

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, W. P. Meador hereby authorize My Wife
Mary H. Meador of Atlanta Ga. 602 E. 1st St
 to receive and receipt for the pension paid hereon and request that he remit same to
Me by in Person
 at 602 E. 1st St Atlanta Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2
 day of March 1900.

W P Meador [L. S.]

Executed in presence of
J. H. Stearns A. P.

Meador W. P.
Fulton County

(For These Already Enrolled.)

No. 574

INVALID

SOLDIER'S PENSION.

1900.

Name W. P. Meador

County Fulton

Disability

Amount, \$ 100.00

Warrant issued Only 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Mary H. Meador
Gen. W. Harrison, State Prison, Atlanta.

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 _____ 1901.

[L. S.]

Executed in presence of

Meador W. P.
Fulton County
 (For These Already Enrolled.)

No. 337

DISABLED

SOLDIER'S PENSION.

1901.

Name W. P. Meador

County FULTON

Disability been right leg

Amount, \$ 100.00

May 21 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. P. Meador
Gen. W. Harrison, State Prison, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Sulton County.

Personally appears N. P. Meador of Sulton 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 Sept. 1899; 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 as a Private in Company 1st, of 1st Regiment of Georgia Volunteers, Cross's Brigade; that whilst engaged in such military service in the State of Geo, on the 16 day of April 1862, he was wounded, injured or diseased as follows:

Lost right leg -

Deponent makes application for the pension to which he is entitled for the year ending October 31st, 1900. I have heretofore under said law as a resident of Sulton County been allowed an invalid pension of \$100.00 Dollars, for the year 1899.

Sworn to and subscribed before me, this, 10 day of March 1900. N. P. Meador POST OFFICE

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

STATE OF GEORGIA,

Sulton County.

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

Given under my official signature and seal, this 4 day of March 1900.

Ordinary Sulton County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Sulton County.

Personally appears N. P. Meador of Sulton 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 Sept 1899; 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 as a Private in Company 1st, of 1st Regiment of Georgia Volunteers, Cross's Brigade; that whilst engaged in such military service in the State of Geo, on the 16 day of April 1862, he was wounded, injured or diseased as follows:

Lost right leg

Deponent makes application for the pension to which he is entitled for year ending October 31st, 1901. I have heretofore under said law as a resident of Sulton County been allowed an invalid pension of \$100.00 Dollars, for the year 1900.

Sworn to and subscribed before me, this, 20 day of January 1901. N. P. Meador Postoffice Atlanta Ga

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

STATE OF GEORGIA,

FULTON County.

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

Given under my official signature and seal, this 21 day of January 1901.

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 _____ 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 _____ 1908.

[L. S.]

Executed in presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 79

DISABLED

SOLDIER'S PENSION
1902.

Name *W P Meador*

County FULTON

Co. _____ Regiment *1st*

Disability *lose right leg*

Amount, \$ *100.00*

Cobb Legion

1st Co

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W P Meador

Gen. W. Harrison, Rear Prisoner, Atlanta.

(FOR THOSE ALREADY ENROLLED.)

No. 93

DISABLED

SOLDIER'S PENSION
1903.

Name *W P Meador*

County *Fulton*

Co. *1st* Reg Regiment *1st*

Disability *lose right leg*

Amount, \$ *100.00*

1/21 1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W P Meador

Gen. W. Harrison, Rear Prisoner, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

FULTON County.

Personally appears W P Meador 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 Sept 1889; 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 1st of Art Regiment of Cobb's Legion Volunteers, Cobb's's Brigade; that whilst engaged in such military service in the State of Ga, on the 16 day of April 1862, he was wounded, injured or diseased as follows:

Lost right leg

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 One Hundred Dollars, for the year 1901.

Sworn to and subscribed before me, this the 18th day of JAN 1902. Post-office W P Meador

John P. Wilkinson
Notary Public for the State of Georgia.
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 P. Wilkinson Ordinary of said County, do certify that I am well acquainted with W P Meador the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 18th day of JAN 1902.



John P. Wilkinson FULTON County.
Notary Public for the State of Georgia.
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,

County.

Personally appears W P Meador 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 Sep 1889; 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 1st of Art Regiment of Cobb's Leg Volunteers, Ga's Brigade; that whilst engaged in such military service in the State of Ga, on the 16 day of Apr 1862, he was wounded, injured or diseased as follows:

Lost right leg

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 FULTON County, been allowed an invalid pension of 100 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 18th day of JAN 1903. Post-office W P Meador

John P. Wilkinson
Notary Public for the State of Georgia.
Note.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

County.

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

Given under my official signature and seal, this 18th day of JAN 1903.



John P. Wilkinson County.
Notary Public for the State of Georgia.
Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

by _____

at _____

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

day of _____ 1904.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

by _____

at _____

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

day of _____ 1905.

[L. S.]

Executed in the presence of _____

ONE SECTION 1260.
(FOR THOSE ALREADY ENROLLED.)

No. 60

DISABLED

SOLDIER'S PENSION

1904.

Name J. P. Meador

County Fulton

Disability lost right leg

Amount, \$ 117.00

1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

One W. Harrison, State Prison, Ga.

no date

ONE SECTION 1260.
(FOR THOSE ALREADY ENROLLED.)

No. 37

DISABLED

SOLDIER'S PENSION

1905.

Name J. P. Meador

County Fulton

Disability lost right leg

Amount, \$ 100.00

1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

One W. Harrison, State Prison, Ga.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears W. P. Meador of

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of Sept 18 88; 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 Co. of Artillery of the 1st Regiment of Volunteers 1st Brigade; that whilst engaged in such military service in the State of Ga, on the 16 day of Apr 1882, he was wounded, injured or diseased as follows:

Lost right leg

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of Fulton County, been allowed an invalid pension of 100 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 21 day of JAN 1904.

John R. Wilkinson

Post-office

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. P. Meador the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 day of 1904.

Ordinary

Fulton County.

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

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



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally appears W. P. Meador 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; 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 Co. of Artillery of the 1st Regiment of Volunteers 1st Brigade; that whilst engaged in such military service in the State of Ga, on the 16 day of April 1882, he was wounded, injured or diseased as follows:

Lost right leg. Dan + 1 Va.

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

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

John R. Wilkinson

Post-office

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

STATE OF GEORGIA,

Fulton COUNTY.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with W. P. Meador the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 day of 1905.

Ordinary

Fulton County.

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

NOTE.—All vouchers and affidavits must bear date after January 1, 1905.



POWER OF ATTORNEY.

STATE OF GEORGIA,

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 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

by _____

at _____

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

day of _____ 1907.

[L. S.]

Executed in presence of _____

Mealey W.P.
Fulton Co.
Count Received 1907.
(FOR THOSE ALREADY ENROLLED.)

No. 33

DISABLED
SOLDIER'S PENSION
1906.

Name *W.P. Mealey*
County *Fulton*

Co. *Regiment*

Disability *Left Right Leg*

Amount, \$ *100.00*

1906.

No. 48

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W.P. Mealey

Not Received by Pensioner until _____, 1906.

no date

Mealey W.P.
Fulton Co.
Count Received 1907.
(FOR THOSE ALREADY ENROLLED.)

No. 48

DISABLED
SOLDIER'S PENSION
1907.

Name *W.P. Mealey*
County *Fulton*

Co. *Regiment*

Disability *Left Right Leg*

Amount, \$ *100.00*

1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W.P. Mealey

Not Received by Pensioner until _____, 1907.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears W. P. Meador 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; 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 of 1st Regiment of Volunteer Legion's Brigade; that whilst engaged in such military service in the State of Ga, on the 16 day of April 1862, he was wounded, injured or diseased as follows:

Lost Right leg. Don't see.

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1906. I have heretofore, under said law, as a resident of Fulton County, been allowed an invalid pension of One Hundred Dollars, for the year 1905.

Sworn to and subscribed before me, this the

day of JAN 1 1906 1906.

+ W P Meador

Post-Office Atlanta Ga

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

State of Georgia,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with W. P. Meador the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears W. P. Meador 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; 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 of 1st Regiment of Volunteer Legion's Brigade; that whilst engaged in such military service in the State of Ga, on the 16 day of April 1862, he was wounded, injured or diseased as follows:

Lost right leg.

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1907. I have heretofore, under said law, as a resident of Fulton County, been allowed an invalid pension of One Hundred Dollars, for the year 1906.

Sworn to and subscribed before me, this the

day of JAN 2 1907.

+ W P Meador

John R. Wilkinson

Postoffice

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

State of Georgia,

Fulton County.

I, John R. Wilkinson Ordinary of said County,

do certify that I am well acquainted with W. P. Meador the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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

day of 1907.

John R. Wilkinson

Ordinary Fulton County.



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

Application for Pension Due Deceased Soldier

To be paid to his widow or dependent children.

UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA, Fulton County.

Personally before me comes Mrs. Mary Hannah Meador, of said county, after being duly sworn, on oath says that she is the widow of William Pascal Meador who was duly enrolled as a Private Pensioner from the county of Fulton and was paid a Pension of \$100.00 Dollars from Fulton county for 1912, and that the said William Pascal Meador died in Fulton county on the 22 day of January, 1913, and at the time of his death a Pension of \$100.00 was due him from Fulton county and unpaid for 1913. Applicant further swears that she married the said William Pascal Meador on the 10 day of January, 1875, in Alabama county and State of Alabama, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 28th day of March, 1913.
John R. Wilkinson Ordinary. Mrs. Mary H. Meador (L.S.).
Fulton County.

AFFIDAVIT OF WITNESS.

GEORGIA, Fulton County.

Personally before me comes Jimmie L. White, who on oath says that he knew William Pascal Meador while in life and that he knows Mrs. Mary Hannah Meador the above applicant; that he knows that the said William Pascal Meador and Mrs. Mary Hannah Meador were in due form of law married in the county of Alabama in the State of Alabama on the 10th day of January, 1875, and that they resided together as husband and wife from date of marriage to the day of his death on the 22nd day of January, 1913, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 28th day of March, 1913.
John R. Wilkinson Ordinary. J. L. White
Fulton County.

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

of January 1913, and I now know that she is his dependent widow.
 Signed to and subscribed before me this 28th day of March 1913.
John A. Westbrook Ordinary.
Fulton County.

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

GEORGIA Fulton County.

I, Ordinary of said county, do certify that I personally know the applicant, and that she is the lawful widow of the Pension Roll of said county, and was paid a Pension from the county for 19 and at the time of his death on the day of 1913, there was due to him and unpaid his Pension of Dollars from the State of Georgia, and I know the within witness, and he is of a truthful and trustworthy character and entitled to full credit.
 Given under my hand and seal this day of 1913.
Ordinary,
County.

MEALOR, W. P.
Fulton County

No. 1913

Application for Pension Due Deceased Soldier UNDER ACT 1891

To be paid his Widow or Dependent Children
BY

Mrs. Mary H. Mealor
 Widow of W. P. Mealor
 of Fulton County
 Co. Regt. Vols.

Approved and paid

191

J. W. LINDSEY,
Commissioner of Pensions.

GEORGIA Fulton 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: 19

Audited _____ 1891.

COMPTROLLER-GENERAL.

Mealor, W. P.

Fulton

1891.

Maimed Soldiers.

Voucher No. 78

Amount \$ 100

Paid to W. P. Mealor

For Loss of leg

Decij 4. 1891.

Included in warrant No. _____

issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

applicant.

1891.

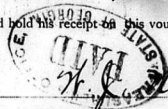
No. 78

STATE OF GEORGIA, }
EXECUTIVE DEPARTMENT. }

Atlanta, Ga. July 4 1891.

Mr. W. P. Meador, 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
Loss of leg.
He is entitled to receive the sum of One Hundred & 00/100 Dollars
for such disability, the same being the allowance due for the year ending October 24, 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.

GOVERNOR.

\$ 100⁰⁰

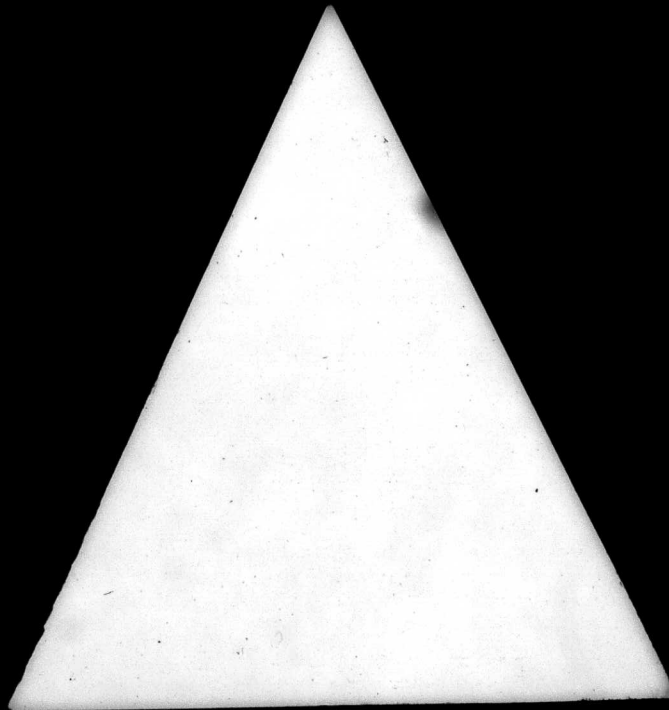
RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

One Hundred Dollars,

per above voucher, this 11 of July 1891.

W. P. Meador

One Hundred Dollars,
per above voucher, this *11* of *July* 1891
W. P. McLean



NOTES.

In order to avoid unnecessary delay to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers as well as the manner of applying for the same, the following suggestions are submitted.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physicians, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, he should give a full and plain statement of the disease, tracing the disability by means of the medical records to the present time.

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

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

4. The application is for a wounded leg. It would seem to be a fair construction of the Act and the regulations that the applicant should not only state the nature of the injury, but also the use of crutch or stick, that the leg is "useless," unless the injury is such as to require the constant use of crutch or stick.

5. If papers are returned for correction, and amendments are added to them, 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.

6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case. The names of the several counties are specially requested to call the attention of the physicians and applicants to these points.

Medley, George W.
Fulton Co.

Medley, George W.

No. 2695

APPLICATION FOR ALLOWANCE

FOR

Disabled by Disease
Applicant, Geo. W. Medley

County, Fulton

Amount, 50

Date of Warrant, Nov 6

Entered on Record

Nov 6

M. H.

SECRETARY EXECUTIVE DEPARTMENT.

Applicant

(2.3)

It is hereby certified that the foregoing is a true and correct copy of the original as the same appears in the files of the Executive Department.

Witness my hand and seal at Albany, N. Y., this 1st day of November, 1889.

10-27-89

NOTES.

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

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

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

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

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

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

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

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

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,

County.

PERSONALLY appears Geo. W. Medley 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 25th day of March 1828; 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 Robertson's of Volunteers Hammann's Brigade; that whilst engaged in such military service, as the battle of in the State of Georgia, on the 22nd day of October 1864, he was wounded as follows: from duty in the Swamp of Okefenokee and from exposure conducted from that place in his eyes, produced many inflammations which have rendered me unable for work ever since with little or no hope of his ever recovering the use of his eyes

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

Sworn to and subscribed before me, this the

25th day of Oct 1889 } Geo. W. Medley
La. Russell King Mark
W. H. Leatham
Ordinary

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA,

Fulton County.

PERSONALLY came before me Geo. W. Medley of the county of Fulton State of Georgia, who, being duly sworn says that he was private in Company Robertson's Bat. Regiment of Cavalry Volunteers, and that deponent knows Geo. W. Medley, and that he received the wound (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wound (or disease) permanently disables the said Geo. W. Medley as stated by him in said affidavit. Deponent further states that said Geo. W. Medley is a bona fide citizen of this State and resides in Fulton county.

Sworn to and subscribed before me, this

23rd October 1889 } La. Russell King
W. H. Leatham Mark
Ordinary

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

Medley, George W.
Fulton Co.
Medley, George W.
No. 2665
APPLICATION FOR ALLOWANCE
Directed by Ordinance
Applicant, Geo. W. Medley
Fulton
County
Amount 50
Date of Warrant Nov 1st
Entered on Record Nov 6
1889
W. H. Leatham
SECRETARY EXCISE DEPARTMENT.
Applicant

STATE OF GEORGIA,

County,

PERSONALLY came

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

Sworn to and subscribed before me, this _____ day of _____ 1889

NOTE: Above affidavit must be made by three citizens who personally know all the facts about service and injury applicant received.

STATE OF GEORGIA,

Fulton County,

PERSONALLY comes before me _____ Ordinary of said county, _____ and _____ both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined _____ and after such examination say that the applicant has been injured as follows:

if both eyes were meeting in disorganization, if the membranes & lens were permanently injured to both eyes with severe loss of vision, and almost complete loss of sight. In fact he is now totally blind. Persons generally who are totally blind, because of constant pain, with no hope of a cure.

*Conf. Ready, M. D.
N. H. Davis, M. D.*

Sworn to and subscribed before me, this

28th day of October 1889

W. L. Calhoun Ordinary.

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

STATE OF GEORGIA,

Fulton County,

I, *W. L. Calhoun* Ordinary of said county, do certify that I am well acquainted with *George W. Bradley* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in 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 the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this _____ day of _____ 1889
W. L. Calhoun 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 _____ 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 authorising 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 _____ 1889

Executed in the presence of us: _____ (L.S.)

STATE OF GEORGIA,

Fulton County.

I, W. L. Loeckman Ordinary of said county, do certify that I am well acquainted with Geo. M. Mordant 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 5th day of February 1892

W. L. Loeckman
Ordinary Fulton County.

STATE OF GEORGIA,

Fulton County.

I, W. L. Loeckman Ordinary of said County, do certify that I am well acquainted with Geo. M. Mordant 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 6th day of Feb 1891.

W. L. Loeckman
Ordinary Fulton County.

Medley George W.

1890.

Medley Co.

No. 263

APPLICATION FOR ALLOWANCE.

THE TOLLETT DEEDS OFFICE IN 1891.

—FOR—

£. 00.

Discharge by Andrew

Applicant Geo. M. Mordant

County, Fulton

Amount, 50

Date of warrant, Feb 5

Entered on record Feb 5

1891

W. L. Loeckman

Ordinary Fulton

County.

WARRANT MADE TO

Applicant

Ordinary Fulton

County.

Medley George W.

1891

Medley Co.

Medley George W.

1891

Medley Co.

No. 130

Application for Allowance

THE TOLLETT DEEDS OFFICE IN 1891.

—FOR—

£. 00.

Discharge by Andrew

Applicant Geo. M. Mordant

County, Fulton

Amount, 50

Date of warrant, Feb 6

Entered on record Feb 6

1891

W. L. Loeckman

Ordinary Fulton

County.

WARRANT MADE TO

Applicant

Ordinary Fulton

County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fullon County.

PERSONALLY appears *Geo. W. McCallum* 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 been such continually since the *18th* day of *1864*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *H*, of *Reynolds' Bat. Cav.* Regiment of *Geo.* Volunteers *Reynolds'* Brigade; that whilst engaged in such military service, at the battle of *Atlanta* in the State of *Georgia*, on the *22nd* day of *September*, 1864, he was

wounded as follows: *he was attacked with iron which fell in his eyes destroying the sight of the left eye and nearly destroying his right eye.*

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 *Five* dollars.

Sworn to and subscribed before me, this *10th* day of *February*, 1890.

W. L. McCallum

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

Fullon County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

county, in said State, do hereby appoint

of *Geo. W. McCallum* 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,

Fullon County.

PERSONALLY appears *Geo. W. McCallum* 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 *18th* day of *1864*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *H*, of *Reynolds' Bat. Cav.* Regiment of *Geo.* Volunteers *Reynolds'* Brigade; that whilst engaged in such military service at the battle of *Atlanta* in the State of *Georgia*, on the *22nd* day of *September*, 1864, he was

wounded as follows: *he was attacked with iron which fell in his eyes, and nearly destroying the sight of the left eye and seriously wounding the right eye and rendering him practically incompetent to perform the ordinary manual occupation of labor.*

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 *Five* dollars, for *1890*.

Sworn to and subscribed before me, this, the *10th* day of *Feb.*, 1891.

W. L. McCallum

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,

Fullon County.

Know all Men by these Presents, That I,

of

County, State of Georgia, do hereby appoint

of *Geo. W. McCallum* 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 *10th* day of *February*, 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.

I, W. B. Harrison Ordinary of said county,

do certify that I am well acquainted with Ben. W. Medley 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 10th day of March 1892.

W. B. Harrison
Ordinary. Irwin County.

POWER OF ATTORNEY. STATE OF GEORGIA.

Know all Men by these Presents, That I, Ben. W. Medley of Irwin County, State of Georgia, do hereby appoint

Ben. W. Medley 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 10th day of March 1892.

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

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

Medley, Ben. W.
Irwin Co.

SOLDIER'S PENSION.
1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name.	<u>Ben. W. Medley</u>
County	<u>Irwin</u>
Disability	<u>Dis. by dis.</u>
Amount, \$	<u>50</u>
Entered on record	<u>Mar 1</u>
1892.	
W. H. HARRISON, Secretary of Executive Department.	
AGENT.	<u>Applicant</u>

W. H. Harrison
Secy. of Ex. Dept.

Medley, Ben. W.
Irwin Co.

1893.

Application for Allowance

No. 1261

For the Year Ending October 31, 1893.

Applicant.	<u>Ben. W. Medley</u>
County	<u>Irwin</u>
Amount, \$	<u>50</u>
Date of Warrant.	<u>3/10</u>
Entered on record.	<u>3/10</u>
1893.	
W. H. HARRISON, Secretary of Executive Department.	
AGENT.	<u>Applicant</u>

W. H. Harrison
Secy. of Ex. Dept.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.
For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,

PERSONALLY appears Geo. H. Madley 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 such continuously since the day of birth 1832; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of Bevelle's Battalion Volunteers, Hammans's Brigade; that whilst engaged in such military service at the battle of _____ in the State of _____, on the _____ day of _____ 186____, he was wounded as follows: Effect on eye of hand service

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of _____ Dollars for 1891

Sworn to and subscribed before me this the _____ day of March 1892, by Geo. H. Madley 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 hereto set my hand and seal this _____ day of _____ 1892.

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,

PERSONALLY appears Geo. H. Madley 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 birth 1832; 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 _____ of _____th Regiment of Bevelle's Battalion Volunteers, Hammans's Brigade; that whilst engaged in such military service at the battle of _____ in the State of _____, on the _____ day of _____ 186____, he was wounded as follows: affected in eyes by fever and hard service

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of _____ dollars, for 1892

Sworn to and subscribed before me, this, the _____ day of March 1893, by Geo. H. Madley 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,

I, M. L. Calhoun Ordinary of said County,

do certify that I am well acquainted with Geo. H. Madley 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 are genuine.

Given under my official signature and seal, this _____ day of March 1893.

M. L. Calhoun Ordinary Fulton County.

STATE OF GEORGIA

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.

[L. S.]

Executed in the presence of us

DIRECTIONS.

Send money to me as follows, by

to

P. O.

County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

County, State of Georgia, do hereby appoint

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

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

[L. S.]

Executed in presence of us

DIRECTIONS.

Send money to me as follows, by

to

P. O.

County, Georgia.

Geo T. Halsey
Medley, Georgia
(For These Already Enrolled.)

No. 1212

Soldier's Pension.
1894.

Name *Geo T. Halsey*
County *Fulton*
Disability *Disability by Disease*
Amount, \$ *50*
3/2
1894.
W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO

affluent

Geo. W. Harrison, State Printer, Atlanta.

No later

Medley, Georgia
Geo T. Halsey
(For These Already Enrolled.)

No. 95

SOLDIER'S PENSION.
1895.

Name *Geo T. Halsey*
County *Fulton*
Disability *Disability by Disease*
Amount, \$ *50*
3/4
1895.
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

affluent

Geo. W. Harrison, State Printer, Atlanta.

No later

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County, }

PERSONALLY appears Geo. W. Medley 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 birth 18 39; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company of 1st Regiment of Battalion Volunteers Hannon's Brigade; that whilst engaged in such military service at the battle of in the State of on the day of 186, he was wounded as follows: affected in eyes by fever and hard service

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of Fifty dollars, for the year 189 3.

Sworn to and subscribed before me, this, the 12th 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 Geo. W. Medley the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.



W. L. Calhoun

Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County, }

PERSONALLY appears Geo. W. Medley 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 Birth 18 39; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company of 1st Regiment of Battalion Volunteers Hannon's Brigade; that whilst engaged in such military service at the battle of in the State of on the day of 186, he was wounded as follows: affected in eyes by fever and hard service

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of Fifty dollars, for the year 189 4.

Sworn to and subscribed before me, this, the 7th 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 Geo. W. Medley the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 7th

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

Medley, George W.
Fulton Co.
ACT OF 24 OCT. 1887.
(For Those Already Enrolled.)

No. 148

SOLDIER'S PENSION.
1896.

Name	Geo W. Medley
County	Fulton
Disability	Disabled by Disease
Amount, \$	50
	27
	1896
	RICHARD JOHNSON,
	Secretary Executive Department.

WARRANT HANDED TO

appt

Geo. W. Harrison, State Printer, Atlanta.

no date

Audited

1889.

COMPTROLLER-GENERAL.

Fulton

Claimed Soldiers.

Voucher No. 2695

Amount \$ 50.

Paid to Geo. W. Medley,

For Disabled by
almost total blindness from disease
Nov. 6, 1889

Included in warrant No.

issued to Treasurer.

1889

WARRANT CLERK.

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

applied

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton

County.

Personally appears Geo. W. Medley 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 Birth 18 38; 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 of 10th Regiment of Volunteers, Pennington's Brigade; that whilst engaged in such military service in the State of Georgia, on the day of 1863, he was wounded, injured or diseased as follows: affected in eyes by fever and hard service

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 28th, 1890. I have heretofore as a resident of Fulton county been allowed a pension of Fifty dollars, for the year 1890.

Sworn to and subscribed before me, this, the

22nd day of Feb'y 1890.

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

Geo. W. Medley

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 22nd day of Feb'y 1890.



W. L. Calhoun

Ordinary

Fulton

County.

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

No. 2695

Atlanta, Ga., Nov. 6 1889

Mr.

George W. Medley

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

Disabled by disease.

He is entitled to receive the sum of

Fifty + 00/100

Dollars

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

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

J. V. Gordon

GOVERNOR.

By the Governor,

W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

\$ 50.00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty + 00/100

per above voucher, this

6

of Nov

Dollars,

1889.

W. H. Harrison

Geo. W. Medley

and that he resides in this County.

Given under my official signature and seal, this 22nd
day of Feby 1896.



W. L. Calhoun
Ordinary Fulton County.

Just W. H. Harrison

Geo. W. Medley Marx

Audited

18

COMPTROLLER-GENERAL.

Maimed Soldiers.

Voucher No. 203

Amount \$ 50

Paid to G. W. Medley

For Disabled by

Disease

Feby 5 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. 130

Amount \$ 50

Paid to Geo. W. Medley

For Disabled by

Disease

Feb 6 1891

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 263

Atlanta, Ga., Feb 27 1890

Mr. G. W. Medley 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
He is entitled to receive the sum of Fifty 00/100 Dollars
for such disability, the same being the allowance due for the year ending October 24, 18 90

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

By the Governor,

W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/100 Dollars,
per above voucher, this 5 of Feb 18 90

G. W. Medley

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

1891.

No. 130

Atlanta, Ga., Feb 6 1891.

Mr. Geo. W. Medley 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
He is entitled to receive the sum of Fifty Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

By the Governor,

W. H. Harrison
SECY EXECUTIVE DEPARTMENT.

50

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

Fifty 00/100 Dollars,
per above voucher, this 6 of Feb 1891.

Geo. W. Medley

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 100 Dollars,
per above voucher, this *5* of *Feb* 18 *90*
G. W. Mulling

\$ *50*

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

Fifty 100 Dollars,
per above voucher, this *6* of *Feb* 18 *91*.
J. W. C. Munday

Medley, Nancy (Mrs)
Fulton County

No.

**WIDOW'S
Indigent Pension.
1901.**

Name *Mrs. Nancy Medley*

County *Fulton*

Widow of *Jack Medley*

W. 14 Batts

Approved 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

7-20-1901

Office Com. Of Pensions.

4-27-1901.

Marriage and time when
age important facts and must
be clearly proven by a witness
who of his own knowledge knows
or by record.

J. W. Lindsey.
Com. Of Pensions

*Marriage and time when
is an important fact
and must be clearly
stated by a witness
who of his own knowledge
knows or by record.*

FILE

Ordinary,
County,

Executed in presence of

Witness my hand this day of 1901.

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

I, County,

STATE OF GEORGIA.

POWER OF ATTORNEY.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, hereby authorize
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

OFFICE COMM. OF PENSIONS.

4-27-1901.

Marriage and time when
are important facts and must
be clearly stated by witnesses
who of his own knowledge know
or by record.

J. W. LINDSEY.
Com. of pensions

Measure taken when
in an attempt to find
and must be clearly
stated upon by
witness who of his own
knowledge know or by record.

Medley, Nancy (Mrs)
Fulton County

No.

WIDOW'S

Indigent Pension.

1901.

Name Mrs. Nancy Medley

County Fulton

Widow of Joseph Medley

Dec. 14 1890

Approved 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

1901.

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

4-27-1901

Questions for Applicant.

STATE OF GEORGIA,

County.

I, of said State and County, desiring to
myself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
1900, hereby submits her proof, and after being duly sworn true answers to make to the
following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State, County and Post Office)
Mrs. Jackson Medley, No 63 Hampton St Atlanta Ga
2. How long and since when have you been a resident of this State?
Have lived all of my life in this State
3. When and where were you born?
Fulton County 1850
4. When and where was your husband born—state his full name, and when were you and he married?
In Fulton County Georgia
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war?
Company C 1st Battalion
Reserve Volunteers
6. How long did your husband serve in said Company and Regiment?
18 months
7. When and where did your husband's Company and Regiment surrender and was discharged?
Hamburg SC
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, and by what authority?

10. When and where did your husband die?
At Reservoir, Cobb County Ga in Jan 1888

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.
Four years

13. What has been your occupation since your husband's death?
No occupation

14. How much can you earn gross, by your own exertion or labor?
Nothing

15. What property, real or personal, or income do you have or possess, and its gross value?
Nothing

16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899-1900, and what disposition, if any, by sale or gift, have you made of the same?
Have never had anything

17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Resided in Fulton County returned no property

18. How have you been supported since death of husband, and especially for 1899 and 1900?
Supported by my son-in-law J. S. Keegan

19. How much did your support cost for each of these years, and how much did you contribute by your own labor or income?
\$5.00 per month for support. I contribute nothing

20. What was your employment during 1899 and 1900—how much did you receive for each year?
Nothing

21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property?
No family

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

23. How many applications have you made for a Pension, and under what claim?
One, but unsuccessful

Sworn to and subscribed before me this 4th day of February 1901.
John R. Childress, Ordinary.
Nancy Medley mark
Fulton County.

Nancy Medley answers here with
by saying that her husband's name was
Joseph Medley & that he was married in
Fulton County Georgia
Nancy Medley

Questions for Witnesses.

STATE OF GEORGIA,

Fulton County.

