself to be, and that she is a bona fide continuing resident of said County and was on the 17th day of Aug 1919

That I also know Walter H. Hough

witness to the marriage, and I also know

that both of the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 16 day of Oct 1919 (SEAL)

Walter H. Hough Ordinary, Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You shall give me the truth, so help you God."

2. All affidavits must be sworn to before the Ordinary, and the evidence of the marriage must be taken before the Ordinary, and the evidence of the marriage must be taken before the Ordinary.

3. Only witnesses who married prior to first January, 1881, are entitled to officiate.

4. A license for marriage is obtainable. If not, prove marriage by some person, or by general reputation.

5. The license for marriage is obtainable. If not, prove marriage by some person, or by general reputation.

Hough, Sallie M.
010/11/1920 (WHS)
No. Fulton County

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1919.

County Fulton
Name Mrs. Sallie M. Hough
Widow of G. Andrew Hough
Company +
Regiment 20th S. C.
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-23-1919

Edmund G. G. G.

John L. Berg

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY }

I, *T. H. Deffen*, Ordinary of said County, do certify that I know Mrs. *Sallie M. Hough*, the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the *17* day of *Aug*, 19*19*.

That I also know *Mrs. Alice Webb*, witness to the marriage, and I also know

that both of the foregoing were duly sworn by me *in person* before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *16* day of *Oct*, 19*19*.

(SEAL) *T. H. Deffen* Ordinary.
Edmund G. G. G. County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you (God)."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

Widow's Application

To Be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910—
As Amended by Act of 1919.

County *Fulton*
Name *Mrs. Sallie M. Hough*
Widow of *G. Andrew Hough*
Company *+ 1700*
Regiment *20th S. C.*
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Bird Printing Co. State Printers, Atlanta.

10-23-1919

Sworn to and subscribed before me, this the
17 day of Sept. 19 19
Wm. H. Griffin Ordinary
of Fulton County.

-----27-----day of () Sept.-----19 19

..... Ordinary

of Fulton County

(SEAL)

Ordinary's Certificate

STATE OF GEORGIA,

Wheeler COUNTY }

I, Thos. L. Dobbins, Ordinary of said County, certify that I know

the applicant David W. Dobbins, for pension is the person he represents himself to be and resides in said county. That I also know he is in Georgia the witness swearing to the

service; that they are both residents of said county and were duly sworn by me before signing the foregoing Affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn and Official seal of office this 15 day of Oct 1919
of Wheeler County }
(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall read applicant and witnesses in the following words: "You are sworn to the truth under penalty of perjury. If you make any untrue statement, you shall be liable to the laws of the State of Georgia." 2. All witnesses must be sworn to before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

Nantz, David M.
Confederate

No. 10112
Confederate

Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Wheeler
Name David M. Nantz
Company Chas. T. Telford's
Regiment Jeff. Johnson's
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-23-1919

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, Thos H. Jeffers Ordinary of said County, certify that I know the applicant David M. Houk for pension is the person he represents himself to be and resides in said county. That I also know W. M. Gault the witness swearing to the service; that they are both residents of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 15 day of Oct 1919

Thos H. Jeffers Ordinary
of Fulton County.

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

Handwritten: David M. Houk, Capt. Chas. Terrell's Co., Johnson's Regt 2d Militia Cav.

North Fulton	
Confederate	
Soldier's Application	
Under Act 1910 - As Amended by Act of 1912.	
County	<u>Fulton</u>
Name	<u>David M. Houk</u>
Company	<u>Chas. Terrell's</u>
Regiment	<u>Johnson's</u>
Approved	<u>[Signature]</u>

J. W. LANGFORD,
Commissioner of Pensions,
Bapt. Printing Co. 200 N. Peachtree, Atlanta.

10-23-1919

Handwritten: Capt. Chas. Terrell's Co., Johnson's Regt 2d Militia Cav.

Application for Soldier's Pension Under Act 1910

Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,

Fulton COUNTY.