N.Y. Alford of Cobb County of said State and County, having been presented as a witness in support of the Application of Mrs. Jackson Medley 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? E.J. Coleman and
N.Y. Alford Resident Cobb County
2. Are you acquainted with the applicant, Mrs. Jackson Medley?
Have known her 58 years
3. Where does she reside, and how long and since when has she been a resident of this State?
Atlanta Ga. Resident in this state all of her life
4. When and where was she born? Quinn Co in 1860
5. Were you ever acquainted with her husband?
Yes
6. Where did he reside in 1861? Roswell Ga
7. When and to whom was he married?
Nancy Perryman
8. When and where was he born? Quinn Co in 18 22
9. How long have you known him?
all of his life
10. When and where did Jackson Medley enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this?
with him, Co H "14 Battalion Roswell Volunteer
11. Were you a member of the same Company and Regiment?
Yes
12. How long did he perform regular military duty?
18 months
13. When and where was his Company and Regiment surrendered and discharged from service?
at Augusta Ga. in Hamburg Co. in April 1864
14. Were you with the command when it surrendered?
Yes
15. Was Jackson Medley the husband of applicant present?
Yes
16. If not present, where was he?
at the surrender
17. When and where did he leave his Command?
at the surrender

For what cause?

By whose authority he left?

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

I know all this because I was there

18. When and where did Jackson Medley die?
Roswell Ga. Jan 10 1888
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?
Roswell Ga. and in Ga all of his life
20. Do you of your own knowledge know that applicant is the lawful widow of Jackson Medley?
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?
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 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 not in condition to earn anything

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

she is too old and feeble

27. How was she supported for 1899 and 1900?

By B.D. Huggard her son in law

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 my old father and infirm

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

no interest

Sworn to and subscribed before me this 6

day of Feb 1901

John R. Wickham Ordinary,

Fulton County.

N.Y. Alford and E.J. Coleman Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

Fulton County.

Personally before me comes George A. Union and

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

Nancy Medley applicant for a Pension under Act of 1900, and after

such personal examination say that her physical condition is this she is old and

feeble. She is too feeble to do any

house work. She is not able to earn

half a living

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 6

day of Feb 1901

John R. Wickham Ordinary,

Fulton County.

T.H. Lee M.D. and G.A. Union M.D. Witnesses.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

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

certify that the applicant, Mrs. Nancy Medley resides in said

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

day of Feb 1860, and that the witnesses, Mr. N.Y. Alford and E.J. Coleman

are of trustworthy character, and that their statements

are entitled to full faith and credit.

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

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

was signed and subscribed.

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

returned for taxation in her own name in 1899 None dollars worth

of property, and in 1900 None dollars worth of property.

Witness my hand and official seal, this 12 day of Feb 1901

John R. Wickham 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; 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 24th April, 1860, not entitled.

5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, Nancy Medley, hereby authorize
B. R. Haygood of Fulton County to

to receive and receipt for the pension paid hereon, and request that he remit same to
Mc G. Hampton P. at Atlanta Ga

In Witness Whereof, I have hereunto set my hand and seal, this 13th
day of January 1902.

Executed in presence of

C. H. Rickett Jr.

Nancy Medley [L. S.]
mark

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, Nancy Medley, hereby authorize
B. R. Haygood of Fulton County to

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 22
day of January 1903.

Executed in the presence of

J. P. Wilkinson
Ordinary

Nancy Medley [L. S.]
mark

Medley, Nancy
4th St

To Those Heretofore Paid.

1902.

No. 89

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1902.

PAID TO

Miss Nancy Medley

Fulton County.

Widow of Jack Medley
Co. Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO 1902

B. R. Haygood
GEO. W. HARRINGTON, 1011 FULTON ST., ATLANTA, GA.

Medley, Nancy
Fulton Co

To Those Heretofore Paid.

1903.

No. 114

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1903.

PAID TO

Ms Nancy Medley
of Fulton County.

Widow of Jack

Co. A 1st Regt Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO 1903

B. R. Haygood
GEO. W. HARRINGTON, 1011 FULTON ST., ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of **Fulton.**

PERSONALLY COMES MRS.

Nancy Medley

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 *Jack Medley* who was a soldier in Company *A* of the *14th Batt* Regiment of *4th* Volunteers, that he enlisted in said regiment on or about the month of *Sept* 18*88*, and served in the Army up to *18 mo* 18*88*. That he died on the *10th* day of *Jan* 18*88*.

Age & 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*88* (58)

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 *22* day of *JAN* 1902

*John R. Wilkinson**Nancy Medley*
Post-Office *nef*

State of Georgia,

Fulton. County.*John R. Wilkinson.*

Ordinary of said County, certify that I am well acquainted with Mrs. *Nancy Medley*, 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* 18*88*.

Given under my official signature and seal, this the *22* day of *JAN* 1902 1902.

*John R. Wilkinson*Ordinary 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.

Nancy Medley

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 *Jack Medley* who was a soldier in Company *A* of the *14th Batt* Regiment of *4th* Volunteers, that he enlisted in said regiment on or about the month of *Sept* 18*88*, and served in the Army up to *18 mo* 18*88*. That he died on the *10th* day of *Jan* 18*88*.

Age & 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*88*.

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 *JAN* 1903

*John R. Wilkinson**Nancy Medley*
Post-Office *nef*

State of Georgia,

Fulton. County.*John R. Wilkinson.*

Ordinary of said County, certify that I am well acquainted with Mrs. *Nancy Medley*, 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* 18*88*.

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

*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, Medley, Nancy, 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, Medley, Nancy, 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

Medley, Nancy
Fulton County
TO THOSE HERETOFORE PAID

1904.

No. 46

INDIGENT
WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. Nancy Medley

Fulton, County,

Widow of Jack

Co. 4th Regt. 1st

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

122 1904,

AND HANDS TO

Medley, Nancy

Geo. W. Harrison, State Printer, Atlanta.

Medley, Nancy
Fulton County
TO THOSE HERETOFORE PAID

1905.

No. 136

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. Nancy Medley

Fulton, County,

Widow of Jack

Co. 4th Regt. 1st

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

136 1905.

AND HANDS TO

Medley, Nancy

Geo. W. Harrison, State Printer, Atlanta.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES Mrs.

Nancy Medley

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 Jack Medley who was a soldier in Company A of the 14th Batt Regiment of Gen Volunteers, that he enlisted in said regiment on or about the month of

186 Nov, and served in the Army up to 18 Nov, 186 Nov. That he died on the 10th day of Jan 18 88.

A 7 7

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 58.

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 1st day of JAN 1904.

John R. Wilkinson Ordinary.

Post Office Medley

State of Georgia,

County of Fulton.

I, John R. Wilkinson,

Ordinary of said County, certify that I am well

acquainted with Mrs. Nancy Medley 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 18 58.

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

County of Fulton.

PERSONALLY COMES Mrs.

Nancy Medley

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 Jack Medley who was a soldier in Company A of the 14th Batt Regiment of Brevel Volunteer Volunteers, that he enlisted in said regiment on or about the month of

186 Nov, and served in the Army up to 18 Nov, 186 Nov. That he died on the 10th day of Jan 18 84.

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 Before the war.

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 1st day of JAN 1905.

Nancy Medley Ordinary.

Post Office Medley

State of Georgia,

County of Fulton.

I, John R. Wilkinson,

Ordinary of said County, certify that I am well

acquainted with Mrs. Nancy Medley 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 18 58.

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



John R. Wilkinson
Ordinary of Fulton County

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

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

Ordinary of Fulton County

NOTE—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1903.

Ordinary of Fulton County.

United States Senate,

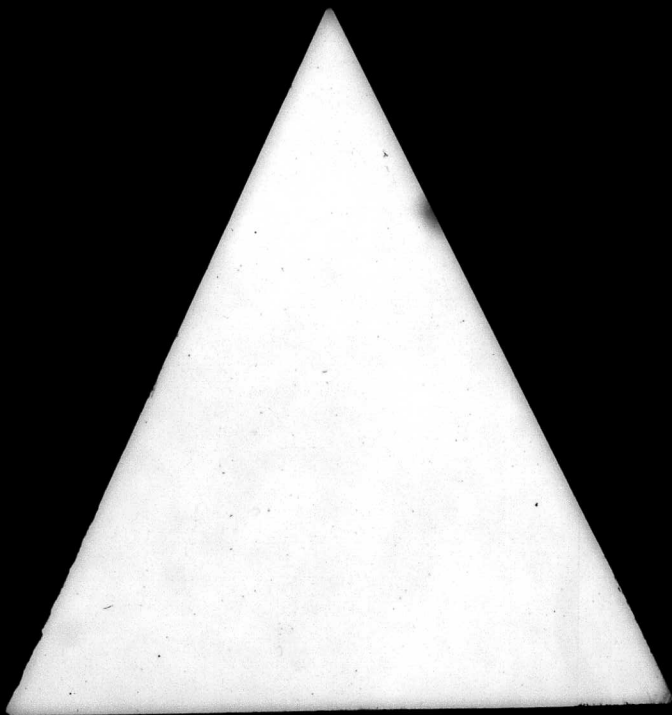
WASHINGTON, D.C.

Georgia } And now Comes N. J. Alford
Cobb County } who being duly sworn true
answers to make in behalf
of the application of Mrs. Nancy Meddley
answers the following questions
Question 4 When and to whom was he married
Answer: December 1858. To Nancy
Perryman. I was present at their
marriage N. J. Alford
J. Meddley

Sworn to and subscribed to
before me this June 19th 1901

John Anthony
Ordinary
Cobb County

Ordinary
Cott County



*Bullock
County*
57 yrs 1911 (M.W.)

No.

Widow's Application

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

County *Fulton*

Name *Mrs M. C. Medlin*

Widow of *P. H. & Medlin*

Approved

J. W. LINDSEY,
Commissioner of Penitents

Chas. F. Byrd, State Printer, Atlanta.

8/30/11

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Spalding County.

Personally before me comes Margaret C. Medlin of said County, who, after being duly sworn, on oath says, that she is the widow of P. H. T. Medlin who in the County of Cobb State of Georgia she was married on the day of 19th Feb 1868 and that she remained his wife, and resided with him to the date of his death in June 1909 and that she has not since remarried. At the time of his death he was a resident of Spalding County, in Atlanta said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$ 60.00 in Spalding County for 1909 per annum, on account of being a soldier in Company 5th Ga. Reg. Cav. Regiment (Volunteers of State Militia) Confederate Service.

At the death of P. H. T. Medlin he 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 200.00 the cash value (State fully) 13 3/4 Acres land in Cobb Co. Ga. Cash value
13 3/4 Acres land None 200.00
 Horses and Mules None \$
 Hogs, Cows, etc. None \$
 Total Cash value of all property \$ 200.00

That she is now a bonafide resident citizen of said County of Spalding and she has so continuously resided since 18- Feb day of 1868 and she

Sworn to and subscribed before me, this the 17th day of Aug 1910 at Atlanta Georgia Ordinary
Harrell M. Anderson Secy
 of Spalding County.

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

STATE OF GEORGIA,

Spalding County.

Personally before me come George A. Webster 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. Margaret C. Medlin who made the foregoing affidavit, is the lawful widow of P. H. T. Medlin who died in Spalding County in said State of Georgia on 7 day of June 1909 and that she has not since remarried. That she became the wife of P. H. T. Medlin on the 19th day of Feb 1868 and that she and he had resided together as man and wife continuously since 18- Feb day of Feb 1868 and that the P. H. T. Medlin was the same man who was on the pension roll of said State Georgia from Spalding County when he died Known from general reputation.

Sworn to and subscribed before me, this the 10th day of August 1910 at Atlanta Georgia Ordinary
Harrell M. Anderson Secy
 of Spalding County.

Widow's Application

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

County Spalding

Name Mrs M. C. Medlin

Widow of P. H. T. Medlin

Approved

J. W. LINDSEY,
 Commissioner of Pensions

State of Georgia, Spalding County, Atlanta.

1868

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fullon County.

Personally before me comes *J. P. Medlin* who after being sworn on oath says, that they are freeholders of said County, and that they know *M. E. Medlin* of said County and knew her said husband *P. M. J. Medlin* at his death on the *8th* day of *June* 190*8* 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: *13 1/2 acres of land on Cobb Co Ga*

of the value of *\$ 200.00*

Sworn to and subscribed before me, this the

25th day of *Aug* 191*0*
Harriet M. Medlin
of *Fullon* County.

J. P. Medlin
Ordinary. *Cobb Co Ga*
County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fullon County.

I, *Harriet M. Medlin* Ordinary of said County, do certify, that, I know Mr. *M. E. Medlin* 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

25th day of *Aug* 191*0* That I also know *W. E. Medlin* 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.

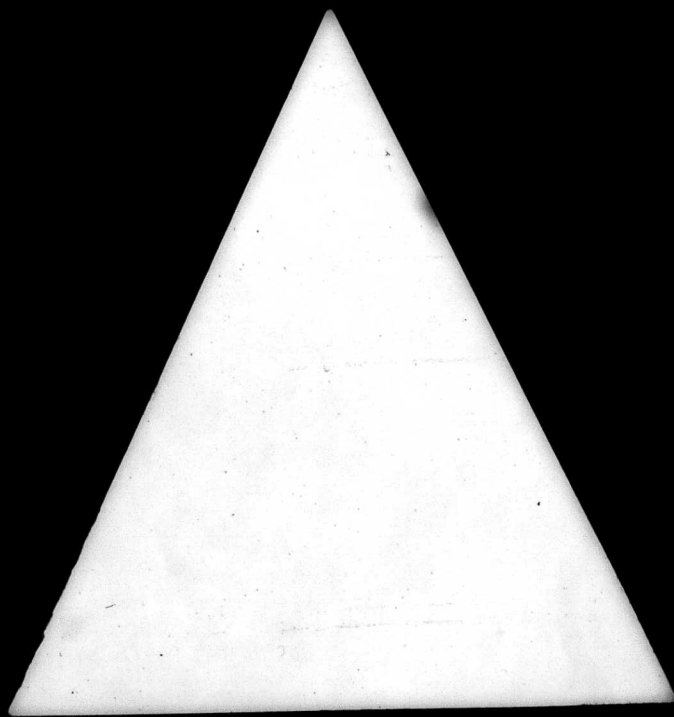
That the tax Books of *Harriet M. Medlin* returned property to the amount of *\$ 200.00* for 1908 *\$ 200.00* for 1910 *\$ 200.00*

Sworn under my hand and official seal of office this *25th* day of *Aug* 191*0*

(SEAL) *Harriet M. Medlin* Ordinary.

County.

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



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

I, _____, hereby authorize

_____ of _____

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

at _____ by _____

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

Executed in presence of _____ [L. S.]

Medlin, P.M.T.
Fulton Co.

No. *001707*

INDIGENT PENSION.

1906

Name *P.M.T. Medlin*

County *Fulton*

Co. *6-1st Ga. Cavalry* Regt. _____

Approved _____ 190 _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/28/06

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 _____

Medlin, P. M. J.
Fulton Co. Ga.

No. *501107*

INDIGENT PENSION.

1906

Name *P. M. J. Medlin*

County *Fulton*

Age *61*

Rank *1st Lt. Co. 1st Reg. Cavalry*

Approved *1906*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

90/8/26

9/8/26

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

Medlin of said State and County, desiring to avail himself of the Pension Act (Section 1254, 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.)
M. J. Medlin - Atlanta Fulton Co Ga
2. How long and since when have you been a resident of this State? *6 1/2 years*
3. When and where were you born? *1843 - Sept 24 Ga*
4. When and where and in what company and regiment did you enlist or serve? *March 18-62 - 1st Reg. Co. 1st Reg. Cavalry - 6th Co. 1st Reg. Cavalry*
5. How long did you remain in such company and regiment? *until April 1865*
6. When and where was your company and regiment surrendered and discharged? *April 1865 - Summerville S.C.*
7. Were you present with your company and regiment when it was surrendered? *Yes*
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? *was present - Paroled - attached*
9. How much can you earn (gross) per annum by your own exertions or labor? *about \$350*
10. What has been your occupation since 1865? *Wash. machine & other 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"? *2 - first grounds*
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 14 years - both eyes, crippled broken ankle*
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 and 1905, and what disposition, if any, by sale or gift, have you made of same? *None*
15. In what County did you reside during those years, and what property did you then return for taxation? *Fulton Co. - No taxes*
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? *By my own labor*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *about \$100 - about 75*
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year?
19. Have you a family? If so, who composes such family? Give their means of support. Have they a home-stand, or other property? Their age and how employed? *No family except wife - has no hands*
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? *None*

Every Question MUST Be Answered

Sworn to and subscribed before me this the _____ day of _____ 1906.

John W. Lindsey Ordinary.

of *Fulton* County.

P. M. J. Medlin Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Huilton COUNTY.
Geo A Webster of said State and County, having been presented as a witness in support of the application of D. H. J. Mullins 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? Geo A Webster
Atlanta Huilton Co Ga
2. Are you acquainted with Mullins, the applicant: If so how long have you known him? 44 years
3. Where does he reside, and how long and since when has he been a resident of this State?
Atlanta Huilton Co Ga
4. When, where and in what company and regiment did he enlist, and how do you know?
March 1862 - 1st Regt Coon-60's 1st GA Cav
5. Were you a member of the same company and regiment? Yes - 2nd Sert
6. How long did he perform regular military duty? until April 1865
7. When and where was his command surrendered? April 26th 1865 at
Brunswick Ga.
8. Were you present when it surrendered? Yes
9. Was applicant present? Yes

10. If he was not present, where was he?
He was absent
 When did he leave his command? April 1865 For what cause? Surrender
 By what authority he left? Surrender of Army How do you know all of this?
I was there with him all the time

11. What property, effects or income has the applicant? (Give your means of knowledge.)
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? None
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
None
14. What is the applicant's occupation and physical condition? Mechanic
and public capt - infirm
15. Is the applicant unable to support himself by labor of any sort; if so, why? Yes
because of old injuries
weak broken limbs
16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? By his
brother Sam
17. What portion of his support for these four years was derived from his own labor or income?
about 1/3
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. None given at above

19. Who composes family? What property have they? Children's ages and their earning capacity?
Himself & wife

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 Sept 1906
John R. Westman Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

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

That he is suffering from the effects of a broken limb, is old, very feeble. His troubles are incurable. He has no means of support. He is unable to labor or support himself. He is unable to support himself.

Sworn to and subscribed before me, this 1st day of Sept 1906
John R. Westman Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Huilton COUNTY.
 I, John R. Westman, Ordinary, in and for said County, hereby certify that the applicant D. H. J. Mullins resides in said County, and has been a bona fide resident of this State since the 1st day of Sept 1862, and that the witnesses, viz: Geo A Webster

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

Witness my hand and seal of office, this 1st day of Sept 1906
John R. Westman Ordinary.
 of Huilton County.

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

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

st

by _____

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

—[L. S.]

Executed in presence of

Medlin, P. M. J.
Fulton Co.

Code Section 1254.
(FOR THOSE ALREADY ENROLLED)

No. 348

INDIGENT

SOLDIER'S PENSION

1906.

Name P. M. Mellick

County:

Regiment

Regiment

WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Penitons.

WARRANT HANDED TO

DR. W. HARRISON, STATE PRINTER, ATLANTA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

County, }
Personally appears P. H. Maclean 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 _____ 1880; 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 Georgia) during the war between the
States, and served for the term of 3 yrs in Company 2d, of 1 th Regiment
of 4th Inf; 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 Fulton
County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the _____

day of JAN 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 P. H. Maclean
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 Fulton County.



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

NAME **Medlin, P. M. T.**

YEAR **1907** COUNTY **Fulton**

WHEN AND WHERE BORN? **September 24, 1843 - Resident of Georgia
sixty-three years.**

ENLISTED WHEN AND WHERE? **March 1862 - Floyd County, Georgia**

RANK.

COMPANY AND REGIMENT? **Company G, 1st Ga. Cavalry**

NAME OF CAPTAIN AND COLONEL? **George A. Webster - 2nd Lieutenant**

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? **April 1865 - Greensboro, N. C.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. **George A. Webster, 2nd Lieut. - same command -- No data.**

... DIED, WHEN AND WHERE?

BURIED.

WITNESSES. George A. Webster, 2nd Lieut. - same command -- No data.

MEDLOCK, ELIZABETH A. (MRS.)
FULTON COUNTY.

Approved for
Nov. 1, 1941.



CIVILS-UR-1941

Widow's Application

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

County.....FULTON
Name.....ELIZABETH A. MEDLOCK
Widow of...ROBERT MEDLOCK
Date of Marriage....Jan. 14....1904.
Date of Husband's Death. Apr. 23, 1919.
Company...C., 10th Regt. Ga.
Regiment State Guards Cavalry
Approved...October 17 for Nov 1 1941
William Henderson
Director.

Received
Oct. 17, 1941.

Atlanta, Ga., Oct. 17, 1941.
406 State Capitol.

Robert Medlock enlisted as
a private in Co. C, 10th
Regt Ga. State Guards Cavalry
Aug. 1, 1863. Trans-
ferred to Co. H, same regi-
ment. Roll dated near Rome,
Ga., Jan. 31, 1864, shows
him absent with leave. This
company was mustered into
service for a term of six
months.

William Henderson
Director.

Ordinary's Certificate

STATE OF GEORGIA

FULTON COUNTY.

I, *Elizabeth A. Medlock*, Ordinary of said County, do certify
that I know *Elizabeth A. Medlock* 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 witnesses who swear 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
credible and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this *17* day of *October*, 1941.

(SEAL OF ORDINARY)

of *Fulton* County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall serve applicant and the witness in the following order: "I, the
Ordinary, do hereby advise you that you will have answers made to each of the questions asked you and the witness you shall give will be
the basis of the pension granted you."
2. The applicant and the witness shall then answer the questions in the following order: "I, the applicant, do hereby answer the questions as follows:
Additional affidavits may be attached if the applicant so desires."
3. The Ordinary shall then ask the following questions: "Do you know the person who swears to the service of husband and/or the marriage?
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 Ordinary of the County in which the applicant or witness resides."
4. The Ordinary shall then ask the following questions: "Do you know the person who swears to the service of husband and/or the marriage?
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 Ordinary of the County in which the applicant or witness resides."
5. The Ordinary shall then ask the following questions: "Do you know the person who swears to the service of husband and/or the marriage?
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 Ordinary of the County in which the applicant or witness resides."
6. Do not take an application from any widow who is already receiving a pension.

Atlanta, Ga., Oct. 17, 1941.
406 State Capitol.

Robert Medlock enlisted as Private in Co. C, 10th Regt. State Guards, 1864. He was promoted to Sergeant on Aug. 1, 1863. Transferred to Co. H, same regiment. Roll dated near Rome, Ga., Jan. 31, 1864, shows him absent with leave. This company was mustered into service for a term of six months.

William H. Anderson
Director.

MEDLOCK, ELIZABETH A. (WRS.)
FULTON COUNTY.

Approved for
Nov. 1, 1941.



Widow's Application

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

County.....FULTON
Name.....ELIZABETH A. MEDLOCK
Widow of.....ROBERT MEDLOCK
Date of Marriage.....Jan. 14.....1904.
Date of Husband's Death.....Apr. 23, 1919.
Company.....C. 10th Regt. Ga.
Regiment.....State Guards Cavalry
Approved.....October 17, for 1941
William H. Anderson
Director.

Record
Oct. 17, 1941

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.

I, *James H. Anderson*, Ordinary of said County, do certify that I know *Mrs. Elizabeth A. Medlock*, 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 *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 *17* day of *October*, 1941.
(SEAL OF ORDINARY) *James H. Anderson*, 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, 1920, are entitled.
- All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
- Attach certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
- Fill out the back of the application carefully.
- Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
- Do not take an application from any widow who is already receiving a pension.

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

.....FULTON.....COUNTY.

Personally appears before me, *Mrs. Elizabeth A. Medlock* 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. Elizabeth A. Medlock
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia?.....*All my life. 20 years.*
Give date, or year, of your birth.....*July 22, 1881*.....Age?.....*60 years*
- (1)When, (2)where and (3)to whom were you married?
Jan. 14, 1904, Milton County, Ga. to Robert Medlock
- Have you married since the death of first and soldier husband?.....*No*
- When and where did your first husband die?.....*Apr. 23, 1919, Winnett County, Ga.*
- Were you residing together when he died?.....*Yes*
- If not, how long had you resided apart?.....
- Are you now a widow?.....*Yes*
- Have you or your husband heretofore been paid a pension by the State?.....*No*
- If so, when and for what cause were you or your husband placed on the roll?.....

SECTION II.

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

- When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
Co. C, 10th Regt. Ga. State Guards Cavalry
- When and where did the Commands of your husband surrender or discharge from the Service?
Rome, Ga. Jan. 1864
- Was your husband personally present with his Command when it was surrendered or discharged?
Yes
- If he was not present, state specifically and clearly where he was?
- 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?.....
- What was his physical condition when he left his Command?.....*Fair*
- What effort did he make to return to his Command?.....
- In what way was he prevented from going back to his Command?.....
- Was he captured by the enemy at any time?.....
- If so, when and where? In what prison was he held and when was he released?.....

Sworn to and subscribed before me, this the

17 day of *October*, 1941.

W. H. Anderson Ordinary

of *Fulton* County.

(SEAL OF ORDINARY)

Mrs. Elizabeth A. Medlock
Applicant.

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

Sworn to and subscribed before me, this the
 12 day of October, 1941.
 T. A. Carpentier, Clerk Ordinary
 of Fulton County.
 (SEAL OF ORDINARY)

Mrs. Elizabeth A. Medlock
 Applicant.

CONFEDERATE PENSIONS & RECORDS
 STATE DEPARTMENT OF ~~CONFEDERATE PENSIONS & RECORDS~~

~~NEW YORK~~ 406 STATE CAPITOL

ATLANTA, GEORGIA

WHEREAS:

Mrs. Elizabeth A. Medlock, widow of
 Robert Medlock, 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 November, 1941, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 20th day of October 1941.

William H. Jeffries
 Director, Confederate Pension &
 State Department of ~~CONFEDERATE PENSIONS & RECORDS~~ Record Department
~~Atlanta~~

Court of Ordinary

FULTON COUNTY
 STATE OF GEORGIA

CERTIFIED COPY OF
 MARRIAGE LICENSE
 AND
 CERTIFICATE OF MARRIAGE
 OF

ROBERT MEDLOCK SR.
 AND

ELIZABETH A. CARPENTER

Recorded in Book C Page 178
 (Old Milton County Records)

THOS. H. JEFFRIES,
 Ordinary.

MARRIAGE LICENSE

State of Georgia ^{Milton} ~~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 Robert Medlock, Sr.

and Elizabeth A. Carpenter

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 14 day of Jan. 1904

H. I. SEALE, L. S.
Ordinary

I hereby certify that Robert Medlock, Sr.

and Elizabeth A. Carpenter

were joined together in the HOLY BANS OF MATRIMONY

on the 14 day of Jan. 1904, by me.

LOY WARWICK, M. G.

State of Georgia,

Fulton County

S. S.

ORDINARY'S OFFICE

ATLANTA, GA., Oct. 13, 1904

W. A. Brand, 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

Robert Medlock Sr.

and Elizabeth A. Carpenter

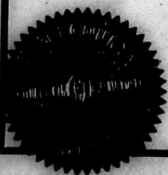
as the same appears of record in this office.

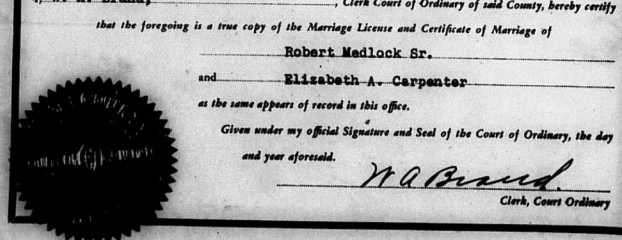
Given under my official Signature and Seal of the Court of Ordinary, the day

and year aforesaid.

W. A. Brand

Clerk, Court Ordinary





that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

Robert Madlock Sr.

and Elizabeth A. Carpenter

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.

M A Brand

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. B.

WIDOW'S
Indigent Pension
1901.

Name Mr M & Meek

County Fulton

Widow of W W Meek

OK 41-4a

Approved _____ 1901

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

1901

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

Meek, Mahaley &
Fulton County, Miss
OK

No. _____

2/10/01

Questions for Witnesses.

STATE OF GEORGIA,

Douglas County.

has been presented as a witness in support of the Application of Mrs. M. A. Russell 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? I. H. Mauldin

N. A. Russell Douglas Co. Ga. 1000 S. 1st St. Douglas Co. Ga.

2. Are you acquainted with the applicant, Mrs. M. A. Russell? Yes.

If so, how long have you known her? Forty years since 1860.

3. Where does she reside, and how long and since when has she been a resident of this State? Atlanta Ga. In our common knowledge since 1860.

4. When and where was she born? Yes.

5. Were you ever acquainted with her husband? Yes.

6. Where did he reside in 1861? Douglas Co. Ga. near Douglas Co.

7. When and to whom was he married? Yes.

8. When and where was he born? Yes.

9. How long have you known him? Since the year 1855.

10. When and where did William H. Russell enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this? April 1862 in the 4th Regt. of Ga. Inf.

March 1862 in the 4th Regt. of Ga. Inf.

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

12. How long did he perform regular military duty? From March 1862 to May 1864.

N. A. Russell was wounded & I. H. Mauldin was taken prisoner July 22, 1864.

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

14. Were you with the command when it surrendered? Yes.

15. Was William H. Russell the husband of applicant present? Yes.

16. If not present, where was he? Yes.

17. When and where did he leave his Command? Yes.

For what cause? Yes.

By whose authority he left? Yes.

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

18. When and where did William H. Russell die? Yes.

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

20. Do you of your own knowledge know that applicant is the lawful widow of William H. Russell? Yes.

21. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes.

She has and is now his widow.

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

If she has any we do not know of it.

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

If she had any property in those years we did not know of it or our own knowledge.

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

She has not in our knowledge.

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

Although applicant's age and physical condition we think her unable to work and as calling sufficient to earn her support.

26. Is applicant able to earn a support at least of any kind? Yes.

Is not from her age and physical condition.

27. How was she supported for 1899 and 1900? Yes.

By what little she was able to do and the help of her children that are married.

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

Not more than 20.

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

Very feeble, weak legs and breast trouble. She has a very bad cough.

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

None.

Sworn to and subscribed before me this 14

day of March 1901

I. H. Mauldin Ordinary,

Douglas County.

W. A. Russell and I. H. Mauldin Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

Houston County.

Personally before me comes Arch. Arvey M.D.

C. E. Hall M.D. both known to me to be reputable

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

M. A. Russell applicant for a Pension under Act of 1900, and after

such personal examination say that her physical condition is this: By reason of age,

debility, and recurring attacks of Epilepsy

she is unable to work a support.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 12th

day of June 1901

John R. Weikert Ordinary,

Houston County.

Arch. Arvey M.D. and C. E. Hall M.D. Witnesses.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Houston County.

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

certify that the applicant, Mrs. M. A. Russell resides in said

county, and has been a bona fide resident of this State since 42 years

18. and that the witness, Mr. Yes.

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

were signed and subscribed.

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

returned for taxation in her own name in 1899, Yes. dollars worth

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

Witness my hand and official seal, this 13th day of April 1901

John R. Weikert Ordinary,

Houston 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,

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 20th 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 _____ 1908.

[L. S.]

Executed in the presence of _____

To Those Herebefore Paid.

1902.

No. 31

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Mahaley E. Meek

or

Fulton. County,

Widow of *Mr. H. Meek*

Co. _____ Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDED TO

W. H. Meek

JOHN W. LINDSEY, COMMISSIONER OF PENSIONS, GA.

To Those Herebefore Paid.

1903.

No. 33

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Mahaley E. Meek

or

Fulton. County,

Widow of *Wm. W.*

Co. 12-41st Gen. Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1903

AND HANDED TO

W. H. Meek

JOHN W. LINDSEY, COMMISSIONER OF PENSIONS, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of **Fulton**.

PERSONALLY COMES MRS.

*Mahaley & Meek*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 1859. That she is the Widow of Wm W Meek who was a soldier in Company 41st of the 4th Regiment of InfantryVolunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to September 1865. That he died on the 17 day of Sept 1880.*Acq & 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 1858.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 JAN 31 1902 day of 1902, *Mahaley & Meek**John R. Wilkinson* Ordinary, Post-OfficeState of Georgia, **Fulton** County, I, *John R. Wilkinson*, Ordinary of said County, certify that I am well acquainted with Mrs. *Mahaley & Meek*, 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 18. Given under my official signature and seal, this JAN 31 1902 day of 1902.Official Seal, *John R. Wilkinson* Ordinary 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.

*Mahaley & Meek*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 1859. That she is the Widow of Wm W Meek who was a soldier in Company 41st of the 4th Regiment of InfantryVolunteers, 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 died on the 17 day of Sept 1880.DONOR PENSION
OFFICE
FULTON
GEORGIADeponent 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 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 JAN 22 1903 day of 1903, *Mahaley & Meek**John R. Wilkinson* Ordinary, Post-OfficeState of Georgia, **Fulton** County, I, *John R. Wilkinson*, Ordinary of said County, certify that I am well acquainted with Mrs. *Mahaley & Meek*, 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 1859. Given under my official signature and seal, this JAN 22 1903 day of 1903.Official Seal, *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, Effingham

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 _____

Mrs. Mahala E. Nichols
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. 134

INDIGENT
WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. M. E. Nichols

or Fulton

County,

Widow of Spencer G.

Co. B-41 - 4th Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

122 1904.

AND HANDED TO

aff

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, Fulton

I, Mrs. Mahala Nichols, hereby authorize

Miss Amy Keen

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

me in person at _____

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 17th

day of Jan 1905.

+ Mahala E. Nichols [L. S.]

Executed in presence of

Lucie Bradley Ash
Ordinary Office

Mrs. Mahala Nichols
Fulton County
TO THOSE HERETOFORE PAID.

1905.

No. 171

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. Mahala Nichols

OF

Fulton

County,

Widow of H. H. Nichols

Co. First - 4th Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

122 1905.

AND HANDED TO

Amy Keen

Geo. W. Harrison, State Printer, Atlanta.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2.

STATE OF GEORGIA,
County of Fulton. } PERSONALLY COMES Mrs. Mahaly E. Meek
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 1859. That she is the Widow of Mrs. M. Meek who was a soldier in Company 12 of the 41st Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of Feb 1862, and served in the Army up to Sept 1865. That he died on the 17 day of Sept 1880.

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 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 day of JAN 22 1904 1904. M E Meek
John P. Wilkinson Ordinary. Post Office.

State of Georgia, I, John P. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. Mahaly E. Meek, 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 the day of JAN 22 1904 1904.



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. Mahaly Meek
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 St. St. Meeks. That she is the Widow of St. St. Meeks who was a soldier in Company 41st of the 41st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Dec 1862, and served in the Army up to More War 1862. That he died on the day of 1880.

Infirmary 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 1880.

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 day of JAN 2 1905 1905. Mahaly E. Meek
John P. Wilkinson Ordinary. Post Office.

State of Georgia, I, John P. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. Mahaly Meek, 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 1880.

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



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 _____

Mack, Mahala
Fulton County
To Those Hereof Paid

1906.

No. 135

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO

M. Mahala Mack

OF

Fulton.

County,

Widow of *W. H. Mack*

Co. *4th* Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

42 1906,

AND HANDED TO

WM

THE FAMILIAR PRACTICE AND PENSIONING CO., ATLANTA, GA.

Mack, Mahala
Fulton Co
To Those Hereof Paid.

1907.

No. 143

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

M. Mahala Mack

OF

Fulton.

County,

Widow of *W. H. Mack*

Co. *4th* Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

44 1907.

AND HANDED TO

WM

THE FAMILIAR PRACTICE AND PENSIONING CO., ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES Mrs.

Mahala Meeks

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 1846. That she is the Widow of W. H. Meeks who was a soldier in Company No. of the 41st Regiment of Inf. Volunteers, that he enlisted in said regiment on or about the month of Aug, and served in the Army up to Dec of war 1865. That he died on the 18 day of Infirmary 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 1858.

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

the 1 day of JAN 1906.
J. R. Williamson, Ordinary.

Post Office Atlanta

State of Georgia,
County of Fulton

County.

Ordinary of said County, certify that I am well acquainted with Mrs. Mahala Meeks, 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 1846

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

Official Seal

J. R. Williamson
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.

Mahala Meeks

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 W. H. Meeks who was a soldier in Company No. of the 41st Regiment of Inf. Volunteers, that he enlisted in said regiment on or about the month of Aug, and served in the Army up to Dec of war 1865. That he died on the 18 day of Infirmary & 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 1858.

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

the 2 day of JAN 1907.

John R. Williamson, Ordinary.

Post Office Atlanta

State of Georgia,
County of Fulton

County.

Ordinary of said County, certify that I am well acquainted with Mrs. Mahala Meeks, 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 2 day of JAN 1907.

Official Seal

John R. Williamson
Ordinary of Fulton County.

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

Official Seal

Ordinary of *John A. Wiltson* **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.

OFFICE OF
JOHN AWTREY

ORDINARY, COBB COUNTY.

Marietta, Ga., *March 27th*, 1901.

Georgia—Cobb County.

Personally appeared *J. H. Howell* a resident of said County, who being duly sworn deposes and says, that he served in the same Co. & Regt. with *WM. H. Meek*, being Co. K. 41st Regt. Ga. Inf. That said Meek enlisted about March 1862, and served till May 1865. Said Meek surrendered with his Command at Ebenezer, N.C. with Johnston's army in May 1865, having served all through the war from date of enlistment, making a good and brave Soldier. Depo^{ment} was present with the Command at the surrender. Applicant was married to said Meek's before the war and is now his lawful widow, he having died about 1880 in Douglas County, Ga. *Depo^{ment}* does not know where *Meek* was born. Applicant has resided in this State ever since before the war.

Sworn to and subscribed before *J. H. Howell* on this March 27th, 1901.

John Awtrey
Ordinary, Cobb County, Ga.

I certify that depo^{ment}, *J. H. Howell*, is a bona fide resident of Cobb County, of high character and standing, and his evidence is worthy of full faith and credit.

John Awtrey, Ordinary.

Georgia
Douglas County

I, *J. H. Awtrey* Ordinary in and for said County do hereby certify that *M. A. Howell* and *J. W. Mauldin* who was introduced as witnesses in support of the application of *Mrs. M. A. Meek* for pension and that said *Howell* and *Mauldin* reside in Douglas County and that their statements are worthy of full faith and credit.

Given under my hand and Seal of Office this March 14th 1901.

J. H. Awtrey
Ordinary

Sworn to and affirmed before J. H. Howell

on this March 27th 1901.

John Anthony, Cobb County, Ga.

I certify that Defendant, J. H. Howell, is a bona fide resident
of Cobb County, of high Character and Standing, and his evidence
is worthy of full faith and credit.

John Anthony, Clerk.

Melton, Benjamin
Fulton Co

6th Jan 1911

No.

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

County

Fulton

Name

Benjamin Melton

Company

C

Regiment

46th Ga

Approved

J. W. KIMBEE

Commissioner of Prisons

MADE BY STEEL PLATE ENGRAVING

72-110

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

County, }

I, of said State and County, hereby apply 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)
Benjamin F. Melson Atlanta Fulton County Ga
2. How long and since when have you been a continuous resident citizen of this State?
Eighty nine years and since my birth
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
I did
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
Went 10th of May 1861, Company V, 46th Regt, Georgia Infantry
5. How long did you remain in the actual Military Service with said Company and Regiment?
Nearly three years, Went April 21, 1866
6. When and where was your Company and Regiment surrendered or discharged from the Service?
Paroled at Anderson, S.C.
7. Were you actually present with your Command when it was surrendered or discharged?
yes
8. If you were not actually present, state specifically and clearly where you were
- a. Where was your Command when you left it?
X
- b. When did you leave the Command?
X
- c. For what cause did you leave?
X
- d. By whose authority did you leave?
X
- e. For how long was your leave granted? In what way?
X
- f. Why did you not return to your Command after leave expired?
X
- g. In what way were you prevented?
X
- h. What effort did you make to return?
X
- 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?
X
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)
*1. Money \$150.00 2. Wagons \$60.00 Furniture \$100.00
stock of Coal & Wood \$200.00*
10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price?
1. Money to Ed Davis \$50.00
11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list)
*1. Money \$100.00 2. Wagons \$20.00 Furniture \$50.00
stock of Coal & Wood \$200.00*
12. What annual or monthly income or earnings of yourself and wife and the source derived have you?
About \$30.00 or \$40.00 per month from Coal & Wood business
13. Are you drawing a pension of any amount from this State or the United States?
No
14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?
I have not

Sworn to and subscribed before me, this the

day of *Sept* 1910

at *Atlanta*

of *Fulton* County.

Benjamin F. Melson
Ordinary,
County.

Soldier's Application.

UNDER ACT 1910.

Confederate

County *Fulton*
Name *Benjamin F. Melson*
Company *V*
Regiment *46th Ga*

Approved

J. W. LINDSEY,

Commissioner of Pensions

JOHN P. HYATT, State Printer, Atlanta.

9/30/10

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA

Fulton County.

Personally before me come _____ who on oath says that they are free holders residing in said County and we know the applicant for pension and we know the property that is now in the possession and control of himself and wife and of its exact value to wit: (Make list by items and value)

1st John Benjamin Melson
2nd Benjamin Melson
Home property and other

Melson, Benjamin
V

For Fulton County

1926

Application for Pension Due Deceased Pensioner

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

For Thos. H. Jeffries Ordinary

Date of Death Oct 6 1926

Amount \$100.00 of.

Approved and ordered paid

John W. Clark
JOHN W. CLARK,
Commissioner of Pensions

Paid

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.

JD

admitted money

Oct. 7, 1926 192
Miss Marion Melson

To The
For Funeral expenses
Mr. Benjamin Melson



Nov. 7	Casket 275.00-Embalming 25.00-----	300.00
	Suit cleaned and pressed 1.25-----	1.25
	Tie 1.00-Hearse to station 10.00-----	11.00
	Express to Newnan Ga. 20.00-----	20.00
	Prayage on shipping case to station 2.00-----	2.00
	Paper notices 1.80-----	1.80
	Total-----	\$386.05

BARCLAY & BRANDON CO.

PAID
Oct. 18, 1926
F.C.N.

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
Miss Marion M. Nelson of said County, who, after being sworn, on oath
says that he knew Benjamin Nelson 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 Oct 1926, and that
a Pension of Fifty (\$50.00) 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 \$336.05, per
sworn statements fully and completely ITEMIZED hereto attached, which said sum of \$336.05
has been paid in full by Miss
Marion M. Nelson and is now owing to her.

Sworn to and subscribed before me
A. S. Baulton Ordinary
Fulton County

(Seal of Ordinary)

Marion M. Nelson
564 Holderness St.

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos. H. Jeffries Ordinary of said County, do certify
that I personally know Miss Marion M. Nelson, 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 Benjamin Nelson 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 (\$50.00) 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 3 day of Dec, 1926.
Thos. H. Jeffries Ordinary
Fulton County

(Seal of Ordinary)

INSTRUCTIONS:

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

2nd. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "Aid, 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.

the voucher have been carefully observed in making up this voucher and the bill which are attached hereto.

Given under my hand and official seal, this day of Dec, 1924.
(Seal or Ordinary).....Charles H. Phillips..... Ordinary
.....Anderson..... 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 owing 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.

MERCER, L. M.
32 Randolph St.
Fulton County
1901
No. _____

INDIGENT PENSION
1899.

Name *J. M. Mercer*
County *Fulton*
Co E - 42 Ga Inf
discom. Reenlistment No. 6 24
April 1865
Approved _____ 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

W. B. HARRISON, STATE PRINTER, ATLANTA.
6/1-1901
573

Pension app'd 7/17/1899
Applicant claims his dis-
ability is based on age
but he does not show it -
Other proofs not sustain
Richd Johnson
Comm of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA,

~~Fulton County,~~

~~I, *J. M. Mercer*~~
~~of *Fulton* County,~~
~~do hereby authorize~~
~~and empower *W. B. Harrison*~~
~~to receive and receipt for the pension allowed and money thereon to be paid to me~~
~~by the Pension Office of the United States Department of War.~~
~~Witness my hand and seal this *17* day of *July*, 1899.~~
~~Executed in presence of *W. B. Harrison*~~
~~*W. B. Harrison*~~
~~*W. B. Harrison*~~

STATE OF GEORGIA.

~~Tippecanoe~~ COUNTY.

I, ~~J. M. Messier~~
~~Gene Messier~~, hereby authorize
of ~~Arthur~~

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

Witness my hand and seal this 27th day of July 1899

Executed in presence of

by M. Trach (L. S.)

Punam Pp. a 7/17/1999
 Offl. can't claim his dis-
 ability is based on age
 but he does, not show it -
 other people not sustain
 R. W. Johnson
 Curran Punam

INDIGENT PENSION

1899.

Name *J M Moore*
County *Tulahoma*
Box E - 42 Gadsden
and Bentonville Ark. 24
and Ark.
Approved _____
1899

RICHARD JOHNSON,
Commissioner of Penitents.

WARRANT HANDED TO

STATE OF GEORGIA.

Trulston County.

J. M. Mercer of said State and County, desiring to avail himself of the Penion Act (Section 1984, 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.)
 Mulveyer Co allanta saws Co. Hannibal Mo.
 2. How long and since when have you been a resident of this State?
 every since birth
 3. When and where were you born? Nanton, Cass Co. Mo.
 4. When and where and in what company and regiment did you enlist or serve?
 enlisted March 1862 at Lexington, Va in Co
 B 42 8a regiment
 5. How long did you remain in such company and regiment?
 little over 3 years
 6. For how long a period did you discharge regular military duty? 3 years
 7. Where and under what circumstances were you discharged from service? April 1865
 Discharged at Brunswick S.C. Close of war
 8. What is your present occupation? have been a farmer
 9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
 10. What has been your occupation since 1865? farming
 11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? 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?
 it has been 6 years since I could
 earn my own support
 13. What property, effects or income do you possess, and its gross value? nothing
 14. What property, effects or income did you possess in 1894, 1895, 1896, 1897 and 1898, and what dis-
 position, if any, did you make of same? in 1895 owned one cow
 sold it to Mr Morgan & paid on it
 15. In what County did you reside during those years, and what property did you then return for taxation?
 in DeKalb Co. Mo.
 16. How were you supported during the years 1897 and 1898? by living with
 my son in law
 17. How much did your support cost for each of those years, and what portion did you contribute there-
 by to your own labor or income? about 60 dol nothing by my labor
 18. What was your employment during 1897 and 1898? What pay did you receive in each year?
 unable to work
 19. Have you a family? If so, who composes such family? Give their means of support? Have they
 homesteaded? wife dead 2 children both married
 20. Are you receiving any pension? If so, what amount, and for what disability?

Sworn to and subscribed before me this the

23 day of May, 1899.

of Franklin County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

J. M. Parker of said State and County, having been presented as a witness in support of the application of J. M. Mercer 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. M. Parker, 112 East 11th St, Atlanta, Fulton Co
2. Are you acquainted with J. M. Mercer, the applicant; if so how long have you known him? I have known him since March 1862
3. Where does he reside, and how long and since when has he been a resident of this State? Fulton - all his life
4. When, where and in what company and regiment did he enlist, and how do you know? March 4th 1862 - Kinston Co. Co. C. 42nd Ga. Infantry. Served with him
5. Were you a member of the same company and regiment? Yes, in the same 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? He served faithfully until he was honorably discharged at the end of the war - over three years
7. What property, effects or income has the applicant? (Give your means of knowledge.) Had nothing
8. What property, effects or income did the applicant possess in 1896, 1897 and 1898, and what disposition, if any, did he make of same? Had nothing
9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom? Had nothing to convey
10. What is the applicant's occupation and physical condition? farming when able to work very feeble
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is totally unable to support himself, because he is over 65 years old, feeble and has nothing
12. How was he supported during the years 1897 and 1898? by wages from his children
13. What portion of his support for these two years was derived from his own labor or income? no that I know of
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Very poorly, health bad, unable to do manual labor
15. What interest have you in the recovery of a pension by this applicant? nothing at all

Sworn to and subscribed before me, this 2nd day of Feb, 1899. J. S. Relf Witness.
M. Mercer Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

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

We have thoroughly examined said J. M. Mercer & we find him a feeble (physical) man, suffering from a combination of heart & rheumatism, also from some other diseases, so that he is unable to work or calling sufficient to earn a support for himself, and that he has no interest in said pension being allowed.

Sworn to and subscribed before me this 2nd day of Feb, 1899. W. L. Childs and J. S. Gordon Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, M. Mercer Ordinary in and for said County, hereby certify that the applicant, J. M. Mercer, 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. S. Relf and J. S. Gordon 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 1897 and Dollars of property, and in 1898 and Dollars of property.

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

Witness my hand and seal of office, this 2nd day of Feb, 1899. M. Mercer 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 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 _____ 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 _____

Morgan, J. M.
Fulton Co.
CODE SECTION 184.
(FOR THOSE ALREADY ENROLLED.)

No. *342*

INDIGENT

SOLDIER'S PENSION
1902.

Name *J. M. Morgan*
County *Fulton*
Co. *E*

Regiment *42*

WARRANT ISSUED

11/4 1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

[Signature]
Gen. W. Hoffman, State Printer, Atlanta.

No date

Morgan, J. M.
Fulton Co.

CODE SECTION 184.

(FOR THOSE ALREADY ENROLLED.)

No. *342*

INDIGENT

SOLDIER'S PENSION
1907.

Name *J. M. Morgan*
County *Fulton*
Regiment *42*

WARRANT ISSUED

11/4 1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

[Signature]
Gen. W. Hoffman, State Printer, Atlanta.

No date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J. M. Mercer 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 birth 1860; that he is 60 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 3 yrs in Company E, of 4th Regiment of Garles Inf; that his physical condition is as follows: age & poverty

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 1902.

Sworn to and subscribed before me, this 14th day of Jan, 1902.

J. M. Mercer
Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 14th day of Jan, 1902.



John R. Williamson
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. M. Mercer 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 _____ 1836; that he is 71 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 B, of 42nd Regiment of Ad. Vols; that his physical condition is as follows: infirmity poverty & age

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.

J. M. Mercer
Ordinary.

State of Georgia,

Fulton County.

I, John R. Williamson, Ordinary of said County, do certify that I am well acquainted with J. M. Mercer the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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. Williamson
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.]

Mercer, J. M.
Fulton County
CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 93

INDIGENT

**SOLDIER'S PENSION
1903.**

Name *J. M. Mercer*

County

Co. *E* Regiment *42*

J. M. Mercer
WARRANT ISSUED

1/30 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

J. M.

Geo. W. Hardison, State Printer, Atlanta.

no data

Mercer, J. M.
Fulton Co
CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 41

INDIGENT

**SOLDIER'S PENSION
1904.**

Name *J. M. Mercer*

County

Co. *E* Regiment *42*

J. M. Mercer
WARRANT ISSUED

1/30 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

J. M.

Geo. W. Hardison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears J M Mercer 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 Birth 18 ; that he is 61 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 yrs in Company E, of 42nd Regiment of Geo Vols; that his physical condition is as follows:

A & 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.

Ordinary

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with J M Mercer the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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—A Affidavit should not be attested before January 1st, 1904.



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears J M Mercer 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 Birth 18 ; that he is 61 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 yrs in Company E, of 42nd Regiment of Geo Vols; that his physical condition is as follows:

A & 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.

Ordinary

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with J M Mercer the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1904 1904.

John R. Wilkinson

Ordinary

County.

NOTE—The blank spaces must be filled.
NOTE—A 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

NAME SECTION 1354.
(FOR THOSE ALREADY ENROLLED.)

No. 284

INDIGENT
SOLDIER'S PENSION
1905.

Name J. W. Hurren
County Fulton
Co. 2 Regiment 42nd Reg.

WARRANT ISSUED
4/6 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[Signature]

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

no date

NAME SECTION 1354.
(FOR THOSE ALREADY ENROLLED.)

No. 139

INDIGENT
SOLDIER'S PENSION
1906.

Name J. W. Hurren
County Fulton
Co. 2 Regiment 42nd Reg.

WARRANT ISSUED
4/7 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[Signature]

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

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton.

County.

Personally appears J. M. Mercer 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 _____ 1836; 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 Georgia) during the war between the States, and served for the term of 3 yrs in Company C, of 4th Regiment of Cal. Vols; that his physical condition is as follows: Infirmity, poverty and Age

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 _____ 1905.

Ordinary.

STATE OF GEORGIA.

County.

I, _____ Ordinary of said County, do certify that I am well acquainted with J. M. Mercer the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know 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. M. Mercer 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 _____ 1836; 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 C, of 4th Regiment of Cal. Vols; that his physical condition is as follows: Infirmity, poverty and Age

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 1905.

Sworn to and subscribed before me, this the _____ day of JAN 1 1906.

Ordinary.

State of Georgia,

County.

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

Atlanta, Ga. 190

Georgia Fulton County
Personally came before me
J M Mercer who on oath says
that he was born on the 19th
day of January 1836 in Weston
County Georgia and has been
a citizen of Georgia all his life -
that he is very infirm, unable
to do physical labor - The original
to which this is attached is the
only application for Pension
he has ever made - that the
papers have been lost or misplaced
in the Commissioners office up
to about 10 days ago -
Sworn to & Subscribed
before me
Dec 19th 1900

W. H. H. H.

J. M. Mercer

There are no witnesses in the any in the same
signature - the seal - faithful account of humanity - and
can and in the any & the end of the war
1877-76 H. H. H.

NAME **Harper, J.M.** YEAR **1901** COUNTY **Fulton**

WHEN AND WHERE BORN? **Newton Co. Snapping Shoals Ga. Jan. 1st. 1886**
Resident of Co. since birth.

ENLISTED WHEN AND WHERE? **March 1898 at Covington, Ga.**

RANK.

COMPANY AND REGIMENT? **Co. E, 42nd. Regt. Ga. Vols.**

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? **April 1898 Bentonville, S.C.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. **E.J. Parker, same regiment --No data.**

JWT

BURIED.

WITNESSES. . R.J. Parker, same regiment --No data.

JUT

POWER OF ATTORNEY.

State of Georgia,
Fulton County.

I, Mary A. Mercer hereby authorize
of Atlanta Ga

to receive and receipt for the pension paid hereon and request that he remit same to
me at Atlanta Ga

day of March 1899.

Executed in presence of

F. M. C. C. C.

Mary A. Mercer [L.S.]

For Those Heretofore Paid.

1899.

NO. 3672
(From Ed. C. Co. (F&H))

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO

Mrs. M. A. Mercer

or

Fulton County

Widow of J. T. Mercer

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

3/23 1899.

AND HANDED TO

T. F. Brumby

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

State of Georgia,

Hilton County. }

I, Mary A. Mercer hereby authorize

T. F. Hunter of Atlanta Ga

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

me at Atlanta Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17th

day of March 1899.

Mary A. Mercer [L. S.]
Marc

Executed in presence of

E. Mac Title

Mercer, Mary A. (M.A.)
Hilton Co. Ga. 18

For Those Heretofore Paid.

1899.

NO. 3677
Sum. Co. Ga. 1899

WIDOW'S PENSION,

For year ending February 16th, 1899.

PAID TO

Mrs. M. A. Mercer

or

Fulton County

Widow of J. T. Mercer

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

3/23 1899.

AND HANDLED TO

T. F. Hunter

Geo. W. Harrison, State Printer, Atlanta.

COUNTY OF
STATE OF GEORGIA

FOR WIDOWS HERETOFORE ALLOWED PENSIONS:

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton Co

Personally Comes Mrs.

Mary A. Mercer

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 remained in said State continuously ever since Dec 1870 That she is the Widow of Joel James Mercer who was a soldier in Company B of the Fifty first Regiment of Georgia Vol. Volunteers, that he enlisted in said regiment on or about the month of April 1861 and served in the Army up to December 13th 1862 That he lost his life on the 13th day of December 1862 (State here full particulars of the husband's death, when, where and from what cause.)

He was killed at the Battle of Marietta,

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 1860.

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, 1899.

Sworn to and subscribed before me, this

16th day of March 1899

Thos. H. H. H. H. Ordinary.

Fulton County.

State of Georgia,

Fulton County.

Ordinary of said County, certify that I am well acquainted

with Mrs. Mary A. Mercer 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 March 1899

Given under my official signature and seal this the 16th day of March 1899.

M. H. H. H.

Ordinary of Fulton County.

Official Seal.

Post-Office Marietta Ga

I Thos. H. H. H.

Ordinary of Fulton County.

POWER OF ATTORNEY

State of Georgia, Spalding County. } Ordinary of said County, certify that I am well acquainted
with Mrs. Mrs. Mary Adams 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 March 1899.
Given under my official signature and seal this the 16th day of March 1899.

Official
Seal.

M. Adams
Ordinary of Spalding County.

BOYER OF ALLOMEE

Recd
enclous

W. W. W. W.
Fulton Co.
OK Jan 1918

No.

See above stars
State 10/10/18

Confederate

Soldier's Application.

UNDER ACT 1910.

County Fulton

Name Marion O. Mann

Company Bells But B Co

Regiment Militia

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAR. F. BYRD, State Printer, Atlanta.

10-25-18

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Culton County.

Marion W. Mark 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).
Marion W. Mark Atlanta, Culton County
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?
Militia
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service).
Feb. 1862, South Fork Co. 6th Cavalry, Atlanta
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge).
May 19, 1862
6. When and where was your Company and Regiment surrendered or discharged from the Service?
Atlanta, Ga. May 1862
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.
9. Where was your Command when you left it?
Swamp, left command.
10. When did you leave the Command?
Final, registered.
11. For what cause did you leave?
out of service
12. By whose authority did you leave?
13. For how long was your leave granted? In what way?
14. Why did you not return to your Command after leave expired?
15. In what way were you prevented?
16. What effort did you make to return?
17. Were you captured during the war?
18. If so, when, and where? In what prison were you held and when were you released?
19. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1908? (Make list by items and value).
house and lot at 1830 1/2 street at value of \$2500
20. What property of any kind have you disposed of and for what purpose since 4 Nov. 1908. To whom and for what price?
house and lot at 1830 1/2 street at value of \$2500
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 its cash value? (Make itemized list).
none
22. What annual or monthly income or earnings of yourself and the source derived have you?
daily wages
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 the 19 day of October, 1911.

John S. Brennan
Notary Public in and for the State of Georgia.

Sworn to and subscribed before me this 19 day of Oct, 1911.

Marion W. Mark
County Atlanta
Ordinary

Soldier's Application.

UNDER ACT 1910.

Confederate

County Tulsa

Name Marion W. Mark

Company 6th Art G Co

Regiment Militia

Approved

J. W. LINDSEY,

Commissioner of Pensions

CHAS. F. STEIN, State Printer, Atlanta.

10-25-11

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Fulton County.

W. J. G. Gaas

of said State and County is hereby presented as a witness in support of the application of Marion M. Mink for the pension provided by the Act of 1910, in said State, and after being sworn true answers to the questions propounded answers as follows:

1. What is your name and where do you reside? W. J. G. Gaas
Atlanta, Fulton County, Georgia

2. How long and since when have you known Marion M. Mink the applicant?
Since 1862

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Atlanta, Ga. All his life.

My personal knowledge

4. When, where and in what Company and Regiment did Marion M. Mink enlist during war from 1861 to 1865? (Give date and place) Oct. 1864, Self. Batt. Co. E. 1st Regt. Ga. Inf.

5. How did you obtain your information of this Service? I have a personal knowledge of this man's service.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Oct. 1864 to May 19, 1865

7. When and where was his Command surrendered or discharged (give date and place) Atlanta, Ga. May 19, 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? _____ Where was his Command

when he left it? _____ for what cause did he leave?

By whose authority did he leave _____ and how

long was he granted leave? _____ How do you know

all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) _____

13. In what way was he prevented from returning to his Command? _____

How do you know? _____

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

15. Was applicant captured as a prisoner? _____ If so, when and where?

In what prison was he held? _____ and when released?

Sworn to and subscribed before me, this the

19 day of October, 1917

J. S. Brumby Ordinary,
City of Atlanta, Georgia

Sworn to and subscribed before me

this 19 day of Oct, 1917

County Fulton

C. C. ORDINARY

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

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

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items.) House at 108 East Decatur St. \$2,500, unsold in business and lost

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

3. What was the price paid or stated to be paid? \$2,500

4. What relation is the party to applicant? none

5. What disposition was made of the proceeds of the sale? lost in business

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

or was it made to obtain a pension? not to obtain a pension

Sworn to and subscribed before me, this the 19 day of Oct, 1917

Adam R. Marbut Ordinary, W. J. G. Gaas

of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

Adam R. Marbut Ordinary of said County, certify that I know

the applicant Marion M. Mink for Pension is the person he represents himself to be and resides in said County. That I also know W. J. G. Gaas the witness swearing to the

service and W. J. G. Gaas who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the

Tax Returns of _____ shows that _____

value for tax is in 1908 \$ 900.00 for 1909 \$ 900.00 for 1910 \$ 900.00

for 1911 \$ 900.00 for 1912 \$ 900.00 for 1913 \$ 900.00 for 1914 \$ 900.00 for 1915 \$ 900.00

Sworn under my hand and official seal of office this 19 day of Oct, 1917

Adam R. Marbut Ordinary,

of Fulton County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."

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

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

4. If applicant has no property at all in his possession, use or control of self affidavit of freeholders unnecessary.

PLACE OF BIRTH Fulton		Militia District (Number and Name)		Signed _____ No. 582	
County _____				State of Georgia	
City or Town Atlanta		Length of residence in this city or town: Yrs. ____ Mos. ____ Days ____ NON-RESIDENT? (Yes or No) _____			
Street and Number (No.) _____		(Street) Stonewall.		Ward _____ (If death occurred in a hospital, give its name instead of street and number)	
3. FULL NAME Marion W. Merk.					
Residence (City or Town) Stonewall Ga.		(Street and Number) _____		(State) _____	
PERSONAL AND STATISTICAL PARTICULARS					
1. SEX Male		2. COLOR or RACE White.		3. MARRIAGE Widowed (Divorced (with the widow) Survivor, husband, etc.)	
4. DATE OF BIRTH month, day, year Jan 5,					
7. AGE Yrs ____ Months ____ Days ____		If less than one day Hours ____ Minutes ____			
8. OCCUPATION		Retired.			
(4) Trade, profession or particular kind of work done, as spinner, weaver, machinist, etc. (5) Industry or business in which engaged, such as cotton mill, sawmill, bank, etc. (6) Total years spent in occupation (month and year) (7) Occupation (month and year)					
9. BIRTHPLACE Ga.					
10. NAME Henry Merk.					
11. BIRTHPLACE Ga.					
12. MAIDEN NAME Elizabeth Payne.					
13. BIRTHPLACE Ga.					
14. INFORMANT Rhinel Merk. (Signed) Stonewall Ga.					
15. BURIAL PLACE Owl Neck Church Yard. (Cemetery) Stonewall Ga. Date 11/15/1934. (Postoffice)					
16. UNDERTAKER Mary G. Poole. (Signed) Atlanta Ga.					