David M. Houk of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office) David M. Houk, 45 S. McDonnell St.
2. How long and since when have you been a continuous resident citizen of this State? 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? Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) August, 1864, Dawson, Ga., Co. Col. Jeff. Terrell, Capt. Chas. Terrell, 2d. Cavalry
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) From Philadelphia, Pa. to Surrender
6. When and where was your Company and Regiment surrendered or discharged from the Service? Kinston, Ga., May 12, 1865
7. Were you actually present with your command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were.
- a. Where was your command when you left it? Never left command until after surrender
- b. When did you leave the command?
- c. For what cause did you leave?
- d. By whose authority did you leave?
- e. For how long was your leave granted? In what way?
- f. Why did you not return to your command after leave expired?
- g. In what way were you prevented?
- h. What effort did you make to return?
- i. Were you captured during the war? No
- j. If so, when, and where? In what prison were you held and when were you released?
9. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Never applied

Sworn to and subscribed before me, this the

15 day of October 1919

Adrian W. Langford Ordinary
of Fulton County.
(SEAL)

Handwritten: David M. Houk

Questions for Witness as to Service

STATE OF GEORGIA,

Fulton COUNTY,

County,

Gordon

W. M. Curtis of said State and County is hereby presented as a witness in support of the application of David M. Houk for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? W. M. Curtis, Gordon Co., Ga.
2. How long and since when have you known David M. Houk the applicant? Since August 1864
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? Fulton Co., and lived in Ga. ever since I have known him
4. When, where and in what Company and Regiment did David M. Houk enlist during war from 1861 to 1865? (Give date and place). August 1864, Barton Co., Ga. to Capt. Terrell's Co., Col. Jeff Johnson's Reg., Gen. W. F. Wofford
5. How did you obtain your information of this Service? I was member of Co. 208, same regiment
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date). From enlistment to surrender
7. When and where was his command surrendered or discharged (give date and place). Kingsland, Ga., May 12, 1865
8. Were you personally present at the surrender? Yes
9. If not, where were you and how came you there?
10. Was the applicant personally present with his command at surrender? Yes
11. If not where was he and how came him there?
12. When did he leave his command? Never left command until after surrender Where was his command when he left it? For what cause did he leave? By whose authority did he leave? and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically.
13. In what way was he prevented from returning to his command? How do you know?
14. What effort did he make to return to his command and how do you know?
15. Was applicant captured as a prisoner? No If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the

8 day of October, 1919

of Fulton County,

(SHEAL)

W. M. Curtis
William B. Buehler Ordinary

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Mrs Fannie M. Houk, the applicant, and that she is the lawful widow of David M. Houk, who was on the Pension Roll of said Fulton County, and was paid a Pension from Fulton County for 1928, and at the time of his death on the 1 day of March, 1928, there was due to him and unpaid his Pension of _____ Dollars from the State of Georgia, and I know _____, the within

witness, and he is of a truthful and trustworthy character and entitled to full credit.
Given under my hand and seal this 21 of March, 1928.

(Seal of Ordinary)

Thos H. Jeffries
Ordinary
Fulton County

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Mrs Fannie M. Houk, the applicant, and that she is the lawful widow of David M. Houk, who was on the Pension Roll of said Fulton County, and was paid a Pension from Fulton County for 1928, and at the time of his death on the 1 day of March, 1928, there was due to him and unpaid his Pension of _____ Dollars from the State of Georgia, and I know _____, the within

witness, and he is of a truthful and trustworthy character and entitled to full credit.
Given under my hand and seal this 12 of March, 1928.

(Seal of Ordinary)

Thos H. Jeffries
Ordinary
Fulton County

Houk, D. M.

Fulton County

1928

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs Fannie M. Houk
Widow of David M. Houk
Date of Marriage Sept 4 1899
Date of Death March 1 1928

Approved and ordered paid.

John W. Clark 192
22 March 19 JOHN W. CLARK,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-roll for permanent filing in the Pension Department.

30

Houk, David M.

SECOND QUARTER 1928

Fulton County

1928

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs Fannie M. Houk
Widow of David M. Houk
Date of Marriage Sept 4 1899
Date of Death March 1 1928

Approved and ordered paid.

John W. Clark 192
22 May 19 JOHN W. CLARK,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money, and then return it with your pay-roll for permanent filing in the Pension Department.

30

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Mrs. Fannie M. House of said County, who after being duly sworn, on oath says that she is the widow of

David M. House and that said Pensioner was on the Pension Roll of Fulton County and was paid a Pension of Fifty (\$50.00) Dollars from said County for 4th Quarter, 1927, and that the said Pensioner died in Fulton County on the 1 day of March, 1928.

Applicant further swears that she married the said David M. House on the 4th day of Sept, 1889, in Muscogee County and State of Ga, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the 1st Qr. Pension, 1928, due and unpaid be paid to her.

Sworn to and subscribed before me this 19 day of April, 1928.
William R. Warburton, Ordinary } Miss Fannie M. House (L. S.)
Fulton County }
 (Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Fulton County.

Personally before me comes E. F. Chidress, who on oath says that he knew David M. House while in life and that he knows Mrs. Fannie M. House, the above applicant; and knows that the said David M. House and Fannie M. House were in due form of law married in the County of Fulton in the State of Georgia on the 1 day of March, 1928, and that they were residing together as husband and wife at the time of his death on the 1st day of March, 1928, and that she is his dependent widow.

Sworn to and subscribed before me this 19th day of March, 1928.
William R. Warburton, Ordinary } E. F. Chidress
Fulton County }
 (Seal of Ordinary)

INSTRUCTIONS:

1st. Proof of marriage must be made.
 2nd. Do not use the emergency large form of marriage certificate in common vases throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seal attached, and that both of application, when filled in, are filed in the Pension Department and returned to you as your authority to make the pension.
 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the pension.
 5th. Return this application with your final settlement to the Pension Department.
 6th. The widow or person holding her proper power-of-attorney receipt for this pension by signing name, as widow, opposite the name of husband on the earlier pay roll.
 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to roll in her own right.

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow)

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Mrs. Fannie M. House of said County, who after being duly sworn, on oath says that she is the widow of

David M. House and that said Pensioner was on the Pension Roll of Fulton County and was paid a Pension of Fifty (\$50.00) Dollars from said County for 1st Quarter, 1928, and that the said Pensioner died in Fulton County on the 1st day of March, 1928.

Applicant further swears that she married the said David M. House on the 4th day of Sept, 1889, in Muscogee County and State of Ga, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the 1st Qr. Pension, 1928, due and unpaid be paid to her.

Sworn to and subscribed before me this 12 day of April, 1928.
William R. Warburton, Ordinary } Miss Fannie M. House (L. S.)
Fulton County }
 (Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Fulton County.

Personally before me comes see application, who on oath says that he knew see application while in life and that he knows Mrs. see application, the above applicant; and knows that the said see application and see application were in due form of law married in the County of see application in the State of see application on the see application day of see application, 1928, and that they were residing together as husband and wife at the time of his death on the see application day of see application, 1928, and that she is his dependent widow.

Sworn to and subscribed before me this see application day of see application, 1928.
see application, Ordinary }
see application County }
 (Seal of Ordinary)

INSTRUCTIONS:

1st. Proof of marriage must be made.
 2nd. Do not use the emergency large form of marriage certificate in common vases throughout the State, suitable only for framing. Such certificate is entirely too bulky for use in any pension application. A plain certificate written on the back of the copy of marriage license is the proper thing.
 3rd. The Ordinary should examine the blank after it is filled in, and see that everything is fully and correctly completed, and the seal attached, and that both of application, when filled in, are filed in the Pension Department and returned to you as your authority to make the pension.
 4th. Pay out no money on this application until approved in the Pension Department and returned to you as your authority to make the pension.
 5th. Return this application with your final settlement to the Pension Department.
 6th. The widow or person holding her proper power-of-attorney receipt for this pension by signing name, as widow, opposite the name of husband on the earlier pay roll.
 7th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to roll in her own right.

CERTIFICATE OF ORDINARY

STATE OF GEORGIA

Fulton County.