MEDICAL CERTIFICATE OF DEATH	
14. DATE FILED / 14	34 at 10.00 P. M. (Month, Day, Year) (Hour)
17. I HEREBY CERTIFY That I attended the deceased from _____ to _____	
I first saw _____ alive on _____ at _____ He said he had recovered on his feet and had stated above that he was suffering from cerebral congestion of the brain, and related sequelae of importance in the case of a middle-aged man, of death. Cerebral congestion of death. Atherosclerosis.	
Other contributory causes of importance:	
What test confirmed diagnosis? (Specify whether cardiac, respiratory, laboratory, or clinical) If death was due to external causes (violence) fill in also the following: Was injury an accident, suicide, or homicide? Where did injury occur (Specify city or town, if outside of limits, the county, and also the date) Did injury occur in a house, public place or industry? Manner of injury Nature of injury R. W. McGee (Signed) Ben Hill Ga. (Address)	
14. FILED Nov. 15. 1934.	19
(Signed) WM L. Gilbert.	

M. Funeral expenses of Mr. Marion W. Merk

IN ACCOUNT WITH
HARRY G. POOLE
FUNERAL DIRECTOR
164 PRYOR STREET, S. W.
ATLANTA, GA.

WALNUT 18388

Nov. 13, 1934

Casket Embalming and all services	\$170.00
Concrete Vault	40.00
	<hr/> \$210.00

Georgia
Fulton County

I Harry G. Poole Jr. after being duly sworn certify that the above account was for funeral expenses of Mr. Marion W. Merk who died Nov. 13, 1934. The above account is just, true, correct and unpaid as the said deceased died without sufficient funds to pay his funeral expenses

Harry G. Poole Jr.

*Subscribed to under
Notary Public
in and for Fulton County
Georgia*

This is to certify that this is a true and correct copy of the death certificate of Marion W. Merk as appears on the records of this office.

U.C. Bryant
Deputy Local Registrar

Sworn to and subscribed subscribed before me this 24th day of November 1934.

*Notary Public Fulton County Ga.
State of Georgia as follows*

Received of Thomas H. Jeffries, Ordinary, \$ 210 ⁰⁰
for the account of Marion W. Merk. This amount has
not previously been paid and is now owing to me.
March 7 1935.

*Harry G. Poole
By E. Walden,*

NAME Merck, Marion W. YEAR 1916 COUNTY Fulton

PLACE AND WHERE BORN? A resident of Georgia since birth.

ENLISTED WHEN AND WHERE? October 1964, Carroll County, Ga.

RANK?

COMPANY AND REGIMENT? Co. C, Bell's (Bell's) Battn. Ga. State Troops

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED?

WHEN AND WHERE SURRENDERED? May 19, 1968, Atlanta, Ga.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED?

WITNESSES? W. J. C. Camp ----- Same Command ----- No data.
1h

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 Harry B. Poole Jr.,
representing Harry G. Poole, of said County, who, after being duly sworn, on oath says
that he knew Marion W. Merck late of said County, a Confed-
erate pensioner, and that said person is the identical person named and described in the attached
certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of
ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted
to the sum of \$ 210.00, as shown by sworn statements FULLY and COMPLETELY
ITEMIZED, hereto attached.

Sworn to and subscribed before me,
this the 24 day of Nov., 1934.
Charles B. Mason, Ordinary.

CERTIFICATE OF THE ORDINARY

GEORGIA, Fulton County.

I certify that Harry G. Poole 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 Marion W. Merck the deceased
pensioner referred to in the foregoing affidavit and that said deceased was at the time of death
regularly enrolled as a pensioner on the records of file in my office. I further certify that said de-
ceased pensioner is the identical person named and described in the attached certified copy of burial
certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses
of last illness and burial for which claim is made.

Given under my hand and seal of office, this the 24 day of Nov., 1934.
(Seal of Ordinary) Charles B. Mason, Ordinary.

INSTRUCTIONS:

- 1st. Certified copy of Burial Certificate must accompany this application.
- 2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 3rd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of _____ who died without owning sufficient property to pay this bill."
- 4th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed and signed as indicated.
- 5th. The completed voucher—this blank and the bills—must be sent to the Veterans Service Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 6th. Return this application, and attached bills, properly receipted, to the Veterans Service Office.
- 7th. Ordinary should see that the back of this blank, when folded, is filled out.
- 8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Veterans Service Office.
- 9th. The State does not authorize the payment of these expenses in the event a soldier pensioner is survived by a widow, nor if the pensioner left any estate of any kind or value sufficient to pay them, nor if the pensioner had been outside of the State of Georgia for more than twelve (12) months immediately preceding date of death.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

COUNTY }

Franklin
I, *A. A. Smith*

Ordinary of said County, do certify that I

know *Mrs. A. A. Smith* to be 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 19th day of *August* 1918

That I also know *W. A. Wright* witness as to marriage, and I also know

that both of the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 19th day of *August* 1918
(SEAL) *Franklin* Ordinary.

NOTES: 1. Before any affidavit is returned to the Ordinary under the provisions of the Act, the following facts must be ascertained: 1. That the applicant is a bona fide continuing resident of the County of residence. 2. All affidavits must be made before the Ordinary of the County of residence. 3. The applicant must be a bona fide continuing resident of the County of residence. 4. The applicant must be a bona fide continuing resident of the County of residence. 5. The applicant must be a bona fide continuing resident of the County of residence. 6. The applicant must be a bona fide continuing resident of the County of residence.

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—As Amended by Act of 1919.

County *Franklin*
Name *Mrs. Albert Smith*
Widow of *Albert Smith*
Company *3*
Regiment *1st Alabama*
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Ordinary Fulton Co., Ga.

October 25 1918
I, *Franklin*, Ordinary of said County, do certify that *Mrs. A. A. Smith* is a bona fide continuing resident of said County and was on the 19th day of *August* 1918. That I also know *W. A. Wright* witness as to marriage, and I also know that both of the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

10-23-1918

STATE OF GEORGIA.
COUNTY OF FULTON.

I, Thomas H. Jeffries, Ordinary of said County, do certify that I know Mrs. Albert Herrick, the applicant for pension. She is the person she represents herself to be and is a bona fide continuing resident citizen of said County and was on the 1st day of January, 1906; that she was duly sworn to before signing the foregoing affidavit; that she is truthful and trustworthy and her statements are entitled to full faith and credit. Sworn under my hand and official seal of office this October 16 1919.

Ordinary Fulton Co., Ga.

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 1912.

No. *11008*

County *Fulton*

Name *Mrs. Albert Herrick*

Widow of *Albert Herrick*

Company *3*

Regiment *51st Alabama*

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Bird Printing Co., State Printers, Atlanta.

10-23-1919

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth, so help you God."
2. All affidavits must be made before the Ordinary of the county of residence.
3. Only widows who married prior to first January, 1911, are entitled.
4. Attest certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
5. Widows of disabled Pensioners must use the Blue Application Blank and white and prove full term of husband's service—because he made no proof of service and was not required to do so.

STATE OF GEORGIA.
COUNTY OF *Fulton*
I, *J. W. Lindsey*,
Ordinary of said County, do certify that I know Mrs. *Albert Herrick*, 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 *1st* day of *January*, 19*06*.
That I also know *W. A. Wright*, witness as to marriage, and I also know *W. A. Wright*, witness as to marriage, and I also know 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 *16th* day of *October*, 19*19*.
(SEAL)
Ordinary.

ORDINARY'S CERTIFICATE

Merritt M Albert (Mrs)

For Fulton County

1929

**Application for Pension
Due Deceased Pensioner**

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

Thos H Jeffers Ordinary

For Mrs Merritt M Albert

Date of Death Apr 5 1929

Amount \$100.00

Approved and ordered paid

May 9, 1929

JOHN W. CLARK,
Commissioner of Pensions.

1 to be rep.

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.

pd 6-18-29 ✓

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Gravette COUNTY.

I, T. A. Clapp Ordinary of said County, do certify that I know Mrs. Mrs. Merritt M. Albert 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 19th day of August 1929

That I also know H. C. Wright witness as to marriage, and I also know that both of the foregoing were duly sworn by me before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 19th day of August 1929

(SEAL)

T. A. Clapp

Ordinary.

Gravette

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 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, 1900—As Amended by Act of 1906.

No.

County Fulton

Name Mrs. Merritt M. Albert

Widow of Albert Merritt

Company B

Regiment 51st Alabama

Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co. State Printers, Atlanta.

10-23-1919

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 Roger Williams of Brandon and Williams of said County, who, after being sworn, on oath says that he knew Mrs. Albert Merritt 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 5th day of April 1929, 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 \$ 356.15, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,

Greenshaw Ordinary
Fulton County
(Seal of Ordinary)

Roger Williams

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos H. Jeffries Ordinary of said County, do certify that I personally know Roger Williams of Brandon and Williams 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. Albert Merritt 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 and (\$200) 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 19th day of April, 1929
(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 Albert Merritt who died without owning sufficient property to pay this bill.

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

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

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

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

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. Albert Merritt of said County, who, after being duly sworn, says that she is the widow of Albert Merritt to whom, in the County of Greene State of Georgia she was married on the 5th day of March 1873, and that she remained his wife, and resided with him to the date of his death in May 1899, and that she has not since his death remarried. At the time of his death he was a resident of Greene County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$6.00 in Greene County for 1899 per annum, on account of being a soldier in Company F Regiment 17th Infantry (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 May day of 1899.

Sworn to and subscribed before me, this the

20th day of August 1919,

Charles B. Mansour Ordinary

of Fulton County.

(SEAL)

Mrs. Albert Merritt

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

STATE OF GEORGIA,

Greene COUNTY.

Personally before me comes J. B. Rankin & G. Wright 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. Albert Merritt who made the foregoing affidavit, is the lawful widow of Albert Merritt who died in Greene County in said State of Georgia on 19th day of May 1899, and that she has not since remarried. That she became the wife of Albert Merritt on the 5th day of March 1873, and that she and he had resided together as man and wife continuously since May day of March 1873, and that the Albert Merritt was the same man who was on the pension roll of said State from Greene County Georgia when he died.

Sworn to and subscribed before me, this the

19th day of August 1919

J. B. Rankin Ordinary

of Greene County.

(SEAL)

State of Georgia

H. C. Wright

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.

of Greenville County.
(SEAL) State of Georgia

JAMES B. PARK
JUDGE OCMULGEE CIRCUIT
GREENSBORO, GEORGIA August 19th 1919.

Enclosed I return you the application for pension under the law passed by the Legislature this summer. I have not seen the law but presume the application complies with its provisions. Carry the paper enclosed to Hon. Thomas Jeffries, Ordinary of Fulton county and let him inspect it and if it needs any necessary additions that you cannot procure in Atlanta, let me know and I can complete it here. Judge Jeffries will take pleasure in assisting you in any way he can. I know him well and there is not a better man in Georgia. With kind regards, I am,

Yours respectfully,

Mrs. Albert Merritt,
Atlanta, Ga.

HAPEVILLE, GA. April 9, 1929

Mrs. W.O. McKenzie

102 N Church, East Point, Ga.

TO BRANDON & WILLIAMS DR.
FUNERAL DIRECTORS

PHONE FAIRFAX 2510

NIGHT FAIRFAX 2116

Apr 5	Complete Funeral Expense of Mrs Albert Merritt	\$ 356	15
-------	--	--------	----

Georgia, Fulton County;

Personally appeared Roger Williams of Brandon and Williams who swears that the above bill was for funeral expenses of Mrs. Albert Merritt, deceased, who died without sufficient property to defray her funeral expenses.

Sworn to and subscribed before me, this 16th day of April, 1929.

ALL BILLS MUST BE PAID WITHIN 30 DAYS.
HIGH PENALTY INTEREST AFTER 30 DAYS.

Georgia, Fulton County;

Personally appeared Roger Williams of Brandon and Williams who swears that the above bill was for funeral expenses of Mrs. Albert Merritt, deceased, who died without sufficient property to defray her funeral expenses.

Sworn to and subscribed
before me, this 18th day
of April, 1929. *William R. Williams*
ALL BILLS FOR TO BE PAID THIS DATE.
EIGHT PER CENT INTEREST AFTER 30 DAYS.

POWER OF ATTORNEY.

STATE OF GEORGIA,

I, _____
COUNTY, }
of _____

do hereby authorize _____
to receive and receipt for the pension allowed, and request that he remit same to _____

Witness my hand and seal, this _____ day of _____, 1902.

Executed in presence of _____ [L.S.]

Handwritten signature

Merritt, James B.
Fulton Co.
No. _____ 1902

OK
**INDIGENT PENSION,
1902.**

Name *James B. Merritt*
County *Fulton*
Co. *D 42.4a* Reg'm't _____
Approved _____ 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

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

Geo. W. Harrison, State Printer, Atlanta.

8/4-1902

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 _____, 1902.

Executed in presence of

[L. S.]

Questions for Applicant.

STATE OF GEORGIA,

Fulton County.

I, James T. Merritt of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submit his proof, and after being duly sworn

1. What is your name and where do you reside? (give State, County and post office)

James T. Merritt 628 Decatur St Atlanta Ga

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

all his life Fulton County Georgia

3. When and where were you born?

4-2-48 Weymouth Mass

4. When and where and in what company and regiment did you enlist or serve?

1862 Decatur Mass

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

Three years and six months when he was honorably discharged on account of physical disability

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

March 1865 at the time

7. Were you present with your company and regiment when it was surrendered?

No

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?

I was not present and had been discharged as before stated

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

Nothing at all

10. What has been your occupation since 1865?

Remained near the home

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?"

Third, "blindness and poverty."

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

I am not totally blind but have been blind for some years and have been gradually losing my sight as the result of disease of the eyes

13. What property, real or personal, or income, do you possess, and its gross value?

I own nothing on the earth but a one and a half acre lot and a house

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

I sold one small piece of land in 1864 and the rest I have kept

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

I lived in Fulton County and returned the same for taxation

16. How were you supported during the years 1869, 1900 and 1901?

I sold a little piece of land and my wife and I lived on the balance

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 at all

18. What was your employment during 1868, 1869 and 1901? What pay did you receive in each year?

Had no employment

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 two children but no homestead

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

No I am not

21. Have you ever made an application for pension before? one time

22. How many applications have you ever made and under what class?

One and it was the invalid class per year

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

John R. Williams Ordinary,

of Fulton County.

Every Question MUST be Answered.

Merritt, James T.
Fulton Co
No. 1902
INDIGENT PENSION,
1902.
Name James T. Merritt
County Fulton
Co. 42 Reg't 1
Approved _____
1902.

JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT HANDED TO
Ordinary will write Name of Applicant, Company and Regiment on back as indicated above.
John W. Lindsey, State Printer, Atlanta.
8/4-1902

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

P. J. Mitchell of said State and County, having been presented as a witness in support of the application of James B. Merrill 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? P. J. Mitchell
Atlanta Fulton County Georgia
2. Are you acquainted with James B. Merrill, the applicant; if so, how long have you known him? 10 years
3. Where does he reside, and how long and since when has he been a resident of this State? Atlanta Fulton County about 4 years
4. When, where and in what company and regiment did he enlist and how do you know? March 1862 DeKalb Co. 9th C. D. 42nd Ga
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? 13 months
7. When and where was his command surrendered? at Bentonville NC Spring of 1865
8. Were you present when it surrendered? No
9. Was applicant present? No
10. If he was not present, where was he? at his home in DeKalb Co
When did he leave his command? March 1865 For what cause? Discharge
By what authority he left? Regular Discharge How do you know all of this? was present at his discharge
11. What property, effects or income has the applicant? (Give your means of knowledge?) None I am his neighbor
12. What property, effects or income did the applicant possess in 1898, 1897, 1896, 1899, 1900 and 1901, and what disposition, if any, did he make of same? land sold for DeKalb in 1901
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? None
14. What is the applicant's occupation and physical condition? None Condition bad from old age & Debility & partially blind
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes from above causes
16. How was he supported during the years 1898, 1899, 1900 and 1901? Heard by Mr. R. E. Stone
17. What portion of his support for these four years was derived from his own labor or income? as above
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? partial blindness old age & general debility
19. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this the 1st day of June 1902. P. J. Mitchell Ordinary.
John R. Wilkinson Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me Dr. R. E. Stone and Dr. C. E. Murphy, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mr. James B. Merrill, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Dispositive eye sight - Blind for near 3 years) wishes him - caught which by followed him since an attack of measles during war - General debility which prevents him from making support for himself
and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 4th day of August 1902. R. E. Stone M.D. Ordinary.
C. E. Murphy M.D. Ordinary.
John R. Wilkinson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John R. Wilkinson Ordinary in and for said County, hereby certify that the applicant James B. Merrill resides in said County, and has been a bona fide resident of this State since the 1st day of June 1899 and that the witnesses, viz.: P. J. Mitchell

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 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 4th day of August 1902.

John R. Wilkinson 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 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 _____ 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.]

CODE SECTION 154.
(FOR THOSE ALREADY ENROLLED.)

No. 366

INDIGENT

**SOLDIER'S PENSION
1903.**

Name J B Merritt
County Fulton
Co. D Regiment 4th

Ega
WARRANT ISSUED

13rd 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

WHL
Geo. Harris, State Printer, Atlanta.

No data

CODE SECTION 154.
(FOR THOSE ALREADY ENROLLER.)

No. 379

INDIGENT

**SOLDIER'S PENSION
1904.**

Name James B Merritt
County Fulton
Co. D Regiment 4th

WARRANT ISSUED

12th 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

WHL
Geo. W. Harris, State Printer, Atlanta.

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. County.

Personally appears J B Merritt of said
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the _____ day of _____ 18____; that he is _____ years old and
by occupation a _____, that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served for the term of 13 mos in Company D, of 42nd Regiment
of Ga; that his physical condition is as
follows: A + 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 said
county been allowed a pension for the year 1903

Sworn to and subscribed before me, this the _____ day of JAN 20 1903, } J B Merritt
_____, Ordinary.

STATE OF GEORGIA,
Fulton. County.

I, John P. Wilkinson Ordinary of said County,
do certify that I am well acquainted with J B Merritt
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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, _____



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. County.

Personally appears J B Merritt 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 64 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 13 mo in Company B, of 42nd Regiment
of Ga; that his physical condition is as
follows: Infirmary

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, } J B Merritt
_____, Ordinary.

STATE OF GEORGIA,
Fulton. County.

I, _____ Ordinary of said County,
do certify that I am well acquainted with J B Merritt
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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, _____



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, James B. Merritt hereby authorize

E. L. Bradley of Fulton County

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

J. B. Merritt at his residence

by Power of Attorney

WITNESS my hand and seal, this 17 day of January 1906.

[L. S.]

Executed in the presence of

D. A. Cook

Merritt, J. B.
Fulton County

COSS SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 399

INDIGENT
SOLDIER'S PENSION
1905.

Name J. B. Merritt
County Fulton
Co. D. Regiment 4th Regt

WARRANT ISSUED
1/18 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
E. L. Bradley

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

no date

Merritt, J. B.
Fulton Co.

COSS SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 488

INDIGENT
SOLDIER'S PENSION
1906.

Name J. B. Merritt
County Fulton
Co. D. Regiment 42nd Regt

WARRANT ISSUED
_____ 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
E. L. Bradley

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

no date

FOR APPLICANTS HERETOFORE ATTORNEY PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J. B. Merritt 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 1840; 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 13 months in Company D, of 42nd Regiment of Ga. 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 Fulton County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 17 day of January 1905. J. B. Merritt
Ordinary.

STATE OF GEORGIA.

Fulton County.

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

Ordinary J. B. Merritt 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. B. Merritt 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 1840; 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 13 months in Company D, of 42nd Regiment of Ga. 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 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 17 day of January 1906. J. B. Merritt
X A. C. C. & P. & J. B. Merritt

State of Georgia,

Fulton County.

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

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

Ordinary J. B. Merritt County.

NOTE.—The blank spaces must be filled.

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

NAME **Norritt, James B.**

YEAR **1905** COUNTY **Fulton**

WHEN AND WHERE BORN? **Lincoln County, Georgia**

ENLISTED WHEN AND WHERE? **March 1905 - Decatur, Georgia**

RANK.

COMPANY AND REGIMENT? **Company D, 42nd Ga Infantry**

NAME OF CAPTAIN AND COLONEL?

WOUNDED? **Discharged on account of physical disability. Loss of eye sight due to attack of measles during the war.**

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? **Discharged after thirteen months service on account of physical disability.**

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. **B. B. Mitchell - same command -- No data.**

BURIED.

WITNESSES. B. E. Mitchell - same command -- No data.
24

Widow's Application
7-11-1910
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.

County *Fulton*
Name *Lucinda J. Merrett*
Widow of *W O*
Company *D G & Co*

Approved *E R O 1938*

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

ALFIDAVIT OF TWO FREEHOLDERS

STATE OF GEORGIA

Widow's Application
To Be Filled Out by Her Own Right When
Husband Was on the Subject Roll or
Fell on Under Act of July 11, 1910.

Name Lucinda J. Merritt
County Fulton
Widow of W. O.
Company D Co 4
Approved 6/20/1938
J. W. LINDSEY,
Commissioner of Pensions
CHAS. F. BETH, State Printer, Atlanta
10-31-1916

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Fulton County.

Personally before me comes Mrs. Lucinda J. Merritt of said County, who, after being duly sworn, on oath says, that she is the widow of W. O. Merritt to whom in the County of Fulton State of Georgia she was married on the 10th day of July 1866 and that she remained his wife, and resided with him to the date of his death on March 19th 1916 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in Georgia said State of Georgia, and he was on the Service Pension Roll of the State and paid a pension of \$2.00 in Fulton County for 19 60 per annum, on account of being a soldier in Company D Co 4 Regiment 2d (Volunteers of State Militia).

At the death of W. O. Merritt 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 and where situated).
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 June day of 1900.

Sworn to and subscribed before me, this the 1st day of June 1916 at Atlanta Georgia, Ordinary,
William R. McLaughlin of Fulton County.

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

STATE OF GEORGIA,

Harrison County.

Personally before me come J. L. Doss 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 William O. Merritt who made the foregoing affidavit, is the lawful widow of William O. Merritt who died in Fulton County in said State of Georgia on 15th day of March 1916 and that she has not since remarried. That she became the wife of William O. Merritt on the 1st day of July 1866 and that she and he had resided together as man and wife continuously since date of their day of 18 and that the W. O. Merritt 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 1st day of May 1916 at Atlanta Georgia, Ordinary,
W. J. Doss of Harrison County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

County.

Personally before me comes _____ who after being sworn on oath says, that they are freeholders of said County, and that they know _____ of said County and knew her said husband _____ at his death on the _____ day of _____ 191 _____ that she and he were in the use, possession and control of the following property at his death to wit: _____

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

of the value of \$ _____

Sworn to and subscribed before me, this the _____

day of _____ 191 _____

Ordinary,

of _____ County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

_____ Ordinary of said County, do certify, that I know Mrs. _____ the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the _____ 191 _____

That I also know _____ witness as to marriage and I also know _____

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

That the tax Books of _____ County shows that _____ returned property to the amount of \$ _____ for 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____ for 1911 \$ _____ for 1912 \$ _____ for 1913 \$ _____ for 1914 \$ _____ for 1915 \$ _____ for 1916

Sworn under my hand and official seal of office this _____ day of _____ 1916

(SEAL.)

Ordinary.

County.

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

STATE OF GEORGIA,
FULTON COUNTY.

Ordinary's Office, Atlanta, *June 17* 1906

I, John R. Wilkinson, Ordinary of said County,
certify that D. A. Cook, whose genuine
official signature appears to the annexed paper, was at the time of
said signing an acting R.P. & J.P., in and
for said County, duly sworn and commissioned, and that his com-
mission was date the 10th day of June 1905
and will expire on the 9th day of June 1909,
and that all his official acts as such are entitled to full faith and
credit.

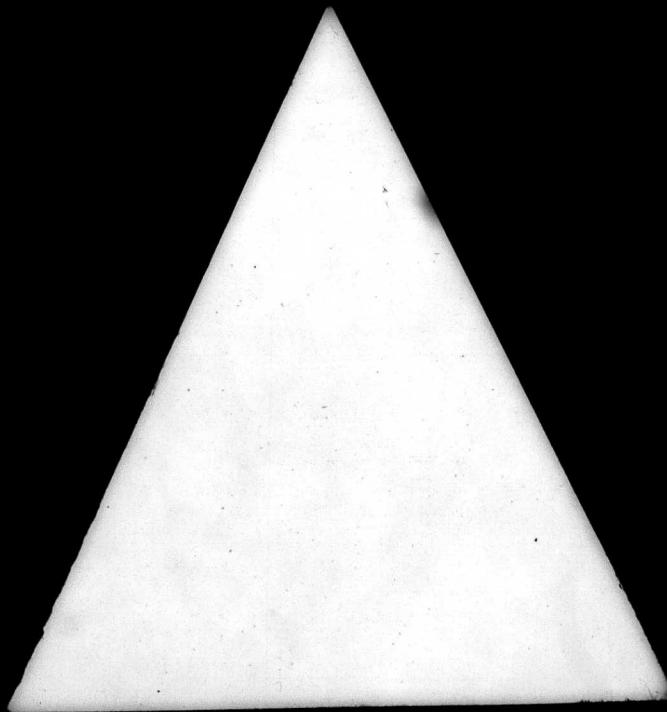
Given under my official signature and seal of office, this day and year
above written.

John R. Wilkinson
ORDINARY.

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. Wilkins
ORDINARY.



Maryland, D. C. - Nelson County
Chas. F. H. H. H.

Miss M. M. M. M.
Out for Rural today
No.
Rural Road 7/10-1910
Co I - 65th Regt
Confederate

Soldier's Application.

2 UNDER ACT 1910.
Reuben
County *W. Va.*
Name *Reuben*
Company *Co. 65th Regt*
Regiment
Approved *J. W. Lindsey*
J. W. LINDSEY,
Commissioner of Prisons.

CHAS. F. HYRD, State Printer, Atlanta.

7/8-1910

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.

Personally before me comes J. B. Collier & W. Mangum who on oath says that they are freeholders residing in said County and we know H. C. Insult.

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 real estate whatever. Possess about \$50 worth of household furniture. This covers their holdings.

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) none whatever.

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

3. What was the price paid or stated to be paid? none

4. What relation is the party to applicant? none

5. What disposition was made of the proceeds of the sale? none

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

or was it made to obtain a pension? yes

Sworn to and subscribed before me, this the 8 day of May 1914 John H. Brown Ordinary, Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.

John H. Brown Ordinary of said County, certify that I know the applicant J. B. Collier & W. Mangum for Pension is the person he represents himself to be and resides in said County. That I also know J. B. Collier & W. Mangum the witness swearing to the service and J. B. Collier & W. Mangum 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 Returns of none shows that none and wife value for tax is in 1908 \$ none for 1909 none for 1910 50.00

Sworn under my hand and official seal of office this 8 day of May 1914 John H. Brown Ordinary, Fulton County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth to help you God."

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

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

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

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Summit County.

Henry L. Smith of said State and County is hereby presented as a witness in support of the application of H. C. Insult for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? Capt Henry L. Smith Grinnell Co 3rd Cavalry 68th Pa Regiment

2. How long and since when have you known H. C. Insult the applicant? since 1863 at Loudon Tenn.

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Atlanta Ga.

4. When, where and in what Company and Regiment did H. C. Insult enlist during war from 1861 to 1865? (Give date and place) 3rd Pa Cavalry 1862 Loudon Tenn.

5. How did you obtain your information of this Service? from Capt Insult's company. He was 3rd Lieutenant of my company. (68th Pa Regiment)

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) 3 yrs. 1862 to 1865.

7. When and where was his Command surrendered or discharged (give date and place) at Greensboro N. C. about April 1865.

8. Were you personally present at the Surrender? yes.

If not, where were you and how came you there? I was on duty.

9. Was the applicant personally present with his Command at surrender? can't answer.

If not where was he and how came him there? can't answer. he was absent from the company at the time

When did he leave his Command? can't answer. Where was his Command at it? can't answer. for what cause did he leave? can't answer.

By whose authority did he leave? can't answer. and how

he granted leave? can't answer. How do you know

you have stated to be true? If of your own knowledge (Tell clearly and specifically) he was the Captain of this Company

13. In what way was he prevented from returning to his Command? Resurrender.

do you know? from information from Headquarters

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

15. Was applicant captured as a prisoner. as 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 May 1914 H. C. Insult Ordinary, Summit County.

Georgia Grinnett County.

I, J. B. Collier, Ordinary of said County, do certify that I am personally acquainted with Henry L. Smith, the witness who has been sworn to support the application of H. C. Insult, that he is a bona fide resident and citizen of said County, and that he is a bona fide freeholder and his statement made is entitled to full faith and credit.

Sworn to and subscribed before me, this the

day of May 1914

Ordinary

of Weldon County.

NAME Merritt, W. O. YEAR 1914 COUNTY Fulton.

WHEN AND WHERE BORN? Resident of Georgia about 25 years.

June

ENLISTED WHEN AND WHERE? /1892, Loudon, Tenn.

RANK: Witness states;- Lieut.

COMPANY AND REGIMENT? 3rd Georgia Battn. Inf.
in 1893 made into.

Regt. known as Company I, 65th Georgia Regt.

NAME OF CAPTAIN AND COLONEL? Henry L. Smith, Capt. Co. I. 65th Regt.

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? Command;- April 1895, Greensboro, North
Carolina.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Was on way home.
Left command on Comdys furlough about April 1895. War closed. Did
not return to command.
DIED, WHEN AND WHERE?

BURIED:

WITNESSES: Henry L. Smith,- Capt. Co I, 65 th Georgia Regt. No date.
ob Wm. M. Walters,- Same company.

Floyd Co Ga
July 15th 1865

Am. J. W. Lindsey
Atlanta Geo

My dear Sir

One W. C. Merritt of your
city, who was a Lieutenant
in one of the Companies of the 65th
Ca. Regt. to which I belonged
enlisted in the same compa-
ny. I was in, and was trans-
ferred to another company and
was elected a Lieutenant.
I cannot assure when or where
he enlisted, nor to any of the happen-
ings during the war, though I was
there all the time for three years
Yours truly
Jas M. Walters

Grafton

Geo M. Watters

P.S.

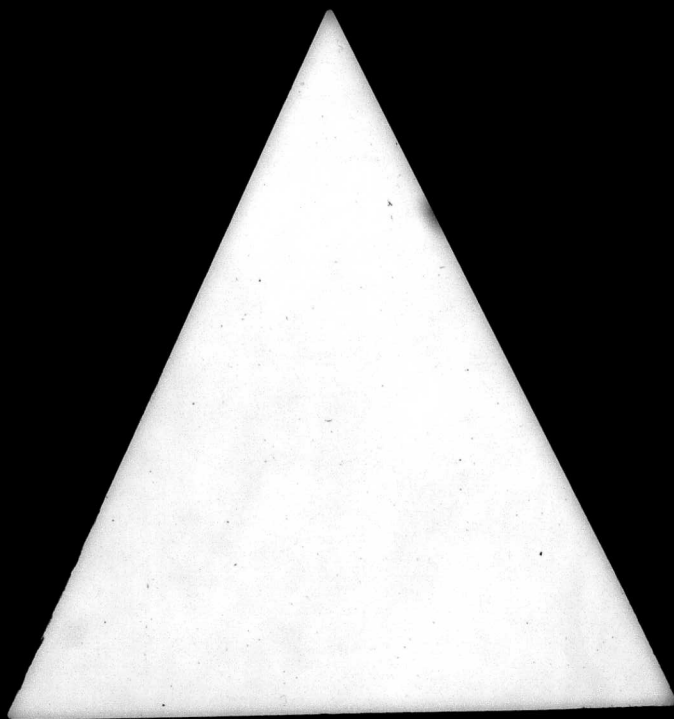
If Mr Merritt merits a pension
I am willing to do all I can
to help him.