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Fannie McHarris the applicant, and that she is the lawful widow of David McHarris, who was on the Pension Roll of said Fulton County, and was paid a Pension from Fulton 3rd Quarter County for 1928, and at the time of his death on the _____ day of _____, 1928, there was due to him and unpaid his Pension of _____ Dollars from the State of Georgia, and I know _____, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 30 of Sept, 1928

(Seal of Ordinary)

Thos H. Jeffries, Ordinary
Fulton, County

Hocky, D.M.

FOURTH QUARTER 1928

Fulton County

1928

Application for Pension Due
Deceased Soldier

(UNDER ACT 1921)

(To be paid to his Widow)

BY

Fannie McHarris
Widow of David McHarris

Date of Marriage

Date of Death 9-1 1928

Approved and ordered paid.

Oct. 20 1928

JOHN W. CLARK,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this back to Pension Department for approval. When returned to you, you must then return it with your pay-roll for pension filing in the Pension Department.

92

No.

MARRIAGE LICENSE

Georgia, Muscogee County,

To any ordained Minister of the Gospel, Jewish Minister, Judge, or Justice of the Peace:

YOU ARE HEREBY AUTHORIZED TO JOIN

David M. Houk and Fannie Massey
in the Holy State of Matrimony, according to the Constitution and laws of this State, and for which this shall be your sufficient license, to be returned at once to this office, with your certificate of fact and date of marriage.

Given under my hand and seal, this 3rd day of September 1889 19...

(L.S.) J. J. P. P. Ordinary.

Georgia, Muscogee County,

I do hereby certify that David M. Houk and

Fannie Massey were duly joined in Matrimony by me this 4th day of September 1889 19...

A. M. Williams
Minister,
Ordinary's Office.

State of Georgia, } S.S. E. H. Hunter, Clerk of the
Muscogee County }

Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of the Marriage License and Certificate of Marriage of David M. Houk and

Fannie Massey with the original record thereof, now remaining in this office and the same is a correct transcript therefrom, and of the whole of such original record, and that said Court is a Court of Record.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this 13th day of March 19 28.

E. H. Hunter
Clerk of Ordinary.

Ordinary's Office.

State of Georgia, } S.S. I. R. J. Hunter, Ordinary of said County, and presiding
Muscogee County }

Magistrate of the Court of Ordinary thereof, do hereby certify that the above attestation subscribed by...

E. H. Hunter, as Clerk of said Court, is sufficient and in due form of law, that his signature thereto is genuine.

Witness my hand and official signature, this 13th day of March 19 28.

E. H. Hunter
Ordinary.

FULTON COUNTY



GEORGIA

THOMAS H. JEFFRIES

ORDINARY (AND
Judge of the Court of Ordinary of Fulton County
ATLANTA, GA.

GEORGIA, FULTON COUNTY.

Personally appeared Mrs. J. W. Kendley, who swears that she is personally acquainted with Mrs. Fannie M. Houk the is the widow of David M. Houk, she further swears that the said Mrs. Fannie M. Houk was taken very sick and it became necessary for a niece of hers who resides in Homestead, Florida to carry her aunt to her home, hoping that the change would be beneficial to Mrs. Houk. Since going to Florida Mrs. Houk has continued to be very sick and will not be able to return in time to file an application to draw the fourth quarterly pension payment which was due her husband, David M. Houk. Mrs. Kendley makes this affidavit with a request that the pension commissioner will allow Mrs. Houk to draw the fourth quarter pension.

The said Mrs. Houk having married too late for her name to be placed on the pension roll.

Mrs. J. W. Kendley

Sworn to and subscribed before me,
this 15th day of October, 1928.

Arthur R. Garbutt

C. C. ORDINARY.

Ordinary.