I think we all ought to be
pensioned alike

Geo. M. Watters

Rome Co.

route 2



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

_____ day of _____ 1899.

Witness my hand and seal this _____ day of _____ 1899.

Executed in presence of _____ (L.S.)

Pension Office, 10/1/03.
Testimony taken out of this
not correctly executed
required by the laws of
Georgia, cannot be considered.
J.W. Lindsey
Com. of Pen.

Messers David
Fulton
Commiss. this for
Comp. No. 6717
So. Clarke Co. - 1905
INDIGENT PENSION
1903-1904

Name D. V. Messer
County Fulton
2-1-SC Cavalry
Approved 3/24/1904 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

REG. S. HARRISON, STATE PRINTER, ATLANTA.

9/10/03
1/22/03

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 _____.

Witness my hand and seal this _____ day of _____, 1899.

Executed in presence of _____ (L. S.)

Pension Office, 10/1/06.
Testimony taken out of this
document not correctly account-
ed for as required by the laws of
Georgia, and is not considered.
J. W. Lindsey,
Clerk of Pen.

Messersmith
Pension Office
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Name _____
County _____
Approved _____
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDED TO _____
9/11/03
1/27/03

Questions for Applicant.

STATE OF GEORGIA.

_____ County.

I, _____ of said State and County, desiring to avail himself of the Pension Act (Section 1264, Code), hereby submit his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office).
D. H. Messer State of Georgia Fulton County P.O. Smith St
2. How long and since when have you been a resident of this State?
Since the close of the war in 1865
3. When and where were you born? *in 1835 June 21 State of Ga. Athens Co*
4. When and where and in what company and regiment did you enlist or serve?
December 1st 1861 1st Georgia Cavalry Co. Company H 1st Regiment S.C. Cavalry
5. How long did you remain in such company and regiment?
until the close of the war 1865
6. For how long a period did you discharge regular military duty? *from 1861 to close 1865*
7. When, where and under what circumstances were you discharged from service?
discharged in 1865 by the surrender of General Lee
8. What is your present occupation?
nothing
9. How much can you earn (gross) per annum by your own exertions or labor?
nothing
10. What has been your occupation since 1865?
nothing
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? *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?
have been troubled with organic heart trouble since the war also have slight attacks of paralysis since the war
13. What property, effects or income do you possess, and its gross value?
none
14. What property, effects or income did you possess in 1866, 1867 and 1868, 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?
Banks County. none
16. How were you supported during the years 1867 and 1868?
from the products of my wife's farm
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 1867 and 1868? 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?
2 Daughters & 2 sons. Daily wages, no
20. Are you receiving any pension? If so, what amount, and for what disability?
no

Sworn to and subscribed before me this _____ day of _____, 1903.
_____ of _____ County.
Ordinary,
Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

D. H. Conner of said State and County, having been presented as a witness in support of the application of David H. Messer 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? D. H. Conner
State of Georgia, Fulton County, Faith, P.O.
2. Are you acquainted with David H. Messer the applicant; if so how long have you known him? yes, about twenty five years
3. Where does he reside, and how long and since when has he been a resident of this State?
Atlanta, Fulton County, Georgia, twenty five years
4. When, where and in what company and regiment did he enlist, and how do you know?
5. Were you a member of the same company and regiment? no
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?

7. What property, effects or income has the applicant? (Give your means of knowledge.)

None
having been a neighbor for twenty five years

8. What property, effects or income did the applicant possess in 1866, 1867 and 1868, 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?

yes to the best of my knowledge

10. What is the applicant's occupation and physical condition?

physical condition bad, when he could do anything would go to farm

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

he is unable because of his physical condition

12. How was he supported during the years 1867 and 1868?

mainly by his family

13. What portion of his support for these two years was derived from his own labor or income?

I 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?

having been appointed with the rebellion for a number of years, and that he has great physical ability

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

Sworn to and subscribed before me, this 1st day of Sept 1868.

John R. Wilkinson Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me H. B. Johnson M.D. and A. S. Tucker M.D., both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully D. H. Messer applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

This is to certify that we have carefully examined said party D. H. Messer and find his physical condition of such nature having paralysis of right side, also organic heart trouble and his sight impaired which disables him from labor of any kind.

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 1st day of Sept 1868.

John R. Wilkinson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John R. Wilkinson Ordinary in and for said County, hereby certify that the applicant D. H. Messer resides in said County, and has been a bona fide resident of this State since the 1st day of Sept 1868, and that the witnesses, viz: D. H. Conner

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 1867 15th day of Sept 1868, Dollars of property, and in 1868 15th day of Sept 1868, 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 Sept 1868.
John R. Wilkinson 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 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 also the execution of the proof, as above set out.

STATE OF GEORGIA.

Gulton COUNTY

I, D. M. Innes hereby authorize
Jessie Pettit of Atlanta, Ga
to receive and accept for the pension allowed, and request that the remit same to
me. at _____
by _____

WITNESS my hand and seal, this 16th day of Jan. 1906.

Executed in the presence of

Executed in the presence of
Luke Bradley, Asst.

Misses. J. H.
Fulton Co.,
COUN SECTION 1254.
(FOR THOSE ALREADY ENROLLED)
APR - 18 - 1905

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)
Fr - Clarke Co - 1905

No. 444

**INDIGENT
SOLDIER'S PEN
1906.**

Name D. D. Turner.
County Gulton.
Co. G. Regiment 1st S. C.

WARRANT ISSUED

117	1906
-----	------

JOHN W. LINDSEY.

History of Pension

WARRANT HANDED TO

CSA

The Franklin Printing and Publishing Co., 605 W. Madison St.

no date

Measur, D. H.
Fulton Co.

STATE OF GEORGIA.

— COUNTY.

I, _____, hereby authorize _____ of _____ to _____

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

Case Number 124.
(FOR THOSE ALREADY ENROLLED)

No. 44A

INDIGENT

**SOLDIER'S PENSION
1907.**

Name L. H. Tucker
County Fulton
Co. 4 Regiment 1st

WARRANT ISSUED

1/1

JOHN W. LINDSEY,

J. LINDBEL,
Commissioner of Pensions

WARRANT HANDED TO

Dr. V. J. Johnson, Jr., President, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Culton County.

Personally appears D. H. Messer of Culton

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 _____ 1866; that he is 71 years old and by occupation a none, that he enlisted in the military service of the Confederate States (or of the State of South Carolina) during the war between the States, and served for the term of 4 yrs in Company F, of 1st Regiment of S. C. Inf.; 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 Blacks County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this 16 day of Jan 1906.

John R. Wilkinson Ordinary.

State of Georgia,

Culton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with D. H. Messer the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1906.

John R. Wilkinson Ordinary. Culton 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,

Culton County.

Personally appears D. H. Messer 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 _____ 1865; that he is 72 years old and by occupation none, that he enlisted in the military service of the Confederate States (or of the State of S. C.) during the war between the States, and served for the term of 4 yrs in Company F, of 1th Regiment of S. C. Inf.; that his physical condition is as follows: Age & poverty

that his property consists of the following items: _____

of the value of none 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,

Culton County.

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

John R. Wilkinson Ordinary. Culton County.



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

State of North Carolina
Pickens County

To all whom it may concern
This is to certify that David
Messer was a Sargeant in Co
F. 1st Regiment U. S. Cavalry
mustered into Service about
1st December 1861 at Pickens
Co. F. U. S. served in the same
company and Regiment with him
to the end of the war

Personally came before
me W. P. Field whom I know
to be a reliable man and of
worth of belief and makes
oath that the above statement
is correct and true
Sworn to before me this
31 day of August 1893

J. B. Wetherby W. P. Field
J. P. P. C.

I do certify that J. A. Messer
of Co. F. 1st U. S. Cavalry was
suffering in 1864 from
yellow fever which was
long and severe attack and
was made by a visitable for service
for some 6 or 7 months
on acct. of which I recommended
an extension of furlow 2 or 3
times and a general de-
bility succeeded and he was
for some time disabled for
physical exertion

J. A. Johns M. D.

I hereby certify that Dr. J. A. Johns is
known to me to be a regular practicing
Physician and reputable and reliable
as a Physician and citizen

Given under my hand and seal
this May 2^d 1892

J. M. Holliman
Probate Judge
County of S. C.

J. B. Kewberry
J. P. P. C. D. P. Field

Oconee Co. S. C.

The State of South Carolina,
County of Oconee.

I, C. R. D. Burns, Clerk of the Court of Common Pleas and General Sessions, in and for the County and State aforesaid, (the same being a Court of Record), do hereby certify that J. A. Cook, Esq., is a duly appointed Notary Public in and for the said County and State, and that he was appointed on the 8 day of January 1894, and that his commission as such official expires on the 1st day of the November, 1900.

I further certify that he is duly enrolled as such officer in the book in my office, kept for that purpose, and also that I am acquainted with the signature of the said J. A. Cook.

and that I believe his signature to the instrument hereto attached to be genuine, and his acts as such officer entitled to full faith and credit; and, further, that under the laws of this State he is authorized to attest instruments for record, take acknowledgments and administer oaths.

Given under my hand and Official Seal of this Court, this the 9 day of April,
A. D. 1900.

C. R. D. Burns
C. C. P. and G. S., Oconee Co., S. C.

To all whom it May Concern
This is to Certify that Lovisa Annis
Nov. A. Sergeant in Co. F. 1st Regiment
S. C. Cavalry Mustered into service
about 1st December 1861 at Pickens
C. H. A. C. and that I served in the
same Co. & Regiment with him
to the close of the War.
R. A. Gilmer
personally appeared before me as orderly Sergeant
before me. R. A. Gilmer Co. F. 1st Regt. S. C. C.
and made oath that
the above statement
is correct.
R. A. Gilmer
J. A. Cook
Notary Public for S. C.
April the 8. 1903.

GEORGIA, Clarke County.

I, the undersigned, do certify that W. H. Mason

now of Milton Co. Ga. Pensioner of this county, is on the Pension roll and draws
a pension of Sixty (\$60.00) Dollars for 1904. The bearer is the same man
of A Company 11th Regiment, who enlisted on _____ day of _____
1861, and was discharged on the _____ day of _____ 1865, was granted a
pension \$ 60.00 for 1904 & was transferred from Milton Co. to Clarke Co. Ga.
in 1904

Proven by _____ as witnesses.

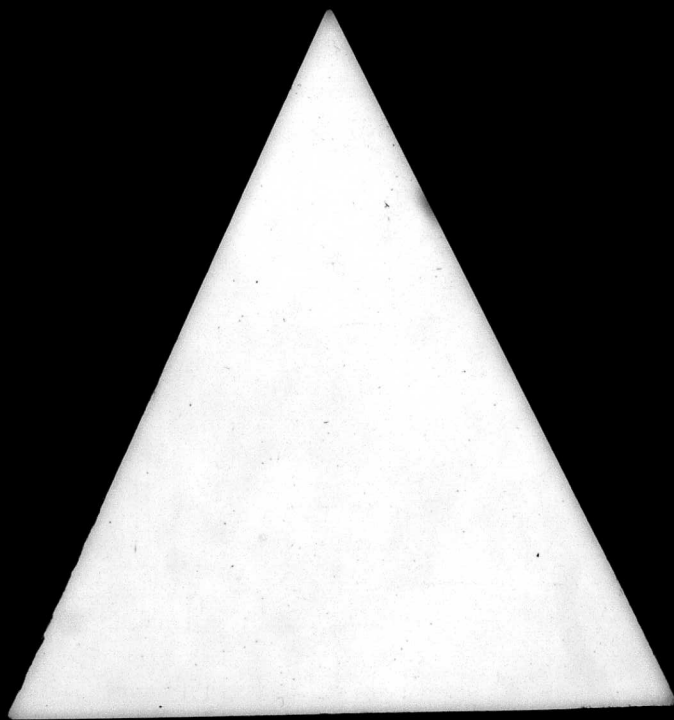
Given under my hand and official seal this

the 20th day of Dec 1904

J. B. Wingfield, Jr.

Ordinary's L. S.

(SRAL)



McHenry, John
Fullton Co
Feb 1911

No. _____

**Confederate
Soldier's Application.**

UNDER ACT 1910.

County Fullton
Name John F. Smith
Jefferson Smith

Approved _____

J. W. LINDSEY
Commissioner of Revenue

CHAS. R. BYRD, State Printer, ALBANY

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Sullivan County.

John F. Mathews of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office) John F. Mathews, Atlanta, Sullivan Co., Georgia
2. How long and since when have you been a continuous resident citizen of this State? Since Dec. 1, 1863, except from Dec. 1890 to Dec. 1894.
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes.
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) April Dec. 1, 1863, enlisted as a private in 1st Regt. Cavalry, 2nd Div. Army of the Confederate States, Va.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Until April 9, 1865.
6. When and where was your Company and Regiment surrendered or discharged from the Service? Approximately Bank House, Va. Apr. 9, 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.
9. Where was your Command when you left it? Approximately Bank House, Va.
10. When did you leave the Command? About Apr. 12th, 1865.
11. For what cause did you leave? Army surrendered.
12. By whose authority did you leave? A. A. Mumch, Commanding Gen. Cavalry, U.S.A.
13. For how long was your leave granted? In what way? Pay roll as a prisoner of war.
14. Why did you not return to your Command after leave expired?
15. In what way were you prevented?
16. What effort did you make to return?
17. Were you captured during the war? Yes.
18. If so, when, and where? In what prison were you held and when were you released? At Approximately Bank House, Va. Apr. 9, 1865 and payrolled about April 12, 1865.
19. 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.) About \$150.00 household goods. My wife owned an equity of \$500.00 in a house and lot situated at 44 Middle St. Atlanta.
20. 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.
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 its cash value? (Make itemized list) About \$150.00 household goods. \$10.00 office furniture. My wife owns an equity in a house and lot situated at 44 Middle St. Atlanta for amount \$500.00, value \$300.00. Balance purchase money due \$200.00.
22. What annual or monthly income or earnings of yourself and wife and the source derived have you? No income except my daily labor.
23. Are you drawing a pension of any amount from this State or the United States? None.
24. 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 10th day of Oct. 1912

John F. Mathews
of Sullivan County.

Soldier's Application.

UNDER ACT 1910.

Confederate

No.

Call. Dec 1911

Mathews John F.
Sullivan Co.

County Sullivan

Name John F. Mathews

Company 1st Regt. Cavalry

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. WYLLIE, State Printer, Atlanta.

2000

make it each question asked you and the evidence you have.

present at the surrender of the 9th 1865 and was expelled as
in presence of war.

13. In what way was he prevented from returning to his Command?

How do you know?

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

15. Was applicant captured as a prisoner? Yes If so, when and where? March 1865
at Appomattox Court House, Va. in the field How often released?
About April 11, 1865
 Sworn to and subscribed before me this 17 day of October 1910
L. A. Purdie

That I also know John F. Methvin who represents himself to be and resides in
 said County. That I also know John Black B. L. Denny who are freeholders, that
 they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and
 they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the
 Tax Returns of Trulston shows that John F. Methvin and wife
 value for tax is in 1908 \$ 175 for 1909 \$ 175 for 1910 \$ 175
John F. Methvin day of Oct 1910
John F. Methvin Ordinary
Trulston County.

ORDINARY'S CERTIFICATE.

State of Georgia, Coweta County:

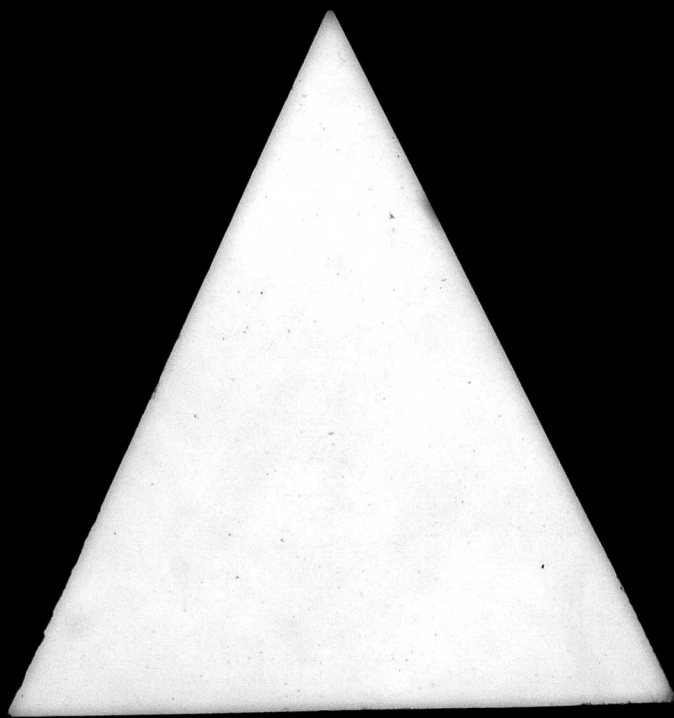
I, L. A. Purdie, Ordinary in
 and for said County, hereby certify that Thomas H. Methvin

sworn by me in support of the claim of John F. Methvin
in are of trustworthy character and that their statements are entitled to
 full faith and credit.

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

Witness my hand and seal of office, this 17
 day of October, 1910

L. A. Purdie
 Ordinary Coweta County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I,

being authorized

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

at

by

Witness my hand and seal, this

day of

190

[L.S.]

Executed in presence of

Pension office
10/16-1906
Is for arrears
of property of
of Enlisted man
not Indigent
McMills
Care of Penn

Newborn, Mc
Fulton No. 106-906
INDIGENT PENSION.
863 1906
Name ~~McMills~~
County ~~Fulton~~
Co. _____ Regt. _____
Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Franklin Printing and Publishing Co., Inc. W. Harrison, Manager
Atlanta, Georgia

McMills
9/25/06

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fullon

COUNTY.

I D. W. Allan of said State and County, having been presented as a witness in support of the application of M. C. Mumburn for pension under section 1254, 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? D. W. Allan
in Fullon County, State of Georgia
2. Are you acquainted with M. C. Mumburn, the applicant; if so how long have you known him? About twenty years
3. Where does he reside, and how long and since when has he been a resident of this State? Fullon Co. this State, to my knowledge for many years
4. When, where and in what company and regiment did he enlist, and how do you know?

5. Were you a member of the same company and regiment? No.
6. How long did he perform regular military duty? Do not know
7. When and where was his command surrendered? " "
8. Were you present when it surrendered? No.
9. Was applicant present? Do not know
10. If he was not present, where was he? Do not know
When did he leave his command? Do not know for what cause? Do not know
By what authority he left? Do not know How do you know all of this?
Do not know

11. What property, effects or income has the applicant? (Give your means of knowledge.) Fullon know
none being a near neighbor and in a poor
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? About \$1500 dollars worth, lost through sickness of self and family and income spent
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
He has conveyed money for
14. What is the applicant's occupation and physical condition? No occupation
physical condition bad
15. Is the applicant unable to support himself by labor of any sort; if so, why? By all age
and bad health

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? By doing some
work and on what little property he had
17. What portion of his support for these four years was derived from his own labor or income?
all

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. His health has been bad since I have
known only able to do light work
19. Who composes family? What property have they? Children's ages and their earning capacity?
Self wife and daughter 15 yrs old
none
20. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 20th day of Sept 1906
John R. Wren Ordinary.

Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fullon

COUNTY.

Personally came before me Geo. C. Trimble and John R. Wren, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully

M. C. Mumburn applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:
Old age, and general information
Caused from a long Reg. of dependency
and chronic indigestion in condition
him unable to make a support

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

Sworn to and subscribed before me, this the 20th day of Sept 1906
John R. Wren Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fullon

COUNTY.

I, John R. Wren Ordinary, in and for said County, hereby certify that the applicant M. C. Mumburn resides in said County, and has been a bona fide resident of this State since the 20th day of Sept 1896 and that the witnesses, viz. D. W. Allan

are of trustworthy character, and that their statements are entitled to full faith and credit.
I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.
I further certify that the tax digest of _____ County shows that applicant returned for taxation in his name in 1901 _____ Dollars of property, and in 1902 _____ Dollars of property; in 1903 _____ Dollars of property; in 1904 _____ Dollars of property; in 1905 _____ Dollars of property.

In my opinion the foregoing claim is _____ made in good faith.
Witness my hand and seal of office, this 20th day of Sept 1906
John R. Wren Ordinary.
of Fullon 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.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Gwinnett COUNTY.

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

1. What is your name and where do you reside? William C. Cole at Lawrenceville
2. Are you acquainted with W. C. Newberry, the applicant: if so how long have you known him? I am acquainted with him for 42 years
3. Where does he reside, and how long and since when has he been a resident of this State? In Fulton County for 42 years to the best of my knowledge
4. When, where and in what company and regiment did he enlist, and how do you know? He enlisted in Co. I 63rd Regt. I was there with him
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? until July 1864
7. When and where was his command surrendered? in April 1865 in N.C.

8. Were you present when it surrendered? I was not
9. Was applicant present? He was not
10. If he was not present, where was he? He was wounded and sent to the hospital
When did he leave his command? in July 1864 For what cause? He was wounded
By what authority he left? Sent to the hospital How do you know all of this?
I was there with him

11. What property, effects or income has the applicant? (Give your means of knowledge.)
12. What property, effects or income did the applicant possess in 1904, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort; if so, why?
16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905?
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code
19. Who composes family? What property have they? Children's ages and their earning capacity?
20. What interest have you in the recovery of a pension by this applicant? I have no interest

Sworn to and subscribed before me, this the 14 day of Sept 1906
John P. Webb Ordinary. W. C. Cole Witness.

Handwritten note: I am 50 years old, single, no family, do hereby certify that W. C. Cole is a resident of this County. That he is a man of good character and that he is entitled to full pay and bounty for his services in the late war. I am a member of the same company and regiment as he was.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

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

at _____ by _____

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

Executed in presence of _____ [L. 8.]

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Fullon COUNTY

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

1. What is your name and where do you reside? (Give State, County and Postoffice.)
Martin C. Newborn Fullon County East Point Georgia
2. How long and since when have you been a resident of this State? All my life
1844 Lakota
3. When and where were you born? East Point County Georgia December 1844
Dec. 1844
4. When and where and in what company and regiment did you enlist or serve? Dec. 1861
Regt. Quinette Company 1st Ga. Infy 1861
5. How long did you remain in such company and regiment? Until the end of the war.
April 1865
6. When and where was your company and regiment surrendered and discharged? Bentonville
N.C. April 1865
7. Were you present with your company and regiment when it was surrendered? It 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 wounded and sent to the hospital, Atlanta Ga.
by the regimental surgeon
9. How much can you earn (gross) per annum by your own exertions or labor? nothing
10. What has been your occupation since 1865? Idleness
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, 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 infirmary and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight. seven years.
13. What property, real and personal, or income, do you possess, and its gross value? nothing
14. What property, real or personal, did you possess in 1801, 1802, 1803, 1804, 1805, 1806 and 1807, and what disposition, if any, by sale or gift, have you made of same? none \$1500 to \$1500, or
more used it for my support
15. In what County did you reside during those years, and what property did you then return for taxation?
In Fullon County Georgia \$1500 to \$1500
16. How were you supported during the years 1801, 1802, 1803, 1804, 1805, 1806 and 1807?
by what I had accumulated
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 don't know. I consumed all I had
18. What was your employment during 1801, 1802, 1803, 1804, 1805, 1806 and 1807? What pay did you receive in each year? I was not employed
19. Have you a family? If so, who composes such family? Give their means of support. Have they a home, steed, or other property? Their ages and how employed? my family consists of
one son and daughter, no wife or daughter
17. daughter living for invalid mother.
20. Are you receiving any pension? If so, what amount and for what disability? no
21. Have you ever made an application for pension before? yes, two years ago, 1906.
22. How many applications have you ever made and under what ones? one, under and
under name
of John C. Newborn
John C. Newborn
Fullon County.

Every Question MUST Be Answered.

Newborn, Martin C.

863 Fullon Co

No. _____
Cal. Jan. 1907

INDIGENT PENSION.

190

Mr. C. Newborn

County Fullon

Regt. _____

Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will note name of Applicant, Company and Regiment on back or indorsed thereon.

Chas. W. Beckwith, State Printer, Atlanta, Ga.

863/26

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Gwinnett COUNTY.

William C. Galt of said State and County, having been presented as a witness in support of the application of Martin C. Newborn for pension under section 1254, 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? William C. Galt
Lanhamville, Georgia
2. Are you acquainted with Martin C. Newborn, the applicant; if so, how long have you known him? Since 1860
3. Where does he reside, and how long and since when has he been a resident of this State? in Fulton County, resident of Atlanta all his life
4. When, where and in what company and regiment did he enlist, and how do you know? Co. I 63rd Ga. Regt in Sumner's Army
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? From July 1862 to Sept of 1864
7. When and where was his command surrendered? Bentonville, N.C.

8. Were you present when it surrendered? No
9. Was applicant present? No
10. If he was not present, where was he? He was wounded - sent off
When did he leave his command? The fall of 1864 For what cause? Wounded
By what authority he left? Sent off by Regimental Surgeon How do you know all of this?
I was there in same company

11. What property, effects or income has the applicant? (Give your means of knowledge.) I don't know
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 don't know
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I don't know
14. What is the applicant's occupation and physical condition? I don't say
15. Is the applicant unable to support himself by labor of any sort; if so, why? I don't know
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? I don't know
17. What portion of his support for these four years was derived from his own labor or income? I don't know
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. I don't say
19. Who owns property? What property have they? Children's ages and their earning capacity? I 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 the 10th day of Sept, 1908
John P. White Ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA

Fulton COUNTY.

Personally came before me Dr. Geo. C. Trimble and Dr. J. H. Williams, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Martin C. Newborn applicant for pension under Section 1254, Code, and after such personal examination say that his present physical condition is as follows:
He is suffering from an old army wound in his right shoulder from a ball wound, kidney trouble, and also from rheumatism and general infirmities.

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

Subscribed and sworn to before me, this the 10th day of Sept, 1908
John P. White Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John P. White Ordinary, in and for said County, hereby certify that the applicant, Martin C. Newborn resides in said County, and has been a bona fide resident of this State since the 10th day of Sept, 1898 and that the witnesses, viz., Dr. Geo. C. Trimble and Dr. J. H. Williams 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 applicants 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 _____ made in good faith.

Witness my hand and seal this the 10th day of Sept, 1908
John P. White Ordinary
Fulton County.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses to the following words: "You shall give answers made to each of the questions asked of you, and the witnesses you shall give will be the whole truth, so help you God."
2. A full and complete statement may be taken of each person who has knowledge.
3. In every case the Ordinary must certify to the substance of the witness, and as to the reputation of the proof as above set out.

I John P. White Ordinary of Gwinnett County, Ga. do certify that the facts stated in the foregoing questions and answers are true to the best of my knowledge and belief.

I John
do certify
that

20. What interest have you in the recovery of a pension by this applicant? John C. Allen
Sworn to and subscribed before me, this 18th day of Sept 1906
John C. Allen Ordinary

John C. Allen
Ordinary

County.
1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses to the following
oath: "I do not know any more to 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 questions may be asked if such answer was insufficient.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof
as above set out.

Ordinary	18	17	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1
11	He has no property or income My means of knowing this is I am a near neighbor																	
12	He had a small means do not know what I suppose he used it for his support																	
13	Sells our town lot for \$1000 to Mr J.W. Bell																	
14	He has no occupation Unable to do any manual labor																	
15	Yes: Because of old age and infirmity																	
16	He lived on what he had accumulated																	
17	He had no income nor was he able to do any manual labor																	
18	Applicant is unable to do manual labor on account of old age and infirmity and from being wounded in service of																	
19	Wife and daughter They have no property They have none																	
20	None whatever																	
J. W. Allan D																		
Sworn to and subscribed before me this 18th day of <u>Sept</u> 190 <u>6</u> <u>John C. Allen</u> Ordinary																		

NAME *Martin C* ~~Marbarn, M.C. (Martin)~~ YEAR 1909 COUNTY Fulton

WHEN AND WHERE BORN? Dec. 1944, Elbert County, Georgia.

ENLISTED WHEN AND WHERE? Feb. 1963, Gwinnett County, Georgia.

RANK.

COMPANY AND REGIMENT? Co. I, 68rd. Ga. Regt.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Suffering from an old Army wound in his right shoulder.
Sent to the Hospital, Atlanta, Georgia.
Witness states: Left Command fall of 1964.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? April 1965, Bentonville, North Carolina.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? in hospital, Atlanta, Ga.

DIED, WHEN AND WHERE?

BURIED,

WITNESSES. William G. Cole, - Same Command- No data.

MB.

BURTED,

WITNESSES. William C. Cole, - Same Command-

No data.

Mr.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____, hereby authorize _____

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

transmit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____, 1901.

Executed in presence of

Ordinary,

County, }

L. S.



Meyer, Mary Ann
Fulton County

No. _____

**WIDOW'S
Indigent Pension.
1901.**

Name *Mrs Ma Meyer*

County *Fulton*

Widow of *Henry Meyer*
Co. J. Whitehead Battalion

Approved _____ 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO _____

_____ 1901.

(John W. Harrison, State Printer, Atlanta, Ga.)

96-1901

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,

Fullon

County.

Mrs. M. A. Meyer 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 Dec. 1900, hereby submits her proof, 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.)
Mrs. Mary Ann Meyer 157 Mangum St. Atlanta, Ga.
2. How long and since when have you been a resident of this State?
For my two years since 1899
3. When and where were you born?
Dec 10th 1832
4. When and where was your husband born—state his full name, and when were you and he married?
Henry Meyer was born _____, _____, Germany, Jan. 24 1822, married Aug 15 1850
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States?
Company 1st of 1863
6. How long did your husband serve in said Company and Regiment?
Aug 1st 1863
7. When and where did your husband's Company and Regiment surrender and was discharged?
April 1st 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, and by what authority?
At home in Berlin, Prussia, on a furlough 3 days before
10. When and where did your husband die?
Sept 2nd 1898, No 68
11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmary and Pyromy, or Third—Blindness and Poverty?
Infirmary and Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight?
Disabled in right arm since 1899
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 year 1899-1900, and what disposition, if any, by sale or gift, have you made of the same?
None
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Fullon, None
18. How have you been supported since death of husband, and especially for 1899 and 1900?
By my children
19. How much did you support each for each of those years, and how much did you contribute by your own labor or income?
I don't know the cost, I contributed nothing
20. What was your employment during 1899 and 1900—how much did you receive for each year?
I was not employed 1899
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property?
No sons one daughter, they have no property
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?
This is my first

Sworn to and subscribed before me this _____ day of _____ 1901

John W. Lindsey, Ordinary,
of Fullon County.

Mrs. Mary Ann Meyer
Widow of Henry Meyer
of Fullon County

No. 04

WIDOW'S
Indigent Pension.
1901.

Name Mrs. M. A. Meyer
County Fullon
Widow of Henry Meyer
of Fullon County

Approved _____ 1901
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

1901

Questions for Witnesses.

STATE OF GEORGIA,

Fulton County.