NAME **Wash, David H.**

YEAR **1920** COUNTY **Fulton.**

WHEN AND WHERE BORN? **Resident of Georgia all his life.**

ENLISTED WHEN AND WHERE? **Aug. 1864 in Barton Co. Ga.**

RANK:

COMPANY AND REGIMENT? **Capt. Chas. Terrell's Co. Johnson's Regt. Ga.
Militia Cavalry.**

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? **May 12, 1865 at Kingston, Ga.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: **W.M. Curtis-----Same Regiment----- no data.**

BURIED:

WITNESSES: W.M.Curtis-----Same Regiment----- no data.

POWER OF ATTORNEY.

STATE OF GEORGIA.

CORRETT.

I.

hereby authorize

to receive and receipt for the pension paid herein, and request that he remit same to

In Witness Whereof, I have hereunto set my hand and seal, this

day of

1903.

[L. S.]

Executed in presence of

To Those Heretofore Paid.

1903.

(From the 1st to 1902)

No. 59

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. M. M. House

OF

Fulton County,

Widow of J. W. House,

Co. B Regiment 16th In.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

123

1903.

AND HANDLED TO

[Signature]

W. W. HARRISON, STATE PRINTER, ATLANTA, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____, hereby authorize

of _____

to receive and receipt for the pension paid hereon, and request that he remit same to

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1903.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____, hereby authorize

of _____

to receive and receipt for the pension paid hereon, and request that he remit same to

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1904.

[L. S.]

Executed in presence of

Harris, M. M. (Mrs.)

Fulton Co

To Those Herebefore Paid.

1903.

No. *59*

WIDOW'S PENSION,

For year ending Dec 31, 1903.

PAID TO

Mrs. M. M. Harris

OF

Charlton County,

Widow of *J. M. Harris*

Co. B. Regiment 16th In

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

423 1903.

AND HANDED TO

CHH

W. H. HARRISON, State Printer, Atlanta, Ga.

Harris, M. M. (Mrs.)

Fulton County

TO THOSE HERETOFORE PAID.

1904.

No. *5254*

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. M. M. Harris

OF

Fulton County,

Widow of

Co. *B* Regiment 16th In

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

425 1904.

AND HANDED TO

CHH

W. H. HARRISON, State Printer, Atlanta, Ga.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES Mrs.

M. M. House

who, being sworn says on oath, that she is a bona fide resident of said County of

Fulton

State of Georgia, and that she has RESIDED in said State

continuously ever since Nov 16 1839

That she is the Widow of

J. T. House

who was a soldier in Company

B of the 16th

Regiment of Inf

Volunteers, that he enlisted in said regiment on or about the month of March

1862, and served in the Army up to April

1865. That he lost his

life on the

22d

day of Nov

1870

(State here

particulars of the husband's death, when, where and from what cause.) Contracted Crime, Scurvy, while in service from he never recovered but died of the disease.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854.

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this 14th day of June 1903.

M. M. House

Ordinary.

Post-Office

State of Georgia,

Fulton County.

John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. M. M. House

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 16th

day of Nov

1839

Given under my official signature and seal, this 14th day of June 1903.

John R. Wilkinson

Ordinary of

County.

{ Official }
{ Seal }

NOTE—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES Mrs.

M. M. House

who, being sworn, says on oath that she is a bona fide resident of said County of

Fulton

State of Georgia, and that she has RESIDED in said State

continuously ever since Nov 16 1839

That she is the Widow of

J. T. House

who was a soldier in Company

B of the 16th

Regiment of Inf

Volunteers, that he enlisted in said regiment on or about the month of March

1862, and served in the Army up to April

1865. That he lost his

life on the

22d

day of Nov

1870

(State here

particulars of the husband's death, when, where and from what cause.) Contracted Crime, Scurvy, while in service from which he died.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1839.

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 14th day of June 1904.

M. M. House

John R. Wilkinson

Ordinary.

Post-Office

State of Georgia,

Fulton County.

John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. M. M. House

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 16th

day of Nov

1839

Given under my official signature and seal, this 14th day of June 1904.

John R. Wilkinson

Ordinary of

County.

{ Official }
{ Seal }

NOTE—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, 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 _____ 1905.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

of

to receive and receipt for the pension paid hereon, and request that he remit same to

at

In Witness Whereof, I have hereunto set my hand and seal, this
day of _____ 1906.