Ed Muller & Doretha Krue of said State and County, having been presented as a witness in support of the Application of Mrs. MA Meyer for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Doretha Krue Atlanta Ga
2. Are you acquainted with the applicant, Mrs. MA Meyer? Yes
If so, how long have you known her? since 1888
3. Where does she reside, and how long and since when has she been a resident of this State? Atlanta Ga since 1889
4. When and where was she born? Pickens District South Carolina
5. Were you ever acquainted with her husband? since 1868
6. Where did he reside in 1861? Berlin Randolph County Ga
7. When and to whom was he married? Martha C Smith
8. When and where was he born? Hannover Germany
9. How long have you known him? 32 years
10. When and where did MA Meyer enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this? enlist in the first 1863 Co F White Head DS
11. Were you a member of the same Company and Regiment? No
12. How long did he perform regular military duty? from Aug 1862 to the end of war
13. When and where was his Company and Regiment surrendered and discharged from service? Atlanta Ga in 1865
14. Were you with the command when it surrendered? No
15. Was MA Meyer the husband of applicant present? No at home in Fulton the husband of applicant present
16. If not present, where was he? Went home 3 days before surrender
17. When and did he leave his Command? at Atlanta Ga
For what cause? Sickness of wife Mary Meyer
By whose authority he left? On a furlough
How do you know all this? (State fully and clearly.) I Doretha Krue know his
company and know this to be true
18. When and where did MA Meyer die? Sept 2, 1898 at No 58 Nelson St
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? Atlanta Ga since 1889
20. Do you of your own knowledge know that applicant is the lawful widow of MA Meyer? Yes, she is the lawful wife
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 not sure
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? none with her
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? none with her
25. What is applicant's physical condition and her chances and ability to earn a support? Is in poor health can not work

26. Is applicant able to earn a support at labor of any sort, if not why? none with her can not work

27. How was she supported for 1899 and 1900? Money by the 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? is in bad health is infirm and crippled in course

30. What interest have you in the recovery of this pension by the applicant? None

Sworn to and subscribed before me this 2nd

day of June 1901
John W. Whitson Ordinary,
Fulton County.

Ed Muller
Doretha Krue
Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

Fulton County.

Personally before me comes MA Meyer and MA Meyer both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. MA Meyer applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this MA Meyer has not the use of right hand and arm - cannot do a full, at which time she was broken, she is now unable to do any work - is in need of help for her support - and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 2

day of June 1901
John W. Whitson Ordinary,
Fulton County.

MA Meyer MA Meyer

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, John W. Whitson Ordinary in and for said county, hereby certify that the applicant, Mrs. MA Meyer resides in said county, and has been a bona fide resident of this State since 1889 day of June, and that the witnesses, Mr. Ed Muller & Doretha Krue 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 0 dollars worth of property, and in 1900 0 dollars worth of property.

Witness my hand and official seal, this 2nd day of June 1901
John W. Whitson 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; so help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,

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 _____

Mayer M.A. (mo)
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. 166

INDIGENT
WIDOW'S PENSION
FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO

M.A. Mayer

Fulton.

County.

Widow of *Henry C. Mayer*
Co. *F. G. H. H. H.*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1904.

AND HANDED TO

444

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 _____ 1902.

[L. S.]

Executed in presence of _____

Mayer Mary A.
Fulton Co.
To Those Heretofore Paid.

1902.

No. 1261

INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1902.

PAID TO

Mrs. Mary A. Mayer

Fulton.

County.

Widow of *Henry Mayer*
Co. *2nd* Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902.

AND HANDED TO

444

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of **Fulton.**

PERSONALLY COMES MRS.

*Mary A Meyer*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 1859. That she is the Widow of*Henry Meyer* who was a soldier in Company *F* of the *Whitehead Batt.* Regiment of *Gen. H. H. H.*Volunteers, that he enlisted in said regiment on or about the month of *Aug.*1863, and served in the Army up to *Apr* 1865. That he diedon the *2nd* day of *Sept* 1898.*L & 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 1859.

I have been allowed an Indigent pension as a resident of **Fulton.** County, under Act 1900, for the year 1908, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 17th day of Jan 22 1904 1904. *M. A. Meyer*
John R. Wickinson Ordinary. Post Office.

State of Georgia,

Fulton.

County.

I, *John R. Wickinson*,

Ordinary of said County, certify that I am well acquainted with Mrs. *Mary A Meyer*, 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 the 17th day of Jan 22 1904 1904.



John R. Wickinson
 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.

*Mary A Meyer*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 1859. That she is the Widow of*Henry Meyer* who was a soldier in Company *A* of the *Whitehead Battalion* Regiment of *Gen. H. H. H.*Volunteers, that he enlisted in said regiment on or about the month of *August*1863, and served in the Army up to *Summer* 1865. That he diedon the *2nd* day of *Sept* 1898.*Infirmary & 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 1859.

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 17th day of March, 1902. *M. A. Meyer*
John R. Wickinson Ordinary. Post Office.

State of Georgia,

Fulton.

County.

I, *John R. Wickinson*,

Ordinary of said County, certify that I am well acquainted with Mrs. *Mary A Meyer*, 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 1859 day of 18.

Given under my official signature and seal, this the 17th day of March, 1902.



John R. Wickinson
 Ordinary of **Fulton.** County

NOTE.—All blanks must be filled.
 Vouchers and affidavits must bear date after January 1st, 1902.

Fulton, County. Ordinary of said County, certify that I am well acquainted with Mrs. Mary A. Meyer 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 89

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



John R. Wilkinson
Ordinary of Fulton County

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

Fulton, County. Ordinary of said County, certify that I am well acquainted with Mrs. Mary A. Meyer 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 89

Given under my official signature and seal, this the 12th day of March 1902



John R. Wilkinson
Ordinary of Fulton County

NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1902.

POWER OF ATTORNEY.

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____.

Executed in the presence of us: _____ [L. s.]

DIRECTIONS.

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



Michael, Susan C.
Fulton, County

1891.

No. 3898

Widows' Pension

— PAID TO —

Mrs Susan C. Michael

— OF —
Fulton

COUNTY.

\$100.00.

Warrant Issued

189

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 _____

me at _____, and oblige _____



AND HANDED TO

189

Warrant Issued

\$100.00.

Charlton COUNTY.

Mrs. Susan E. Michael

Widow's Pension

No. 3898

1891.

Michael, Susan E. Widow, County

Affidavit to be Made by the Widow.

Form No. .

STATE OF GEORGIA,

County of _____

In person came before me, the undersigned Ordinary

In and for the County of _____

Mrs. Susan E. Michael

, who being sworn according to law, says under oath that she is the widow of Thomas Michael, who was a soldier in the service of the Confederate States, and served as a member of Company "C", of the

11th Regiment of Georgia Volunteers; that he enlisted in said service on or about the 11th day of March 1863, and was in the

Confederate Army up to July 2, 1863. That while in the Army, he was on the 2nd day of July 1863 (See Note No. 1)

fatally wounded in the battle of Gettysburg, Pennsylvania and died on the field.

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 26th day of December 1861; and that she has resided in Georgia continuously since the 10th day of Sept 1861; 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 hereby tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this,

23rd day of August 1891.

W. L. Bachman Ordinary.

Post-Office

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. 2.

State of Georgia,

County of

in person came before me, the undersigned Ordinary in and for said County, witnesses *John M. Anderson* *C. A. Shepherd* *Geo. H. Brooks* *Geo. H. Nellyn* (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. *Susan E. Michael*, of the County of *Fullton*, State of Georgia, is the widow of *Thomas W. Michael*, who was a soldier in Company *C* of the *9th* Regiment of *Georgia* Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the *11th* day of *March* 186*3*. That while in said service, or by reason of said service in the Army, he lost his life as follows:

That he was mortally wounded at the battle of Gettysburg and died at the Hospital. He was shot through the body, the ball entering above the left nipple and passing down under the shoulder blade, he died about the 22nd or 23rd of July 1863 of said wound. Geo. H. Nellyn says he was Captain of the company; does not remember seeing the same soldier after he was shot; but was present in said battle & knows that he was mortally wounded & died as stated.

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

in the same company with him, were in the same battle and saw him after he was wounded.

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

Sworn to and subscribed before me, this, the

9th day of *Nov* 1891.

W. B. Loach Ordinary.

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

Sworn to & subscribed as to Geo. H. Nellyn before me this 15th Dec 1891.

W. B. Loach Ordinary.

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

Form No. 3.

State of Georgia,

County of *Fullton*

I, *W. B. Loach* Ordinary

in and for said County of *Fullton*

State of Georgia, hereby certify that I am acquainted with Mrs. *Susan E. Michael* 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 31, 1890, and has not lived out of the State since that date. I also certify that the witness *Geo. H. Nellyn* whose testimony she presents to sustain her claim is 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 witness 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 *Dec* 1891.

{ SEAL }

W. B. Loach 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. Ex. 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 Fulton, State of Georgia, hereby certify that I am acquainted with Mrs. Susan W. Michael the applicant for a pension in this case, and know, from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1850, and has not lived out of the State since that date. That she is the widow of Thomas Michael 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.

(Seal)

W. 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

Michael Susan E.
Fulton County

FOR THOSE HERETOFORE PAID.

1894.

No. 1571.

WIDOW'S' PENSION,

for year ending February 15th, 1894.

—PAID TO—
Susan W. Michael

—OF—
Fulton County.

WARRANT ISSUED
2/1
AND PAID TO
Applicant
1894.

Given by Returning Officer, Fulton County, Georgia.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally comes Mrs.

County of

Fulton

Susan R. Michael

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 10th 1840 That she is the Widow of

Thomas Michael

who was a Soldier in Company

C

of the

9th

Regiment of

Georgia

Volunteers, that he enlisted in said Regiment on or about the month of 11th March

1863 and served in the Army up to July 2nd 1863 That he lost his

life on the 2nd day of July 1863 (State here

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

Mortally wounded in the battle of Gettysburg Va and died on the
field

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 1861; 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. Bachman

Ordinary.

Post-office

Mrs Susan R. Michael

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. Susan E. Michael 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 Thomas Michael 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,

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 _____ 1893.

Executed in the presence of us:

[L.S.]

DIRECTIONS.

Send amount by _____ to me at _____ and oblige _____

Michael, Susan E.
Fulton, County
FOR THOSE HERETOFORE PAID.
1893.
210. 4461
Widow's Pension,
for year ending February 15th, 1893.
—PAID TO—
Mrs. Susan E. Michael
—OF—
FULTON COUNTY.
Warrant Issued
3/1/1893
AND HANDED TO
Applicant
Geo. W. Harrison, State Printer, Atlanta.

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. Susan E. Michael 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 Thomas Michael deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 1st day of Feb'y 1894.

W. 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 _____ 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.

Executed in the presence of us:

[L.S.]

DIRECTIONS.

Send amount by _____ to me at _____ and oblige _____

Michael, Susan E.
Fulton, County
FOR THOSE HERETOFORE PAID.
1895.
No. 575
WIDOW'S PENSION,
for year ending February 15th, 1895.
—PAID TO—
Mrs. Susan E. Michael
—OF—
Fulton County.
Widow of Thomas Michael
WARRANT ISSUED
Feb'y 1, 1895.
AND HANDED TO
Applicant
Geo. W. Harrison, State Printer, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally comes Mrs.

Susan E. Michael

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 10th 1840 That she is the Widow of

Thomas Michael

who was a Soldier in Company

16 of the

9th

Regiment of

Georgia

Volunteers, that he enlisted in said Regiment on or about the month of 11th March1863 and served in the Army up to July 2nd 1863 That he lost hislife on the 2nd day of July 1863 (State here

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

Mortally wounded in the battle of
Gettysburg Va and died on the
field

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 1861; 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. Adamson Ordinary.

Post-office Atlanta Ga

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally comes Mrs.

Susan E. Michael

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 10th 1840 That she is the Widow of

Thomas Michael

16th

who was a Soldier in Company

16

of the

9th

Regiment of

Georgia

Volunteers, that he enlisted in said Regiment on or about the month of 11th March1863 and served in the Army up to July 2nd 1863 That he lost hislife on the 2nd day of July 1863 (State here

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

Mortally wounded in the battle of Gettysburg Va and died on the field

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 1861, 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.

M. L. Adamson Ordinary.

Post-office

Atlanta Ga

James Adams

Ordinary

Post-office

Atlanta Ga

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

Form No. 3.

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.

Susan E. Michael

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 Thomas Michael 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 5th day of Feb'y 1896.

{SEAL} W. L. Calhoun Ordinary.

Form No. 4.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

I, hereby authorize

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

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

[L. S.]

Executed in the presence of

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

Form No. 3.

STATE OF GEORGIA, County of Fulton

I, M. H. Hulsey Ordinary in and for said County of

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

Susan E. Michael

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 Thomas Michael 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 15th day of May 1897.

{SEAL} M. H. Hulsey Ordinary.

Form No. 4.

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 1897.

[L. S.]

Executed in the presence of

No. 1106

1897.

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Susan E. Michael

OF

Fulton County.

Widow of Thomas Michael

RICHARD JOHNSON,

Clerk of Probate.

WARRANT ISSUED

211 1897.

AND HANDED TO

Michael Susan E.

Fulton County

FOR THOSE HEREIN PAID

1896.

No. 7331

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Susan E. Michael

OF

Fulton County.

Widow of Thomas Michael

WARRANT ISSUED

211 1896.

AND HANDED TO

Michael Susan E.

Fulton County

FOR THOSE HEREIN PAID

For Widows Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

Susan E. Michael

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 10th 1860. That she is the Widow of Thomas Michael who was a Soldier in Company 9th of the 9th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of 11th March 1862 and served in the Army up to July 2nd 1862. That he lost his life on the 2nd day of July 1862. (State here full particulars of the husband's death, when, where and from what cause.) (Mortally wounded in the battle of Gettysburg Pa and died on the field)

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 1861, 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 May 1896.
W. L. Roalson, Ordinary.

Susan E. Michael
Post-office

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

Susan E. Michael

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 10th 1860. That she is the Widow of Thomas Michael who was a Soldier in Company 9th of the 9th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of 11th March 1862 and served in the Army up to July 2nd 1862. That he lost his life on the 2nd day of July 1862. (State here full particulars of the husband's death, when, where and from what cause.) (Mortally wounded in the battle of Gettysburg Pa. and died on the field.)

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 1861, 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, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this 1st day of May 1897.
W. L. Roalson, Ordinary.

Susan E. Michael
Post-office

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 _____

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 _____ 1898.

[L. S.]

Executed in presence of _____

Michael, Susan E.
Fulton County.
For These Heretofore Paid

1898.

NO. 2162

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO
McSweeney, M. Chad

of
Fulton County
Widow of *Chas. Mitchell*

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

7/2 1898.

AND HANDED TO

appt

Geo. W. JOHNSON, STATE PRINTER, ATLANTA

Michael, Susan E.
Fulton C.
For These Heretofore Paid.

1899.

NO. 846

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO
Mrs. E. M. Hall

of
FULTON County

Widow of *Thomas*

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

2/1 1899.

AND HANDED TO

appt

Geo. W. JOHNSON, STATE PRINTER, ATLANTA

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

Susan E. Mitchell

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 2nd Feb 1861 1861 That she is the Widow of
Thomas Mitchell who was a Soldier in Company
of the 9th Regiment of Georgia

Volunteers, that he enlisted in said regiment on or about the month of
1862 and served in the Army up to July 2nd 1863 That he lost his
life on the 2nd day of July 1863 (State here
full particulars of the husband's death, when, where and from what cause.)

Mortally wounded in battle of
Gettysburg, Pa. and died on the
field

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

I have been allowed a pension as a resident of 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. Hulse Post-Office Susan E. Mitchell

State of Georgia,

Fulton County.

M. Hulse Ordinary of said County, certify that I am well acquainted
with Mrs. Susan E. Mitchell who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the 23rd day of Dec 1890

Given under my official signature and seal this the 2 day of Feb 1898.

Official
Seal.

Ordinary of Fulton County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally Comes Mrs.

Susan E. Mitchell

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 April 10th 1870 That she is the Widow of
Thomas Mitchell who was a soldier in Company
of the 9th Regiment of Georgia

Volunteers, that he enlisted in said regiment on or about the month of
1862 and served in the Army up to July 2nd 1863 That he lost his
life on the 2nd day of July 1863 (State here
full particulars of the husband's death, when, where and from what cause.)

Mortally wounded in battle of
Gettysburg - died on battlefield

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

I have been allowed a pension as a resident of 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
day of Feb 1899.
M. Hulse Post-Office Mrs S. E. Mitchell

State of Georgia,

FULTON County.

I. W. H. HULSEY,

M. Hulse Ordinary of said County, certify that I am well acquainted
with Mrs. Susan E. Mitchell who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the 23rd day of Dec 1890

Given under my official signature and seal this the 1 day of July 1899.

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 _____, 1900.

[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 _____, 1901.

[L. S.]

Executed in presence of

*Michael Lusan E.,
Fulton County
To These Herebefore Paid*

1900.

NO. 992

WIDOW'S PENSION,

For year ending February 16th, 1900.

PAID TO

Mrs. E. Michael

or

Fulton County,

Widow of

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 14 1900,

AND HANDLED TO

Wife

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

*Michael Lusan E.,
Fulton County*

To These Herebefore Paid.

1901.

No. 167

WIDOW'S PENSION,

For year ending February 16th, 1901.

PAID TO

Mrs. Susan E. Michael

Fulton County

Widow of *Thomas Michael*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Jan 17 1901,

AND HANDLED TO

Wife

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

STATE OF GEORGIA

FOR WIDOWS HEREbefore Allowed Pensions

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

Susan E. Michel

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 10th 1840. That she is the Widow of Thomas Michel who was a soldier in Company C of the 9th Regiment of Georgia

Volunteers, that he enlisted in said regiment on or about the month of July 1862 and served in the Army up to July 2nd 1863. That he lost his life on the 2nd day of July 1863 (State here particulars of the husband's death, when, where and from what cause)

Mortally wounded in battle of Gettysburg; died on battle field.

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

I have been allowed a pension as a resident of 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 14 day of Feb, 1900.

M. H. Halvey Ordinary

Susan E. Michel
Post Office Atlanta

State of Georgia,

Fulton County.

M. H. Halvey
Ordinary of said County, certify that I am well acquainted

with Mrs. Susan E. Michel, 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 23 day of Dec 1890

Given under my official signature and seal, this 14 day of Feb, 1900.

Official
Seal.

M. H. Halvey
Ordinary of Fulton County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

Susan E. Michel

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 10th 1840. That she is the Widow of Thomas Michel who was a soldier in Company C of the 9th Regiment of Georgia

Volunteers, that he enlisted in said regiment on or about the month of July 1862 and served in the Army up to July 2nd 1863. That he lost his life on the 2nd day of July 1863 (State here particulars of the husband's death, when, where and from what cause)

Mortally wounded in battle of Gettysburg; died on battle field

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

I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1900, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 15 day of Jan, 1901.

John R. Wilkinson Ordinary

Mrs Susan Michel
Post Office Atlanta

State of Georgia,

Fulton County.

John R. Wilkinson
Ordinary of said County, certify that I am well acquainted

with Mrs. Susan E. Michel, 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 23 day of Dec 1890

Given under my official signature and seal, this 15 day of Jan, 1901.

Official
Seal.

John R. Wilkinson
Ordinary of Fulton County.

STATE OF GEORGIA

ГОМЕК ОЕ ВЛОКМЕА

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 presence of _____

Michael, Susan E.
Fulton Co.

To Those Hereofore Paid.

1902.

No. 102

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Susan E. Michael

OF

Fulton, County,

Widow of *J. Michael*

Co. _____ Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDLED TO

[Signature]

W. W. LINDSEY, STATE PRINTER, ATLANTA, GA.

Michael, Susan E.
Michael, Fulton Co.

To Those Hereofore Paid.

1903.

No. 7

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Susan E. Michael

OF

Fulton, County,

Widow of *J.*

Co. *C.* Regiment *24th*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1903.

AND HANDLED TO

[Signature]

W. W. LINDSEY, STATE PRINTER, ATLANTA, GA.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of **Fulton**.

PERSONALLY COMES MRS.

*Susan E. Michael*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

J. Michael

who was a soldier in Company

6 of the*9th*

Regiment of

Ga

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

1840, and served in the Army up to*July 2nd**1863*. That he lost his

life on the

*2nd*day of *July*, 18 *63*. (State here

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

*Died on battle field at Gettysburg*Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year *1861*.I have been paid a pension as a resident of **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 day of *JAN 13 1902**John P. Wilkinson* Ordinary.Post-Office *211 E. Fair St. Atlanta Ga*

State of Georgia,

Fulton County.Ordinary of said County, certify that I am well acquainted with Mrs. *Susan E. Michael*, who made the above affidavit and

am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the

day of *Dec*, 18 *90*Given under my official signature and seal, this the day of *JAN 13 1902*

(Official Seal.)

John P. Wilkinson Ordinary of **Fulton** County.

NOTE.—All blank spaces must be filled.

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of **Fulton**.

PERSONALLY COMES MRS.

*Susan E. Michael***Fulton**, State of Georgia, and that she has RESIDED in said State

continuously ever since

1840

That she is the Widow of

J. Michael

who was a soldier in Company

6 of the*9th*

Regiment of

Ga

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

1840, and served in the Army up to*2nd July**1863*. That he lost his

life on the

*2nd*day of *July*, 18 *63*. (State here

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

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

I have been paid a pension as a resident of _____ 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**John P. Wilkinson* Ordinary.

Post-Office _____

State of Georgia,

Fulton County.I, *John P. Wilkinson*, Ordinary of said County, certify that I am wellacquainted with Mrs. *Susan E. Michael*, 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 the day of *JAN 22 1903* 1903.

(Official Seal.)

John P. Wilkinson Ordinary of _____ 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 _____ 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

*Michael Susan E.
Fulton County*
TO THOSE HERETOFORE PAID.

1904.

No. 54

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. Susan E. Michael

OF
Fulton. County.

Widow of

Co. C. Regiment 9th Ga

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/22 1904.

AND HANDED TO

aff

Geo. W. Harrison, State Printer, Atlanta.

*Michael Susan E.
Fulton County*
TO THOSE HERETOFORE PAID.

1905.

No. 15

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. Susan E. Michael

OF

Fulton. County.

*Widow of John Michael
Co. C. Regiment 9th Ga*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1/20 1905.

AND HANDED TO

aff

Geo. W. Harrison, State Printer, Atlanta.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1.

STATE OF GEORGIA,

County of Fulton,

PERSONALLY COMES Mrs.

Susan E. Mitchell

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 1848.

T. Michael

That she is the Widow of

who was a soldier in Company

of the 9th

Regiment of GA

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

1862, and served in the Army up to 2nd Feb 1865.

That he lost his life on the 2nd day of July 1865.

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

slain on battlefield of Gettysburg
Gettysburg

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

I have been paid a pension as a resident of 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 JAN 22 day of 1904.

Post Office

State of Georgia,

Fulton County.

John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. Susan E. Mitchell 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 JAN 22 day of 1904.

Official Seal

Ordinary of Fulton County,

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.

Susan E. Mitchell

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.

Thomas Michael

That she is the Widow of

who was a soldier in Company

of the 9th

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 2nd day of July 1865.

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

Slain at Gettysburg July 1865.

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

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.

Ordinary.

Post Office

State of Georgia,

Fulton County.

I,

Ordinary of said County, certify that I am well

acquainted with Mrs. Susan E. Mitchell 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.

Official Seal

Ordinary of Fulton 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 _____, 1906.

[L. S.]

Executed in 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 _____, 1907.

[L. S.]

Executed in presence of

Michael Susan E.
Fulton, County
To Those Hereofore Paid.

1906.

No. 86

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Michael Susan E.

OF

Fulton

County,

Widow of *John Michael*

Co. *C.* Regiment *9th*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1906.

AND HANDLED TO

Michael Susan E.

For Pensions Paid and Pensions Due. See W. Lindsey, Secy.

Michael Susan E.
Fulton, County
To Those Hereofore Paid.

1907.

No. 57

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO

Michael Susan E.

OF

Fulton

County,

Widow of *John Michael*

Co. *C.* Regiment *9th*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1907.

AND HANDLED TO

Michael Susan E.

See W. Lindsey, Secy. Pensions, Atlanta.

STATE OF GEORGIA

FOR WIDOWS HEREOFORE ALLOWED PENSIONS.

STATE OF GEORGIA

FOR WIDOWS HEREOFORE ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

Susan C. Michael

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 18 1840. That she is the Widow of Thomas Michael who was a soldier in Company C of the 9th Regiment of Geo. Volunteers, that he enlisted in said regiment on or about the month of March 1863 and served in the Army up to July 1863. That he lost his life on the day of July 1863. (State here particulars of the husband's death, when, where and from what cause.)

Killed Gettysburg, July 1863.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1841.

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

day of JAN 1906.
J. R. Wilkinson, Ordinary.

Post Office

Atlanta

State of Georgia,
Fulton County.

Ordinary of said County, certify that I am well acquainted with Mrs. Susan C. Michael, 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 10 day of Sept 1840.

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

Official Seal

J. R. Wilkinson
Ordinary of Fulton County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavits must bear date after January 1st, 1906.

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

Susan C. Michael

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 Thomas Michael who was a soldier in Company C of the 9th Regiment of Geo. Volunteers, that he enlisted in said regiment on or about the month of March 1863, and served in the Army up to July 1863. That he lost his life on the day of July 1863. (State here particulars of the husband's death, when, where and from what cause.)

Killed Gettysburg, July 1863.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1841.

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 10 day of JAN 1907.
J. R. Wilkinson, Ordinary.

Post Office

Atlanta

State of Georgia,
Fulton County.

Ordinary of said County, certify that I am well acquainted with Mrs. Susan C. Michael, 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 10 day of Sept 1840.

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

Official Seal

J. R. Wilkinson
Ordinary of Fulton County.

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

State of Georgia:

Clarke County.

In person before the undersigned ordinary,

in and for the County of Clarke personally came Mrs. Amanda ^{Haubridge} ~~Autry~~ ^{and Will Autry.}

and Martha Autry, who, each being duly sworn according to law:

severally say under oath that: they are well acquainted with

Mrs. Susan E. Michael, widow of Thos. M. Michael, she being an applicant for pension under the act of General Assembly of Georgia approved Dec. 23rd, 1890., and that she was the wife of said Thos.

M. Michael, a soldier in Company C. 9th Regiment Georgia Volunteers during his service in the war as a member of said regiment and company, and that she has not intermarried since his death, and that she resides in Atlanta, Fulton Co. State of Georgia.

Sworn and subscribed to, this 29th day of October 1891

29th day of October 1891

S. M. Huntington
Ordinary.

Wm. M. Autry
Martha Autry
Amanda Haubridge

Certificate of Ordinary of applicant's residence.

State of Georgia, I, S. M. Huntington, Ordinary of said county do

County of Clarke, hereby certify that I am acquainted with the

three witnesses, whose affidavit is attested before me as above set forth, and they being witnesses presented by Mrs. Susan E.

Michael to sustain her claim of pension, that they are known to me to be truthful witnesses, and entitled to full credit as such.

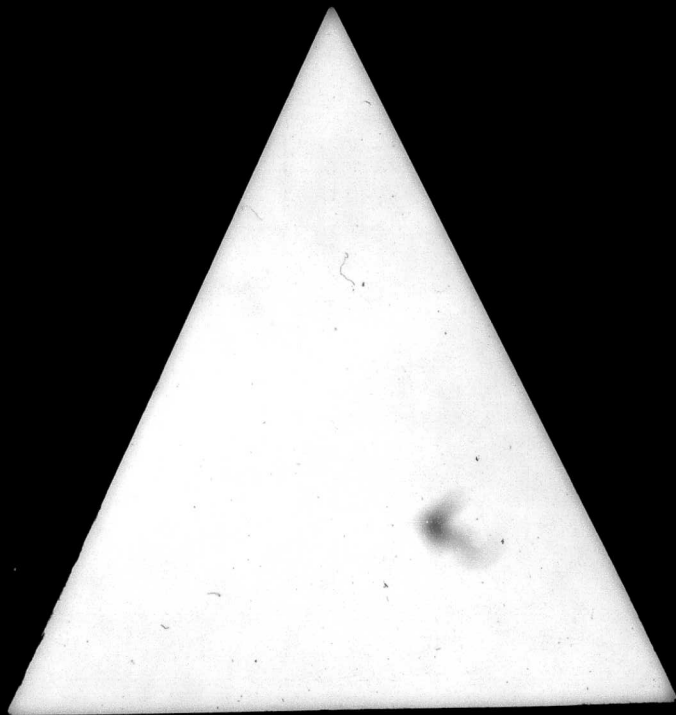
I also certify from my own knowledge or from positive proof presented to me by reputable witnesses, that the said applicant resided in this, the County of Clarke, until about one year ago when she removed to the County of Fulton, and that she resided in the State of Georgia on Dec. 23rd, 1890: and has not lived out of

the state since that date. I am fully satisfied this claim is made in good faith, and that I have caused the said witnesses to read and hear the proofs they signed.

In witness whereof I hereunto set my hand and affix the seal of my office, this the 29th day of October 1891.

(Signed).

S. M. Huntington
Ordinary



Power of Attorney.

STATE OF GEORGIA,

County. }

hereby authorize

I, _____, of _____, 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. [L. 6.]

Executed in presence of _____

Pension Office 7-8-1901.
Applicant must state clearly in his application and prove it in what way he was wounded to keep him from returning to duty with his command before surrender. One and a half yrs is a long time to stay away when all true men was needed with command.

J. W. Lindsey,
Com. of Pensions.

11.

No. _____

INDIGENT PENSION,

1900.

1901

Name Thos C Middlebrooke

Co H 32 La

County Fulton

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

Geo. W. Harrison, State Printer, Atlanta.

66-1907
7-8-1904

Power of Attorney.
STATE OF GEORGIA,

I, _____ of _____ County, }
_____ hereby authorize
_____ of _____
to receive and receipt for the pension allowed, and request that he remit same to _____
at _____ by _____
Witness my hand and seal, this _____ day of _____, 1900.
[L. 8.]

Executed in presence of _____

Pension Office 7--8--1901
Applicant must state clearly
in his application and prove
in what way he was wounded
to receive pension. He must
duty without command before
surrender. One full year
is a long time to be away
when all true men were needed
with command.
J. W. Lindsey,
Com. of Pensions.

INDIGENT PENSION,

1900.

1907

Name Thos. C. Middlebrooks
Co H 3rd Ga
County Fulton

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Thompson, State Printer, Atlanta.

66-1907
705-1907

Questions for Applicant.

STATE OF GEORGIA,

Fulton County, }
Thos. C. Middlebrooks 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)
Thos. C. Middlebrooks, 3511, 1st Avenue
2. How long and since when have you been a resident of this State? Since 1894
3. When and where were you born? 1844, in Harrisburg, Pa.
4. When and where in what company and regiment did you enlist or serve?
1861, in Harrisburg, Pa.
5. How long did you remain in such company and regiment? about four years

Every Question MUST be Answered.

6. When and where was your company and regiment surrendered and discharged? April 1865, Harrisburg, Pa.
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? Left command at Harrisburg, Pa. April 1865, for medical reasons.
9. How much can you earn (gross) per annum by your own exertions or labor? None
10. What has been your occupation since 1865? None
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? Since 1865, in Harrisburg, Pa. I am totally blind.
13. What property, real or personal, of income, do you possess, and its gross value? None
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, 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? Fulton County, Ga.
16. How were you supported during the years 1898 and 1899? By my family.
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? None
18. What was your employment during 1898 and 1899? 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? None
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? Yes
22. How many applications have you ever made and under what class? One

Sworn to and subscribed before me this the 17th day of April, 1900, by Thos. C. Middlebrooks
John R. Wilkinson Ordinary,
of Fulton County.