[L. S.]

Executed in presence of

House, M. M. (Mrs.)
Fulton County
To Those Hereof Paid.

1905.

No. 137

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs. M. M. House

OF

Fulton County,

Widow of J. J. House

Co. C. 1st Regiment 1st Div.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

124 1905.

AND HANDED TO

M. M.

The Pensioners' and Pensions Co., Atlanta,
Geo. W. Lindsey, Secretary, and Bank Payee.

FOR WIDOWS HEREOF ALLOWED PENSIONS

House, M. M. (Mrs.)
Fulton County
To Those Hereof Paid.

1906.

No. 64 D

WIDOW'S - PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. M. M. House

OF

Fulton County,

Widow of J. J. House

Co. C. 1st Regiment 1st Div.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

125 1906.

AND HANDED TO

M. M.

The Pensioners' and Pensions Co., Atlanta,
Geo. W. Lindsey, Secretary, and Bank Payee.

FOR WIDOWS HEREOF ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

M. M. House

who, being sworn says on oath, that she is a bona fide resident of said County of

Fulton

State of Georgia, and that she has RESIDED in said State

continuously ever since

all her life

That she is the Widow of

3

of the

16th

Regiment of

Georgia

Volunteers, that he enlisted in said regiment on or about the month of

March

1862, and served in the Army up to

1865

That he lost his

life on the

day of

Nov.

1875

(State here

particulars of the husband's death, when, where and from what cause.)

Died 1875

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1868

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me,

this JAN 2 day of 1905

Public Ordinary.

Post-Office

Atlanta

State of Georgia,

Fulton County.

I,

John P. Richardson

Ordinary of said County, certify that I am well

acquainted with Mrs. M. M. House, Who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the

day of 18

Given under my official signature and seal, this JAN 2 day of 1905 1905.

John P. Richardson

Ordinary of

Fulton

County.

Official Seal.

NOTE.—All blank spaces must be filled. Voucher and Affidavit must bear date after January 1st, 1905.

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

M. M. House

who, being sworn, says on oath that she is a bona fide resident of said County of

Fulton

State of Georgia, and that she has RESIDED in said State

continuously ever since

Birth

That she is the Widow of

J. P. House

who was a soldier in Company

of the

16th

Regiment of

Ga.

Volunteers, that he enlisted in said regiment on or about the month of

March

1862, and served in the Army up to

1865

That he lost his

life on the

day of

1875

(State here

particulars of the husband's death, when, where and from what cause.)

Died 1875

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1868

I have been paid a pension as a resident of Fulton County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me

this JAN 1 day of 1906

John P. Richardson Ordinary.

Post Office

M. M. House

State of Georgia,

Fulton County.

I, John P. Richardson

Ordinary of said County, certify that I am well acquainted with Mrs. M. M. House, who made the above affidavit, and

am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the

day of 18

Given under my official signature and seal, this JAN 1 day of 1906.

John P. Richardson

Ordinary of

Fulton

County.

Official Seal.

NOTE.—All blank spaces must be filled. Voucher and Affidavit must bear date after January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I hereby authorize

to receive and receipt for the pension paid hereon, and request that he remit same to

In Witness Whereof, I have hereunto set my hand and seal, this

day of 1907.

[L. S.]

Executed in presence of

House, M. M. (Mrs.)

To Those Heretofore Paid.

1907.

No. 1-2

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO
Mrs. M. M. House

OF
Fulton County,

Widow of T. House
Co. 16th Regt. Va.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT ISSUED

AND HANDED TO

Don W. Burrows, State Printer, Atlanta

House, M. M. (Mrs.)

Robt Co

For Fulton

County

1927

Application for Pension
Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Thos H. Jeffries Ordinary

For Mrs M. M. House

Date of Death Feb 7 1927

Amount \$100.00

Approved and ordered paid of.

John W. Clark

JOHN W. CLARK

MAY 21 1927 Commissioner of Pensions

Ordinary. Fill out above in full and send this blank to Pension Department for approval. Do not pay out the money until the approved blank is in your hands giving you authority to do so. Send back to the Pension Department with your receipted payroll to be permanently filed with them. Do not keep this application in your office.