Applicant,

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

I, M. M. Middlebrooks, of said State and County, having been presented as a witness in support of the application of Thos. C. Middlebrooks 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? M. M. Middlebrooks
349 Sales Street, Atlanta Georgia
2. Are you acquainted with Thos. C. Middlebrooks the applicant; if so, how long have you known him? Eight years
3. Where does he reside, and how long and since when has he been a resident of this State? Atlanta Fulton County Georgia - All the time except 1867-68
4. When, where and in what company and regiment did he enlist, and how do you know? In Co H 17th Pa. Regiment
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? Sept 1863 and afterwards
7. When and where was his command surrendered? at Appomattox Court House Va. 1865

8. Were you present when it surrendered? Yes
9. Was applicant present? No
10. If he was not present, where was he? He was in Harris County Georgia
When did he leave his command? Sept 1863 For what cause? He was wounded Sept 1863
By what authority he left? On Account of his wound How do you know all of this?
I was wounded at same time and I saw him some times afterwards

11. What property, effects or income has the applicant? (Give your means of knowledge.) None
he came something by peddling a medicine - very little - no income
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? He was clerking at about twenty dollars a month in 96 97 & 98 and nothing in 98-99
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
NO - except old wagon, and a remedy merchant in Chicago and his business
14. What is the applicant's occupation and physical condition? He has no occupation except to sell as a peddler, but his physical condition is very poor - heart not good

15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes his health is not sufficient to do much work

16. How was he supported during the years 1898 and 1899? By peddling in 1898 and by trading some in 1899 peddling a medicine

17. What portion of his support for these two 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? He is troubled with Stomach and his general physical condition is not good

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

Sworn to and subscribed before me, this 17th day of April, 1900.

John R. Wilkinson Ordinary.

Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me A. Dawson M.D. and S. M. Lounk M.D., both known to me as reputable physicians

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

Chronic Cystitis, Chronic Prostatitis, Inability to control Bladder, old age, Failing eyesight, and general debility

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 19th day of April, 1900.

John R. Wilkinson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John R. Wilkinson, Ordinary in and for said County, hereby certify that the applicant Thos. C. Middlebrooks resides in said County, and has been a bona fide resident of this State since the 18th day of April, 1886 and that the witnesses, viz: M. M. Middlebrooks

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 Dollars of property, and in 1899 Dollars of property.

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

Witness my hand and seal of office, this 19th day of April, 1900.

John R. Wilkinson 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 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.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Harris COUNTY.)

John A. Middlebrooks of said State and County, having been presented as a witness in support of the application of Thomas E. Middlebrooks 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? John A. Middlebrooks in Harris County, Ga.
2. Are you acquainted with Thomas E. Middlebrooks the applicant; if so, how long have you known him? about fifty nine years
3. Where does he reside, and how long and since when has he been a resident of this State? Atlanta for some 1845 until 1862 & 1866
4. When, where and in what company and regiment did he enlist, and how do you know? don't know
5. Were you a member of the same company and regiment? no
6. How long did he perform regular military duty? don't know
7. When and where was his command surrendered? don't know
8. Were you present when it surrendered? no
9. Was applicant present? he was at home on parole, as then for the surrender
10. If he was not present, where was he? applicant was at my house in Harris Co. Ga.
When did he leave his command? For what cause? he was killed at Fort Mifflin
By what authority he left? How do you know all of this?
he was surrounded and was at his home in Fort Mifflin when the Confederate Army surrendered
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 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? don't know
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? don't know
14. What is the applicant's occupation and physical condition? don't know
15. Is the applicant unable to support himself by labor of any sort, if so, why? he is not able earn a support
16. How was he supported during the years 1898 and 1899? don't know
17. What portion of his support for these two years was derived from his own labor or income? don't know
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? don't know
19. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this John A. Middlebrooks
the 7 day of July 1902.
J. F. Williams Witness.

I certify that John A. Middlebrooks is a true worthy citizen of said County and State & subscribed the above oath.
J. F. Williams
Ordinary

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 _____

COURT SECTION 514.
(FOR THOSE ALREADY ENROLLED.)

No. 294

INDIGENT

SOLDIER'S PENSION
1902.

Name John A. Middlebrooks

County Fulton

Regiment 47

WARRANT ISSUED

1/14 1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

294

Geo. W. Harrison, State Printer, Atlanta.

Middlebrooks, Thomas E.
of Fulton G.

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears Thos E. Murchbrooks 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 60 years old and by occupation a time 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 A, of 17th Regiment of Gabors; 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 1901

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

Thos E. Murchbrooks

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson, Ordinary of said County,

do certify that I am well acquainted with Thos E. Murchbrooks the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 12 1902

day of _____ 1902.



John R. Wilkinson Ordinary

Fulton County.

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

Georgia Fulton County
 Personally come before me Thomas E. Middlebrooks who being duly sworn deposes and says that he was a member of Co. 26 17th Ga Regt that he was wounded at Chickamauga Battle Sept 1863 in the leg that the wound was in the leg that the ball shattered the bone and that pieces of the knife were buried in my leg that these pieces kept the wound from healing thoroughly and that the said wound gave me trouble all along that I join my command afterwards and was furloughed again on account of the wound that I was not able for duty I was sent to a general Hospital there the ball split my leg open and the pieces of my knife was taken out then I was furloughed home in Harris County Ga few days before the surrender I was furloughed from time to time I reported to my command one time in Ga. one time at Petersburg Ga my leg never has been so I could use it I take to it is some shorter than the other one Sworn to and subscribed before me this 5th day of September 1901.

John R. Wilkinson
 Ordinary

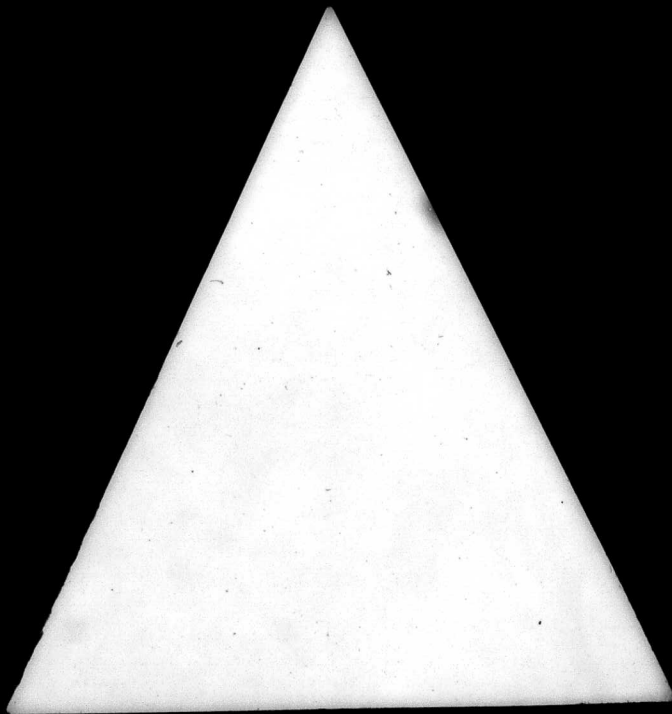
T. E. Middlebrooks

Georgia Fulton County
 Personally appears before me Wm Middlebrooks who being duly sworn deposes and says that J. E. Middlebrooks was a member of Co. 26 17th Ga Regt that he was wounded at Chickamauga Ga September 1863; that the wound was in his leg and that the ball shattered his pocket knife and that pieces of the knife were buried in his leg; that these pieces kept the wound from healing thoroughly and that the said wound gave him trouble all along; that he joined his command afterwards and was furloughed again on account of the wound; that he was not killed by the said wound until the wound was opened and the leg was left shorter and apparently shorter than the other; sometime in 1864. That the said leg now was in complete service as before. Wm Middlebrooks Sworn to and subscribed before me this 5th day of Sept 1901 John R. Wilkinson
 Ordinary

John R. Wilkinson
Ordinary

J. E. Matthews

Sworn to and subscribed before me
this 5th day of Sept 1907 John R. Wilkinson
Ordinary



Ordinary's Certificate

1945-70 COUNTY J
J. C. D. L. A. N. G.

Ordinary of said County, certify that I know
the pension is the person he represents himself to be and
John Oliver the witness swearing to the

Sworn under my hand and official seal of office this 29 day of April 1899

73 Eldorado

Name } Ordinary
County }

[illegible]

Ordinary Fulton County, Ga

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Fulton
Name Wm Middlebrooks
Company H
Regiment 17th Ga Inf.
Approved _____

J. W. LINDSEY,
Commissioner of Pensions

Byrd Printing Co., State Printers, Atlanta.

10-31-1919

Aug 15. 1861.
Sawminded Appomattox
Apr 9. 1865.

STATE OF GEORGIA,

Ordinary's Certificate

County, }
Warren

I, J. C. Williams, Ordinary of said County, certify that I know the applicant, J. W. Eline, for pension is the person he represents himself to be and resides in said county. That I also know J. W. Eline the witness swearing to the service; that they are both residents of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 29 day of Sept, 1919

J. C. Williams, Ordinary }
 of Warren 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.

STATE OF GEORGIA, Warren County, Ordinary of said County, certify that I know the applicant, W. M. Middlebrooks, for pension is the person he represents himself to be and resides in said county; that he was duly sworn by me clerk before signing the foregoing affidavit; that he is truthful and trustworthy and his statements are entitled to full faith and credit; and that he was sworn under my hand and official seal this 25 day of Sept 1919.

W. M. Middlebrooks
Fulton County

Confederate
 Soldier's Application
 Under Act 1910 - As Amended by Act of 1919.

County Fulton
 Name W. M. Middlebrooks
 Company H
 Regiment 17th Ga. Inf.
 Approved _____

Ordinary Fulton County, Ga.

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

10-31-1919

Application for Soldier's Pension Under Act 1910
 Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,

County, }
Fulton

W. M. Middlebrooks 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) W. M. Middlebrooks 399 Peter St Atlanta Fulton Co Ga
2. How long and since when have you been a continuous resident citizen of this State? 34 years - since the surrender of the army at Appomattox 9th April 1865
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? Army of the Confederate States
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) 1861 in the 17th Ga. Inf. Co. 17th Ga. Regt. Arty. by
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) About four years - all the year in the service, but a part of
6. When and where was your Company and Regiment surrendered or discharged from the Service? April 1865 at Appomattox Va
7. Were you actually present with your command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were. There I was captain of Co. F 17th Ga. at the surrender
- a. Where was your command when you left it? Headquarters at Appomattox Va
- b. When did you leave the command? About April 9-12 1865
- c. For what cause did you leave? Paroled after surrender
- d. By whose authority did you leave? U. States - General Sherman
- e. For how long was your leave granted? In what way? Not taken up arms against U.S.
- f. Why did you not return to your command after leave expired? Paroled
- g. In what way were you prevented? War was over
- 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? No
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? No

Sworn to and subscribed before me, this the 25 day of Sept, 1919

William R. Morbit, Ordinary }
 of Fulton County. }

(SEAL)

W. M. Middlebrooks

Aug 15, 1861 -
Surrendered Appomattox
April 9, 1865

Questions for Witness as to Service

STATE OF GEORGIA,

Harris COUNTY. }

J. W. Cline of said State and County is hereby presented as a witness in support of the application of W. M. Middlebrooks 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? Reside at catanah Harris Co Ga
2. How long and since when have you known W. M. Middlebrooks the applicant? From Hudson Run 1861
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? He resides in Fulton Co. & has lived in the State since 1861
4. When, where and in what Company and Regiment did Middlebrooks enlist, during war from 1861 to 1865? (Give date and place.) Enlisted in 17th Ga. Regt. 1861 in Harris Co. Ga
5. How did you obtain your information of this Service? I belonged to same Co. & Regt
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) United States Army
7. When and where was his command surrendered or discharged (give date and place) at Appomattox Va. April 9th 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? Where was his command when he left it? For what cause did he leave? By whose authority did he leave? and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically. I was Lieutenant of same Regiment
13. In what way was he prevented from returning to his command? How do you know?
14. What effort did he make to return to his command and how do you know?
15. Was applicant captured as a prisoner? No If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the

29 day of Sept 1919

J. W. Cline Ordinary

of Harris County.

(SEAL)

NAME **Middlebrooks, W.M.**

YEAR **1868** COUNTY **Fulton.**

WHEN AND WHERE BORN? **Resident of Georgia since Apr. 1868.**

ENLISTED WHEN AND WHERE? **1861 in Harris Co. Ga.**

RANK: **Capt.** - Co. F, 17th Ga. Regt. Infantry

COMPANY AND REGIMENT? **Co. H. 17th Ga. Regt. Infantry.**
and Co. F. 17th Ga. Regt. Infantry.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? **April 1865 at Appomattox Court House, Va.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: **J.M. Glines-----Saw Command-----no date.**

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: J.W. Gline.....Sam Gorman.....no data.

END

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY. }

I, _____

of _____

being authorized

to receive and receipt for the pension allowed and request that he forth send to _____

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

Executed in presence of _____

[L. 6.]

Pension office
10/26-1908
Appl. was not a
Confident Success
has come in the
to minute paper on
not military service
not eligible to
this Pension
NO Lindsey
Cause of failure

Middleton, John
Discharge
No. 10/26-1908

INDIGENT PENSION.

1908

Name *John Middleton*
 County *Fulton*
Confidential Laboratory Regt.
 Approved _____ 190_____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO _____

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

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

8/26/08

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

James M. Mann of said State and County, having been presented as a witness in support of the application of John A. Middleton 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? James Mann live at 71 Vesable Street Atlanta Ga
2. Are you acquainted with John A. Middleton, the applicant; if so, how long have you known him? Yes, have known him ever since 1862
3. Where does he reside, and how long and since when has he been a resident of this State? At 5 1/2 Marietta St - Atlanta Ga, resided in Ga ever since 1862 - Atlanta - in a Company of Confederate States Laboratory
4. When, where and in what company and regiment did he enlist, and how do you know? Yes, Sir in some
5. Were you a member of the same company and regiment? Yes, Sir in some
6. How long did he perform regular military duty? About three years
7. When and where was his command surrendered? I was in Augusta when they surrendered
8. Were you present when it surrendered? I was not present
9. Was applicant present? I cannot say, I suppose so
10. If he was not present, where was he? I cannot say
- When did he leave his command? I don't know For what cause? I don't know
- By what authority he left? I cannot say How do you know all of this? I was not present, I cannot say.

11. What property, effects or income has the applicant? (Give your means of knowledge.) None that I know of
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? None that I know of
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? None that I know of
14. What is the applicant's occupation and physical condition? Nothing - he is in feeble condition, not able to labor sufficient to support himself
15. Is the applicant able to support himself by labor of any sort; if so, why? Yes, he is unable to make a support for himself
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? I cannot say - do not know
17. What portion of his support for these four years was derived from his own labor or income? Do not know - but think very little
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code of Georgia. I know he is feeble, I cannot say with any positive particularity.
19. Who comprises family? What property have they? Children, age and their earning capacity? He has no family that I know of.
20. What interest have you in the recovery of a pension by the applicant? None at all.

Sworn to and subscribed before me, this the 21 day of February 1902, at Atlanta Georgia.

John W. Wickham Ordinary.

John W. Wickham Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me Chas. F. Benson M.D. and Chas. O. Smith M.D. both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully John A. Middleton, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: Severe Debility, Old age and a Chronic Bowel trouble

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

Sworn to and subscribed before me, this the 21 day of August 1902, at Atlanta Georgia.

John W. Wickham Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John W. Wickham Ordinary, in and for said County, hereby certify that the applicant John A. Middleton resides in said County, and has been a bona fide resident of this State since the 18 day of August 1898 and that the witnesses, viz. James Mann, Chas. O. Smith M.D. and Chas. F. Benson M.D. are of trustworthy character, and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions the applicant and each witness took the oath 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 Fulton 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 not made in good faith.

Witness my hand and seal of office, this 21 day of August 1902, at Fulton Georgia.

John W. Wickham Ordinary.

25 C O T 33.

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

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

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

day of Sept 1903
John A. Middleton Ordinary.

Witness.

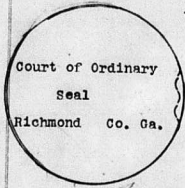
2. Additional affidavits may be attached if blank spaces are insufficient.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

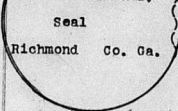
STATE OF GEORGIA,)
RICHMOND COUNTY.)

I, ALEXANDER R. WALTON, Ordinary of said County, hereby certify that JOHN A. MIDDLETON, has come before me and made Oath that he is a resident of said State and County; that he served in the Confederate Army as a member of the Ordnance Department of Confederate Navy, and that he is an Indigent & disabled Confederate soldier. I further certify that as such Indigent & disabled Confederate soldier he is authorized to peddle or conduct business in any Town, City or County of the State without paying license for the privilege of so doing. Provided he does not peddle or deal in ardent or intoxicating drinks, run a billiard, pool, or other table of like character, deal in futures, peddle stoves or clocks, carry on the business of a pawn broker or auctioneer or deal in lightning rods, as authorized by Act approved December 20th, 1888, and that he is not authorized to transfer the privilege granted by said act, to any other person either directly or indirectly.

Witness my hand and seal of office
this 15th day of September, 1903.

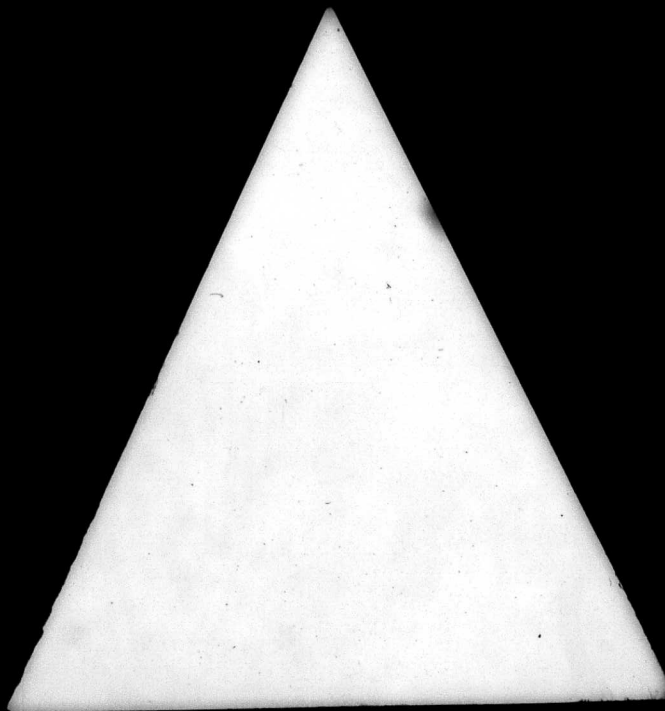
ALEXANDER R. WALTON,
Ordinary, R.C.





Seal
Richmond Co. Ga.

Ordinary, R.C.



Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.

I, W. J. Jeffers, Ordinary of said County, certify that I know the applicant, R. P. Williams, for pension in the person he represents himself to be and resides in said county. That I also know W. J. Williams, 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.

Witness my hand and official seal of office this 17 day of Oct, 1919.

(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 give true answers made to each of the questions asked you and the evidence you give shall be true and correct." 2. Additional affidavits may be obtained of local officers as indicated. 3. All affidavits must be sworn before the Ordinary of the county in which the applicant or witness resides and must be witnessed by such Ordinary.

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County R. P. Williams

Name R. P. Williams

Company Co. 14 Ga Reg

Regiment 14 Ga Reg

Approved _____

R. H. Ga Inf.
July 9, 1861
Oct 9, 1861
B. (?) 16 Ga. Path of Cav.
March Regt just before
Richmond.

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-31-1919

July 27/61.
Knoxville, Oct 1, 1861

Pension office
5/5-1861
Disapproved
for the reason
that the Record
shows as well
as its history
did not prove
six months actual
military service

J. W. Lindsey
Comm of Pensions

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, R. P. Milam Ordinary of said County, certify that I know the applicant, R. P. Milam for pension is the person he represents himself to be and resides in said county. That I also know John Williams 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 17 day of Oct 1919
R. P. Milam Ordinary
 of _____ 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.

Confederate Soldier's Application Under Act 1910 - As Amended by Act of 1912

No. 131-1920

County Fulton

Name R. P. Milam

Company K-14 Ga. Reg

Regiment 14th Reg

Approved _____

R. P. Milam
July 9, 1861
Oct 1, 1861

16 day Battle of Gettysburg
March 1863
March 1864

J. W. LINDSEY
 Commissioner of Pensions.

State Printing Co. State Printers, Atlanta.

Application for Soldier's Pension Under Act 1910 Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,

Fulton COUNTY.

R. P. Milam of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Holders, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office) R. P. Milam
Atlanta, Fulton County, Ga.
2. How long and since when have you been a continuous resident citizen of this State? Since Jan. 1st, 1850. Twenty Nine Years.
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? Yes, from June 1861 to 1865.
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) June 1861, Cartersville Ga., Company K, 14th Ga. Reg. Infantry.
5. How long did you remain in the actual military service with said Company and Regiment? (Give (health, date of discharge) Nearly two years. Then I was discharged on account of ill (Col.)
After restoration to health I joined the 18th Ga. Battalion, G. J. Winn
In Virginia 1865.
6. When and where was your Company and Regiment surrendered or discharged from the service? In Virginia 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. On furlough in Atlanta Ga., separated by enemy from command.
- a. Where was your command when you left it? Near Bristol Tenn.
- b. When did you leave the command? About Jan. 1865.
- c. For what cause did you leave? On furlough.
- d. By whose authority did you leave? That of the Commanding Officer.
- e. For how long was your leave granted? In what way? Sixty days on furlough (enemy).
- f. Why did you not return to your command after leave expired? Left off from command by
- g. In what way were you prevented? Enemy between me and command.
- h. What effort did you make to return? Reported to Gen. Wofford who was in command
in Atlanta who would not allow me to try to return, but put me on duty
Were you captured during the war? No.
- i. 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? No.

(I was formally discharged at Kingston Ga. under the command of Gen. Wofford, with other troops.)

Sworn to and subscribed before me, this the

16 day of August 1919

R. P. Milam Ordinary

of Fulton County.

(SEAL)

July 20/61
Virginia, Oct 1, 1861
Pension office
5/10 1863
Disapproved
for the reason
that the Regt
Shinn, as well
as its history
did not pertain
any more to the
14th Reg
Confederate
Army of Gen

Questions for Witness as to Service

STATE OF GEORGIA,

Fulton COUNTY.

J. M. Goldsmith of said State and County is hereby presented as a witness in support of the application of R. D. Milam for the pension provided by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? J. M. Goldsmith
Atlanta Ga
2. How long and since when have you known R. D. Milam the applicant? Since about 1888
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State, and how do you know? Atlanta Ga since 1890. Know of personal knowledge
4. When, where and in what Company and Regiment did he enlist during war from 1861 to 1865? (Give date and place.) Co K 14th Regt in 1861 Canton Miss
5. How did you obtain your information of this Service? Was a member of same Co & left the Co before him
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date.) Could not state as to that
7. When and where was his command surrendered or discharged (give date and place)? Having left the Regiment I do not know
8. Were you personally present at the surrender? not where Milam was
9. If not, where were you and how came you there? I was in Macon Ga where General Cobb surrendered
10. Was the applicant personally present with his command at surrender? Do not know
11. If not where was he and how came him there? Don't know
12. When did he leave his command? Don't know Where was his command when he left it? Don't know For what cause did he leave? Don't know By whose authority did he leave? Don't know and how long was he granted leave? Don't know How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically. Was with him when I was a member of the Co & left as above
13. In what way was he prevented from returning to his command? Don't know How do you know? Don't know
14. What effort did he make to return to his command and how do you know? Don't know
15. Was applicant captured as a prisoner? Don't know If so, when and where? Don't know and when released Don't know In what prison was he held? Don't know

Sworn to and subscribed before me, this the

17 day of Aug, 1917

Wm. L. Griffin Ordinary }
Notary Public County.

(SEAL)

13. In what way was he prevented from returning to his command?
How do you know? *Don't know*
14. What effort did he make to return to his command and how do you know? *Don't know*
15. Was applicant captured as a prisoner? *Don't know* If so, when and where? *Don't know*
..... In what prison was he held? and
when released
Sworn to and subscribed before me, this the day of *Aug* 19*17*
Wm. H. Galt Ordinary
of *Greene* County }
(SEAL)

Form 5

Wilson
Conn/y.

50

James F. Miles
7-11-

For information, we are sending you the carbon duplicate of the

1891

James Fth McIlhenny

[8]

1891

, and obligee

01

Form 6

and payments provided, are following suggestions

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1891.

No

Applicant. *James F. Miles*

County. - *Paul H. W.*

Entered on Record

189

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

ML Mile

POWER OF ATTORNEY. STATE OF GEORGIA,

Form 5.

Fullton County.
KNOW ALL MEN BY THESE PRESENTS, That I, James T. Miles

County, in said State, do hereby appoint M. L. Miles
of Fullton County, Geo. 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 Fourth
day of June 1891.

Executed in the presence of us:

A. H. Brantley
L. L. Thompson

DIRECTION

If allowed, send amount by M. L. Miles to
me at Atlanta, 70 Howell St., and oblige,

NOTES.

Form 6.

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

1. If an applicant has been wounded, the description of the wound should be carefully
and fully set forth by applicant and physician, and followed by a plain statement of facts showing
the extent of the disability. If applicant claims disability from disease contracted in the service,
full and carefully stated history of the disease should be given, tracing the disability to its source
prior 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 military pursuits
life, etc." There is no qualification to the clause of the law in reference to the arm being
the limb most for all purposes be "substantially and essentially useless."

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

5. Every application must be certified in the Order of the Surgeon of the State of Georgia
to the applicant. The certificate of any other will not be received in any case of the residence of
the applicant. The Qualities of the several Commissions are specially mentioned in the Rules of the
the physicians and applicants to these points.

6. No payments can be made for any past years.

For Use of Applicants Who Have Not Heretofore Drawn.

Form 1.

STATE OF GEORGIA,
Fullton County.

PERSONALLY appears James T. Miles of Fullton

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
resident of said State, and has been continuously since the _____ day of

1880; that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served as a Private in Company D, of 42nd Regiment
of Georgia Volunteers, Stovall's Brigade; that whilst engaged
in such military service, at the battle of _____ in the State
of Georgia on the winter day of _____ 1863, he was

disabled as follows: by exposure to the very severe winter, bringing
on 2 attacks of Pneumonia from the effects of which he has never
recovered. Up to that time he was a strong, stout man, &
had never had a days sickness since he could remember,
from that time on he has been subject to a constant cough,
with spitting of much matter, and, for the last 2 1/2 years, blood,
These hemorrhages are getting more frequent and more severe
He is unable to do any work, and is almost helpless.
He has never been well since he incurred the
exposure which brought on his sickness and
he is gradually growing weaker from the disease
in his lungs. The worst exposure preceding the Pneumonia
was while going from Charleston, Tenn. to Dalton, Geo, in November
(he thinks) 1863.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
and the Acts amendatory thereof, and makes application for the allowance to which he is entitled
for the year thereunder, ending October 26, 1891.

Sworn to and subscribed before me, this, the _____ day of June 1891.

W. L. Williams
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 correct history of disease, tracing it directly to the service.
NOTE.—Do not trouble to mention wounds which do not disable.

Application for Allowance
No. 5127
Fullton Co.
1891.
James T. Miles
Fullton County
Amount \$50
Entered on Record
July 28
M. L. Miles

AFFIDAVIT FOR WITNESSES.

Form 2.

STATE OF GEORGIA,

County of De Kalb

PERSONALLY appears before me, the undersigned Ordinary in and for said County,
W. H. Burgess and B. G. Mitchell and
E. H. Harris each of whom, being duly sworn according to law,
severally say, under oath, that they are personally well acquainted with James F. Miles
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.)

That in the fall of 1863 applicant had
typhoid fever while in service that he
had a relapse from which he came near
dying. Since fully recovered from effects of
the sickness, was never able to be in active
service any more during the war.
He was a stout and able bodied
man when he entered the war
but has never been well since.
He has continued to grow
worse until now he is unable
to do any work at all.

Our opportunities for knowing that his condition results from the service are as follows:

We were in the same company then
his condition when he entered the service
and was with him when he was
sick and have lived near him since the war.
Applicant is permanently disabled, and has been so to our certain knowledge ever since 18__.

We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this

12 day of June 1891.

W. H. Burgess
B. G. Mitchell
E. H. Harris
ORDINARY.

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

Sworn to and subscribed before me
by E. H. Harris then
June 15th 1891 at Dalton Georgia

PHYSICIANS' AFFIDAVIT.

Form 3.

STATE OF GEORGIA,

County of Fulton

PERSONALLY comes before me _____ Ordinary of said County,
C. E. Murphy and A. H. Brantly, both known to
me as reputable physicians of said County, who, being severally sworn, say on oath that they
have carefully examined James F. Miles, and after such examination,
say that the applicant has been injured as follows: Tuberculosis, and that
he is a confirmed invalid.

One of us, Dr. Brantly, has known Applicant since 1867 and was
his family Physician from that time for a number of years — the other
Dr. Murphy, is now, and has been for 2 years, his family Physician.
In 1867 he had Tuberculosis and from then until now it has gradually
become a more violent type.

In giving the history of his case he has always stated that it had its origin from ex-
posure incurred in the service of the Confederacy, in the winter of 1863.
From what we know as to Applicant's present condition, from his character, and from
all the attendant circumstances we are absolutely certain that his disease originated from
exposure incident to the service, as he states, and we take pleasure in endorsing him as a man worthy
of the State's aid.

We have treated applicant professionally for 2 and 11 years, respectively.

'Sworn to and subscribed before me, this

20 day of June 1891.

C. E. Murphy
A. H. Brantly
ORDINARY.

NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability result-
ing therefrom.
NOTE 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a
soldier. Also state how long physicians have known and treated applicant.

STATE OF GEORGIA,

County of Fulton

Form 4

I, W. L. Leachman Ordinary of said County,

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

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

Given under my official signature and seal, this 20 day of June 1891.

W. L. Leachman
Ordinary Fulton County.

STATE OF GEORGIA,

Fulton County,

I, M. L. Leachman Ordinary of said county,
do certify that I am well acquainted with James F. Miles 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 4th day of March 1892

M. L. Leachman

Ordinary Fulton County.

Aug 1892
Fulton Co
Miles James F.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name	<u>J. F. Miles</u>
County	<u>Fulton</u>
Disability	<u>Discharge</u>
Amount	<u>\$ 250</u>
Entered on record	<u>March 5</u>
	1892.
W. H. HARRISON Secretary of Exchequer-Department.	
<u>AGENT</u>	
<u>M. L. Miles</u>	

John W. Harrison, State Printer, Albany, Ga.

STATE OF GEORGIA
For Applicants for Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fuller County.

PERSONALLY appears *James F. Miles*

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 _____ 18 *J.I.*; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a *Private* in Company *D*, of *42nd* th Regiment of *Geo* Volunteers *Stonalls*'s Brigade; that whilst engaged in such military service at the battle of *Dallas* in the State of *Georgia*, on the _____ day of _____

March 186 *J*, he was wounded as follows: *Contracted a disease of the lungs which has continued to the present date and has rendered him practically incompetent to perform the ordinary manual business 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

Fifty Dollars for 1891

Sworn to and subscribed before me this the _____ day of *March* 1892. *James F. Miles*
Mark

W. L. Cochran Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fuller County.

Know all Men by these Presents, That I *James F. Miles*

of *Fuller* County, in said State, do hereby appoint *W. L. Cochran, my son,*

of *Fuller* _____ 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 *March* 1892. *42*

Executed in the presence of us:

W. L. Cochran

James F. Miles

G. J. Miles DIRECTION.

Send money to me as follows, by _____

_____ to _____ P. O.

County, Georgia.