Paid

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

M. M. House

who, being sworn says on oath, that she is a bona fide resident of said County of

State of Georgia, and that she has RESIDED in said State

continuously ever since 1839 That she is the Widow of

who was a soldier in Company

of the 16th Regiment of Pa

Volunteers, that he enlisted in said regiment on or about the month of March

1862, and served in the Army up to 1865 That he lost his

life on the 18th day of July (State here

particulars of the husband's death, when, where and from what cause.)

Since 1875

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1859

I have been paid a pension as a resident of Fulton County, for the year ending December 31, 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me

this JAN 2nd day of JAN 2nd 1907.

John R. Wilkinson, Ordinary.

Post Office

State of Georgia,

I, John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. M. M. House, 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 1859

Given under my official signature and seal, this JAN 2nd day of JAN 2nd 1907.

Official Seal

John R. Wilkinson

Ordinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1907.

Application for Pension Due to a Deceased Pensioner

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)

(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes

James J. Condon of Bond & Condon Co. of said County, who, after being sworn, on oath says that he knows Mrs. Margaret House of said County, and that said Pensioner

was on the Pension Roll of said County at the time of death, which occurred in Fulton

County, in this State, on the 6 day of February 1927, and that

a Pension of \$50 (\$ 50) Dollars was due pensioner and

unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and

no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 100 per

sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

James J. Condon, Ordinary

Fulton County

James J. Condon

(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, James H. Jeffries, Ordinary of said County, do certify

that I personally know James J. Condon of said County, 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. M. House while in life and that this was

the same person whose name appears on the Pension Roll of Fulton County, and

was paid a Pension of Two Hundred (\$ 200) Dollars

in said County for 1926, and I now believe said pensioner to be dead; and that the instructions at the foot of

this voucher have been carefully observed in making up this voucher and the bills which are attached hereto

Given under my hand and official seal, this 16 day of Feb 1927

(Seal or Ordinary) James H. Jeffries, Ordinary

Fulton County

DIRECTIONS.

1st. Requires those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

2nd. Each account must be sworn to before the Ordinary, and in the following form: "Do not use the terms: 'just, true, due, unpaid,' etc."

"The above and foregoing account is rendered for services in the last illness for funeral expenses, as the case may be of

who died without owning sufficient property to pay this bill.

3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this

blank, and the bills must be properly completed to collect.

4th. The completed voucher, this blank and the bills must be sent to the Pension Department for approval and no money must be paid

until it is returned to you as your authority to make the payment.

5th. The Ordinary signs per roll, as Ordinary, for the pension and then delivers the money himself and takes receipt.

6th. Return this application, and attached bills, with your final settlement, to the Pension Department.

7th. Ordinary should see that the back of this blank, when folded, is filed out.

ED. BOND & CONDON CO.
FUNERAL DIRECTORS

135 Ivy Street . . . Phone Walnut 1768
ATLANTA, GA.
AMBULANCE SERVICE

Funeral of Mrs Margrett M. House

535 Whitehall Street
Atlanta Ga.

Casket	\$60.00
Burial Case	5.00
Embalming	15.00
Dress	10.00
Hearse	10.00
	100.00

GEORGIA. FULTON COUNTY.

Personally before the undersigned authority now comes James J. Condon, who upon oath says that he is secy. of Ed. Bond & Cond Co. and that the above statement of account of just, true, due and unpaid.

Sworn to and subscribed before me
this Feb'y. 15, 1927.

Ed. Bond
Notary Public Fulton Co., Ga.

2/15/27

James J. Condon
Secy

GEORGIA, *De Kalb* County.

I Certify, That *Mrs M. M. House*

the holder of this Certificate was *Invalid*

Pensioner,

and paid the sum of *Twenty*

Dollars

from this County, in 1902, and that he, or she, now resides in *Fulton*

County.

Given under my hand and official signature, this *Jan 10*

1903.

Wm Ragsdale
Ordinary