State of Georgia,
 De Kalb County, } In person came
 C. H. Clark who on oath says
 that he was Captain of Co. D. 4th
 In Regiment, and that C. F. Harris
 was a member of that Company
 but does not know whether
 his name was "Elbert" or not
 that he was known to the
 Company as "Frank" Harris.
 Also states that he willingly and
 cheerfully signs the Certificate
 in reference to applicant
 James F. Miles.
 Sworn to before me } C. H. Clark
 July 25, 1891. }
 W. M. Rogers, }
 Ordaining.

Atlanta, Georgia.
 June 27th 1891.

In response to Col. Harrison's request
 we, Drs. Murphy and Brantly, The undersigned
 Physicians, beg leave to amend our former
 Affidavit in behalf of The Applicant, named in
 this paper as follows.

We find, on examination, both Lungs badly
 affected - in fact one of them is a mass of Tuberc-
 les, and almost useless - while the other maintains
 functional activity with, probably, not more than
 two-thirds of its substance.

He is very much emaciated - has Nectic
 fever, with Night sweats; is greatly harassed with
 a persistent Cough, and spits up a great deal
 of purulent matter from the Lungs. He is unable
 to perform any sort of physical labor, as he is so fee-
 ble that he can walk but a few yards at a time.

His Family History, so far as we
 have been able to ascertain, presents no
 characteristics of hereditary lung disease,
 nor do we find any scrofulous taint
 whatever, hence we think we are jus-
 tified in concluding that his present
 condition is not chargeable to any
 hereditary taint or transmitted disease.

State of Georgia
County of De Kalb

In person came
witnesses B. J. Mitchell and
H. B. Burgess of said County
who say on oath that they
are acquainted with the Miller
family and that none of them
ever had any pulmonary
diseases or similar diseases.
Do not know personally
when applicant began to
have hemorrhages
severe and subsided } H. B. Burgess
before me July 23rd 1891 } B. J. Mitchell
M. M. B. B. B. }
Ordinary }

Taking into consideration all that
we have been able to learn from
extraneous sources concerning Applicant's
past and present condition, coupled with
our own personal knowledge of the man,
and his environment, we are absolutely sure
that the disease with which he is now
afflicted had its origin in the exposures and
hardships of his military service, such exposure
acting as the main cause of the train of
symptoms beginning with the Pneumonia and cul-
minating in the Tuberculosis with which he
is now afflicted.

Given and signed B. E. Murphy M.D.
Subscribed before U. H. Brantly M.D. &
on 29th 1891
Not before
Ordinary

NAME, Miles, James F

WHEN AND WHERE BORN? Resident of Ga. since 1880

ENLISTED WHEN AND WHERE?

COMPANY AND REGIMENT? Private Co D, 42nd Regt. Ga. Vols -
Stovall's Brig.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? In Georgia, winter of 1865 - by exposure to the very
severe winter, bringing on two attacks of pneumonia, from
which has never recovered, gradually growing weaker from
diseased lungs. WHEN AND WHERE?

RELEASED,

WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES, H H Burgess; B O Mitchell; Elbert F Harris.

P.O.

1891

COUNTY.

Fulton

MM

Audited _____ 1891.

COMPTROLLER-GENERAL.

Miles, James F.

Fulton

1891.

Maimed Soldiers.

Voucher No. 3121

Amount \$ 501

Paid to James F. Miles

for disability by

Wagoner

July 28 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT-CLERK.

Geo. W. Harrison, State Printer, Atlanta.

M. L. Miles

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. }

1891.
No. 3127

Atlanta, Ga. July 28 1891.

Mr. James F. Miles 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
Disabled by Dysentery
He is entitled to receive the sum of Five 5 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.



W. J. Norcross
GOVERNOR.

By the Governor,

W. H. Harrison
SECY EXECUTIVE DEPARTMENT.

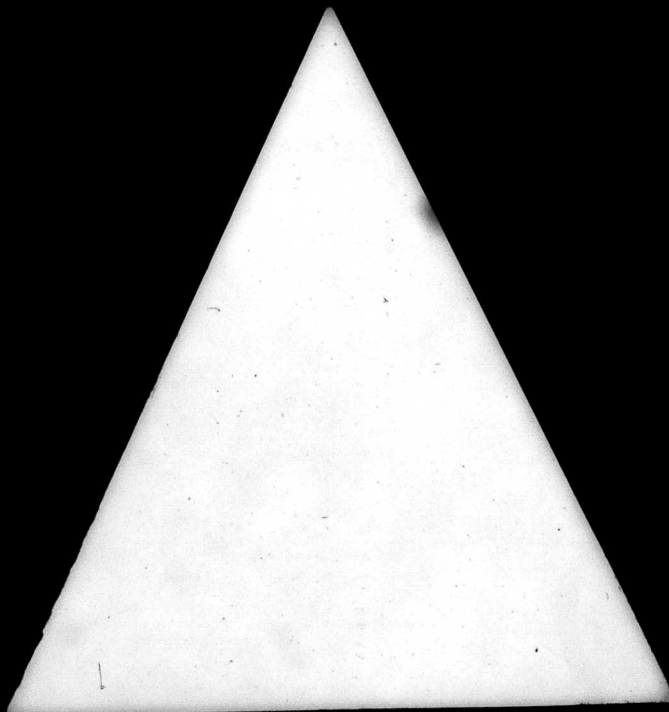
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RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

Five 5 00 Dollars,
per above voucher, this 28 of July 1891.
50 Miles by W. J. Miles

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

Fifty ~~00~~ *00* Dollars,
per above voucher, this *25* of *July* 1891.
W. H. Miles by W. L. Miles



POWER OF ATTORNEY.
STATE OF GEORGIA.

County, }

I, _____ hereby authorize

of _____

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

by _____

at _____

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

day of _____ 1901.

[L. S.]

Executed in presence of _____

Wm. John L. Campbell

CODR ANCHON 1900
(For Those Already Enrolled.)

No. 333
In Camp till 1900

DISABLED
SOLDIER'S PENSION.
1901.

Name *Wm. Miles family*
County *Fulton Campbell*
Disability *Wound in left hand*
Amount, \$ *25.00*

January 18 1901.

JOHN W. LINDSEY.

Commissioner of Pensions.

WARRANT HANDED TO.

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

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears J. J. Miles of Fulton ^{bona fide} ~~county~~ ^{citizen} 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 5th day of November 1841; 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 C, of 25th Regiment of Ga Volunteers, Thomas's Brigade; that whilst engaged in such military service in the State of Virginia, on the 12th day of May 1864, he was wounded, injured or diseased as follows:

at Battle of Spotsylvania Ct Va
Struck by musket ball in left hand
passing through the hand & rendering
same useless

Deponent makes application for the pension to which he is entitled for year ending October 20th, 1901. I have heretofore under said law as a resident of Catoosa County been allowed an invalid pension of Twenty Five Dollars, for the year 1900.

Sworn to and subscribed before me, this the 15 day of January 1901. J. J. Miles Postoffice _____

John R. Wilkinson
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 J. J. Miles the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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.

John R. Wilkinson
Ordinary Fulton County.



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 the presence of _____

[L. S.]

INDIGENT PENSION.

1903.

1905

Name, John J. Miles

County, Fulton

Co. 6, 35th Regt.

Approved _____ 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

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

John W. Lindsey, Commissioner of Pensions.

1/27/06

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

_____ COUNTY. }

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

1. What is your name and where do you reside? (give State, County and post-office)

John J. Miles - Fulton Co. - Stanton, Ga.

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

Since 1841.

3. When and where were you born?

Nov 6 - 1841 - Decatur Co. Ga.

4. When and where and in what company and regiment did you enlist or serve?

April 1862 - 1st Regt. - 35th Regt. - 35th Regt. - 35th Regt.

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

May 12 1864 at Spotsylvania Co. Va. - 1st Regt. - 35th Regt. - 35th Regt.

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

April 1865 at Appomattox Co. Va. - 1st Regt. - 35th Regt. - 35th Regt.

7. Were you present with your company and regiment when it was surrendered?

Yes - in 1st Regt. - 35th Regt. - 35th Regt.

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?

Left 1st Regt. - 35th Regt. - 35th Regt.

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

About \$200 -

10. What has been your occupation since 1865?

Farming, when able -

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?

Age and poverty -

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 1864, 1865, 1866, 1867, 1868, 1869, 1900, 1901 and 1902, 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?

None -

16. How were you supported during the years 1860, 1900, 1901 and 1902?

By family and -

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 -

18. What was your employment during 1866, 1867, 1868, 1869, 1901 and 1902? 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, or other property? Their ages and how employed?

No family -

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?

Yes -

22. How many applications have you ever made and under what class?

One - Invalid -

Sworn to and subscribed before me this the _____ day of _____, 1903.

John J. Miles

of _____ County.

Every Question MUST b Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Campbell COUNTY.
Capt J. E. Starch

of said State and County, having been presented as a witness in support of the application of John J. Miles 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. E. Starch - I reside in Campbell County, Ga.
2. Are you acquainted with John J. Miles, the applicant; if so, how long have you known him? Yes Sir - known him 50 years
3. Where does he reside, and how long and since when has he been a resident of this State?

Atlanta Ga - 50 yrs, since 1854 to my knowledge
4. When, where and in what company and regiment did he enlist, and how do you know? He enlisted in 1862 in Campbell Co. Ga. in Co. "C", 35th Regt. Ia Vol. & Co. 1st

5. Were you a member of the same company and regiment? Yes Sir
6. How long did he perform regular military duty? About 3 years

7. When and where was his command surrendered? Apr 9th 1865 at Appo. molloy Co. Va

8. Were you present when it surrendered? Yes Sir
9. Was applicant present? No Sir

10. If he was not present, where was he? On retired service
When did he leave his command? First of April 1865 For what cause? Wounded

By what authority he left? By the Government How do you know all of this? I was Captain of the Company & ordered him to obey for the purpose of retirement

11. What property, effects or income has the applicant? (Give your means of knowledge.) None, so far as I know or believe

12. What property, effects or income did the applicant possess in 1890, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? None of any consequence

13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? I don't think he had any to convey

14. What is the applicant's occupation and physical condition? He was a farmer. Don't know his present occupation. His physical condition is poor

15. Is the applicant unable to support himself by labor of any sort, if so, why? So the best of my belief, he is not able to earn a living by his own efforts

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? Heavily assisted by his children

17. What portion of his support for these four years was derived from his own labor or income? Can't say positively

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He was wounded during the war & has been since

19. Who composes family? What property have they? Children's age and their earning capacity? He has no family at all

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

Sworn to and subscribed before me, this the 20th day of Sept. 1904 Capt J. E. Starch Witness.

M. J. McLaughlin Ordinary.

I, Campbell County, do hereby certify that the witness Capt J. E. Starch is a resident of this State and is a member of the same company and regiment as stated in his statement. I further certify that the witness M. J. McLaughlin is a resident of this State and is a member of the same company and regiment as stated in his statement.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me J. E. Starch and J. E. Starch, both known to me as reputable physicians

of said County, who, being severally sworn, say on oath that they have examined carefully Miles, applicant for pension under Section 1254, Code, and

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

Left hand

disabled from use of one finger and

the other fingers are so weak that

he cannot hold a pen or pencil

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

Sworn to and subscribed before me, this the 20th day of Sept. 1904 J. E. Starch Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John B. Westmore Ordinary, in and for said County, hereby certify that the applicant John J. Miles resides in said County, and has

been a bona fide resident of this State since the 1st day of Jan. 1890

and that the witness, viz.: J. E. Starch

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 None Dollars of property, and in 1900 None Dollars of property, in 1901 None Dollars of property, in 1902 None Dollars of property.

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

Witness my hand and seal of office, this 21st day of Sept. 1904 John B. Westmore 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. If proper case the Ordinary must certify to the character of the witness, and as to the execution of the proof as to be set out.

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 _____

Miles, John J.
of Fulton Co

FORM NUMBER 1260.
(FOR THOSE ALREADY ENROLLED.)

No. *1712*

DISABLED

SOLDIER'S PENSION
1904.

Name *John J. Miles*

County *Fulton*

Co. *10* 35 Regiment *1st*

Disability *blind left hand*

Amount, \$ *25.00*

2/10 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
Applicant

700 date

31 FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears John J. Miles 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 5th day of November 1847; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company C., of 55th Regiment of Georgia Volunteers C. L. Thomas's Brigade; that whilst engaged in such military service in the State of Virginia, on the 12 day of May 1864, he was wounded, injured or diseased as follows:

in the left hand, the ball passing through the palm of the hand causing the loss of the middle finger and rendering the left hand useless and practically useless for use in the performance of manual labor

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

Sworn to and subscribed before me, this the

16th day of Feb. 1904.

John R. Wilkinson

John J. Miles

Post-office 222 Madison St. Atlanta Ga. Fulton Co.

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

Given under my official signature and seal, this 16th day of February 1904.

John R. Wilkinson
Ordinary Fulton County.



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

CODE SECTION 1294.
(FOR THOSE ALREADY ENROLLED.)

No. 370

INDIGENT
SOLDIER'S PENSION
1905.

Name John J. Miller
Company Fulton
Co. C. Regiment 35th Regt.

WARRANT ISSUED

118 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John J. Miller

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

no date

CODE SECTION 1294.
(FOR THOSE ALREADY ENROLLED.)

No. 369

INDIGENT
SOLDIER'S PENSION
1906.

Name John J. Miller
Company Fulton
Co. C. Regiment 35th Regt.

WARRANT ISSUED

117 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

John J. Miller

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

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears John J. Miles 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 _____, 1841; that he is 64 years old and by occupation a none, 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 C, of 88th Regiment of Ca.; 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 _____ day of _____, 1905. _____ Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John J. Miles Ordinary of said County, do certify that I am well acquainted with John J. Miles the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 J. Miles 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 J. Miles 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 _____, 1841; that he is 65 years old and by occupation a none, 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 C, of 88th Regiment of Ca. (Thomas Brigade); 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 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 _____ day of JAN 1 1906. _____ Ordinary.

State of Georgia,

Fulton County.

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

Miles, John J.
Fulton Co.

Great Seal of the State.
(FOR THOSE ALREADY ENROLLED)

No. *208*

INDIGENT
SOLDIER'S PENSION
1907.

Name *John J. Miles*

County *Fulton*

Co. *C* Regiment *85th Reg*

WARRANT ISSUED

1907

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

Gen. W. H. HARRIS, Secretary, State.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears John J. Miles 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 _____ 1841; that he is 66 years old
and by occupation a _____ that he enlisted in the military service of the Con-
federate States (or of the State of Georgia) during the war between the
States, and served for the term of 2 yrs in Company 6, of 36th Regiment
of 1st Georgia Brigade; that his physical condition is as
follows: Age & poverty

that his property consists of the following items:

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

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

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

John D. Williamson

Ordinary.

State of Georgia,

Fulton County.

I, John D. Williamson Ordinary of said County,
do certify that I am well acquainted with John J. Miles
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 D. Williamson

Ordinary

Fulton County.



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

the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 B. Williamson

Ordinary Valley County.

NOTE.—The blank spaces must be filled.

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

ALLS
PAID
SEE
HERE

Georgia, Campbell County.

I the undersigned do certify that J. J. Miles now of the
County Fulton is the same person who as an invalid
pensioner was on the pension rolls of this county, and drew a pension of 25 dollars
for 1900, and the bearer is same man.

Given under my hand and official seal of office Jan 5, 1901.

W. S. McLarin [L. S.]

Ordg

SRAL

STATE OF GEORGIA,
FULTON COUNTY.

Personally appeared before me John J. Miles, who being duly sworn says on oath that he is a Confederate Veteran. That he served in the Civil War between the States of the United States in the military services of the Confederate States of the State of Georgia. That he enlisted in Company "C", thirty fifth regiment of Georgia Volunteers in the S. L. Thomas Brigade from Campbell County, Georgia in April 1862. Deponent further swears that he made application for a Pension from Campbell County Georgia, same was duly approved, and that he was regularly placed upon the Pension list under the Pension laws of Georgia, under head of disabled soldiers. Deponent further swears that in 1899 he changed his residence from Campbell County to that of Fulton County Georgia and subsequent to that time he drew his Pension as a resident of Fulton County up to the year 1901. That the last Pension that Deponent drew was the Pension not aside to him for the year 1900.

That Deponent went beyond the limits of said State upon a visit in the early part of 1901, and that because of this temporary change of location he was dropped from the Pension Role. Deponent further swears that he returned from his said trip on the 25th day of January 1903 and has since that date been a bona fide resident of Fulton County, Georgia, and is now living and residing in Fulton County Georgia, and is a bona fide resident of said State and County. Deponent swears that he has been a bona fide resident of Fulton County more than twelve months next preceding the date of making this his affidavit and he makes this his affidavit in conformity with the Pension laws now in operation in said State of Georgia for the purpose of being reinstated upon the Pension Role of the State of Georgia, in order that his Pensions may hereafter be paid to him as made and provided in such cases.

Sworn to and subscribed before me,

this the 6th day of February 1904.

John R. Wicklison
Ordinary
Fulton County

John J. Miles

STATE OF GEORGIA,
FULTON COUNTY.

Personally appeared before me M. T. Pickett of said State and County, who being duly sworn says upon oath that he is acquainted with John J. Miles, and has known him for a number of years. Deponent further swears that he remembers when John J. Miles left Fulton County Georgia for a visit to relatives in Texas. Deponent swears further that when Mr. Miles left Fulton County Georgia, John J. Miles told this deponent that he was going away on a visit and would return shortly. Deponent swears further that he known of his own knowledge that John J. Miles returned to Fulton County Georgia during the month of January 1903, and that the said John J. Miles has been a continuous resident of said State and County since said return, and has been a citizen of the State of Georgia more than twelve months next prior to making this his affidavit.

Sworn to and subscribed before me,

this the sixth day of February, 1904.

John R. Wicklison
Ordinary

I certify that Mr. M. T. Pickett is a citizen of the City of Atlanta and Fulton County, is just worthy and entitled to full credit & belief in any statement he may make.

John R. Wicklison
Ordinary

Pension Note of the State of Georgia, in order that his Pensions may hereafter be paid to him as made and provided in such cases.

Sworn to and subscribed before me,

This the ^{6th} day of February 1904.

John R. Wilkinson
Ordinary
Fulton County

~~A. J. Roberts~~
John J. Mills

John R. Wilkinson
Ordinary

Ordinary's Certificate

STATE OF GEORGIA,

COUNTY,

I, Walter H. Miller, Ordinary of said County, certify that I know

the applicant, Walter H. Miller, for pension is the person he represents himself to be and resides in said county. That I also know 27-11-20 the witness swearing to the service; that they are both residents of said county and were duly sworn to by Walter H. Miller 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 16 day of Oct 1923

at Walter H. Miller Ordinary

(SEAL)

County,

NOTES: 1. Before any questions are answered by the Ordinary and those appearing and witnesses in the following words: "You do solemnly swear that you will true and faithfully answer the questions asked you and the evidence you are sworn to give to the best of your knowledge and belief." 2. Additional affidavits may be taken before the Ordinary of the county in which the applicant or witness resides and same be certified to said Ordinary.

No. 6. H. J. 1724

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Fulton
Name W. H. Miller
Company 10th Georgia
Regiment Wofford's
Approved _____

W. H. Miller
Dec 10th 1920
page 231
Comes in under less than
500 months of service
W. H. Miller
J. W. LINDSEY,
Commissioner of Pensions.

Bird Printing Co., State Printers, Atlanta.
10/27/1923

STATE OF GEORGIA.

Sworn under my hand and official seal of office this 16 day of Oct 1972

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.

Approved
Jan. Acta 1920
page 231
Comes in under last than
the mortgage of 1911
J. W. LINSEY.

Syrd Printing Co., State Printers, Atlanta.

10/27/1923

STATE OF GEORGIA.

Fulton COUNTY.

1. What is your name and where do you reside? (Give County and Post-office) -----
M. L. Miles, 141 1/2 Decatur St., Atlanta, Ga.

2. How long and since when have you been a continuous resident citizen of this State?
Over twenty five years. Born and raised here and lived away

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) Dec. 1864, DeKalb County, Ga. Capt. Tom Glenn's Co. of Artillery

5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) From enlistment to discharge

6. When and where was your Company and Regiment surrendered or discharged from the Service?
Atlanta April 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? ----- General surrender

c. For what cause did you leave? -----

d. By whose authority did you leave? -----

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

f. Why did you not return to your command after leave expired? _____

g. In what way were you prevented?

h. What effort did you make to return? _____

i Were you captured during the war? 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

19 day of March 19 23

of Fulton County.

(SEAL)

Questions for Witness as to Service

STATE OF GEORGIA,

Fulton

COUNTY.

Z. T. McKee

of said State and County is hereby presented as a witness in support of the application of M. L. Miles 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? Z. T. McKee, DeKalb Co., Ga.
2. How long and since when have you known M. L. Miles the applicant? All his life
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? Has lived in Atlanta over twenty years
4. When, where and in what Company and Regiment did M. L. Miles enlist during war from 1861 to 1865? (Give date and place.) DeKalb Co., Dec. 1864 Capt. Glenn's Co of Artillery under Gen. Wofford
5. How did you obtain your information of this Service? I was member of same company
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date.) From enlistment to surrender
7. When and where was his command surrendered or discharged (give date and place) Atlanta, Ga. April 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? After surrender. Where was his command when he left it? Atlanta. For what cause did he leave? Surrender. By whose authority did he leave? and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge, tell clearly and specifically I was member of same company and saw him in constant service until the general surrender in April 1865
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? Never left command until after surrender
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

10 day of March 1923.

Charles H. Mason Ordinary
of Fulton County.

(SMAL)

Z. T. McKee

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?
Never left command until after surrender
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
10 day of MARCH 1923. } J. F. Guckler
Charles H. Mason } Ordinary
of Fulton } County.
(SEAL)

STATE OF GEORGIA,

111

COUNTY.)

I, L. A. Jeffries

Ordinary of said County, do certify that I

County of said County, do certify that I know Mrs. Annie Jacobella the applicant for this pension, and that she is the person who represents herself to be, and that she is a bona fide continuing resident of said County and was on the 13 day of Oct 1914

...so know

12/20/1971

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

(SEAL)

11/24/20

Ordinary:

Compass

[illegible]

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 Tucson

Name Annie Jones Miller

Widow of *Prof. F. Ullrich* -

Company _____

Regiment *1st Regt. V. I.*

Approved _____

J. W. LINDSEY,
Commissioner of Pensions

Byrd Printing Co., State Printers, Atlanta.

9/30-1920
10-23-1919

STATE OF GEORGIA.

_____ COUNTY.

I, L. N. Johnson

Ordinary of said County, do certify that

know Mrs. Aminie Jones Kneels the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 13 day of Oct 1914

~~What I~~ also know

~~Witness us to marriage, and I also know~~

-----; that ~~both of the foregoing~~ ^{she was} were duly sworn by me, ^{of Clerk}
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 19 day of Oct 1944

(SEAL.)

Ordinary.

County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."

2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

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 Sevier

Name Anna Lopez Miller

Widow of *Justus Miller*

Company

Regiment *1st Reg. Inf.*

perated

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

...

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Fulton

COUNTY.

Personally before me comes Annie Jones Miller of said County, who, after being duly sworn, says that she is the widow of Burt Olive Miller to whom, in the County of Morgan State of Georgia she was married on the 14th day of April 1882, and that she remained his wife, and resided with him to the date of his death in April 1892, and that she has not since his death remarried. At the time of his death he was a resident of Richmond County, in said State of Georgia, and he was on the Merine Pension Roll of the State and paid a pension of \$6.00 in Richmond County for 1814 per annum, on account of being a soldier in Company D Regiment 1st Ga. Infantry (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 2nd day of September 1894

Sworn to and subscribed before me, this the

13th day of October 1899
Charles B. Morgan Ordinary
of Fulton County.

Annie Jones Miller

(SEAL)

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

STATE OF GEORGIA,

DeKalb

COUNTY.

Personally before me comes Mrs. Margaret P. Morgan 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. Annie Jones Miller who made the foregoing affidavit, is the lawful widow of Burt Olive Miller who died in Richmond County in said State of Georgia on 17th day of December 1894, and that she has not since remarried. That she became the wife of Burt Olive Miller on the 14th day of April 1882, and that she and he had resided together as man and wife continuously since 14th day of April 1882, and that the said Burt Olive Miller was the same man who was on the pension roll of said State from Richmond County when he died.

Sworn to and subscribed before me, this the

13th day of October 1899
James P. George Ordinary
of DeKalb County.

Mrs. Margaret P. Morgan
I hereby certify that I am the witness to the within application; that she was duly sworn by me before signing the foregoing affidavit; that she is truthful and trustworthy and her statements are entitled to full faith and credit;
This Oath. 1899.

(SEAL)

James P. George
Ordinary DeKalb Co., Ga.

affidavit, is the lawful widow of Ant Olive Miller who died in Richmond
County in said State of Georgia on 17th day of December 1914,
and that she has not since remarried. That she became the wife of Ant Olive Miller on
the 17th day of April 1862, and that she and he had resided together as man and
wife continuously since 14th day of April 1868, and that the said Ant Olive Miller was
the same man who was on the pension roll of said State from Richmond
County when he died.

Sworn to and subscribed before me, this the

3 day of October 1919
James R. George Ordinary
of DeKalb County.
(SEAL)

Mrs. Mary A. P. Miller
I hereby certify that I know the witness
to the within application; that she was
duly sworn by me before signing the fore-
going affidavit; that she is truthful
and trustworthy and her statements are
entitled to full faith and credit:
This Oct. 1919
James R. George
Ordinary, DeKalb Co., Ga.

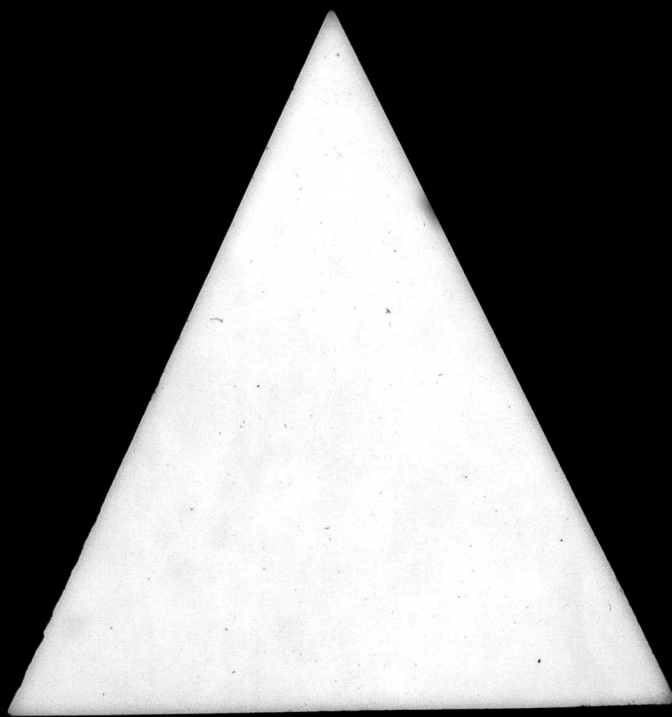
Georgia, DeKalb County.

In person before me, the undersigned officer, came Mrs.
B. O. Miller, who being duly sworn says on oath: That she is now and has been
since her birth a citizen of the State of Georgia, that she is the widow of B. O.
Miller, deceased, late of Richmond County, Georgia. She makes this affidavit to
correct an error arising in regard to her application for pension, that she is
not a resident of said State.

Sworn to and subscribed before me, }
this 30th day of September, 1920. }

James R. George
Ordinary.

Mrs. B. O. Miller



Miller born at Georgia with father

POWER OF ATTORNEY.

STATE OF GEORGIA,

CORRETT.

lawful authority

I, _____ of _____

do hereby and receipt for the pension allowed and request that the same issue to _____

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

Recorded in presence of _____

[L. 83]

Miller, Augustus
Campbell County

No. _____

INDIGENT PENSION.

190 8.

Name Augustus Miller.

County Campbell

Co. "G"- 41st Ga. Regt.

Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

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

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of

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

at

by

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

[L. S.]

Executed in presence of

INDIGENT PENSION.

190 8.

Name AUGUSTUS MILLER.

County Campbell

Ca. "g" - 41st Ga.

Approved 190

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Ordinary will with name of Applicant, Company and Regiment and on back no further signature.

Ord. of Bureau, State Printer, Atlanta, Ga.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Campbell

COUNTY.

AUGUSTUS MILLER

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

1. What is your name and where do you reside? (Give State, County and Postoffice.)
AUGUSTUS MILLER. I live in Campbell Co. Ga. - P.O. address Stonewall Ga.

2. How long and since when have you been a resident of this State? Over 66 years- Since the time of by birth-Jan 27, 1842.

3. When and where were you born? Jan 27, 1842 in Campbell county Ga.

4. When and where and in what company and regiment did you enlist or serve? I enlisted in Jan or Feb 1862 in Carroll Co. Ga. in Company "g" of the 41st Ga. Reg't.

5. How long did you remain in such company and regiment? Over 3 years, or from the time of my enlistment until the Surrender.

6. When and where was your company and regiment surrendered and discharged? It was surrendered April 1865 at Danville Va.

7. Were you present with your company and regiment when it was surrendered? Yes Sir.

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? Present.

9. How much can you earn (gross) per annum by your own exertions or labor? Nothing.

10. What has been your occupation since 1865? Farming

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? 1st & 2nd grounds.

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 been unable to earn a support for 18 months. I have Rheumatism in muscles of both arms to such extent that I can't earn a support

13. What property, real and personal, or income, do you possess, and its gross value? 50 acres of land worth about \$500.00. Have ~~nothing~~ no other 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? About the same as now. Have it yet.

15. In what County did you reside during those years, and what property did you then return for taxation? Campbell Co. Ga. About \$500.00 on an average.

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By my own labor until 18 mo's ago. By rent of land since that time.

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. Explained above

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? Farming.

19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their age and how employed? Yes. Composed of self & wife. She has no Homestead, or other property

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

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

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

Sworn to and subscribed before me this the 8th day of September 190 8. Augustus Miller
Th. S. McFarland Ordinary
of Campbell County.

Every Question MUST Be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Douglas COUNTY.

J. F. Edge

of said State and County, having been presented as a witness in support of the application of Augustus Miller 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. F. Edge Douglas County Ga.
2. Are you acquainted with Augustus Miller, the applicant; if so, how long have you known him? Since the year of 1868.
3. Where does he reside, and how long and since when has he been a resident of this State? Campbell County Ga. Since 1868.
4. When, where and in what company and regiment did he enlist, and how do you know? About 1st of Feb 1862 at Carrollton Ga. Company "G" 41st Ga Regt, I was.
5. Were you a member of the same company and regiment? Yes.
6. How long did he perform regular military duty? Until the Close of the war.
7. When and where was his command surrendered? I lost my left arm at Big Shanty and from that time I was at home and was not present when his command was surrendered. I was not.
8. Were you present when it surrendered? I was not.
9. Was applicant present? I do not know.
10. If he was not present, where was he? I do not know.
- When did he leave his command? He was there when I lost my arm June 10th, 1864.
- By what authority he left? I do not know.
- How do you know all of this? I do not know only as stated above in regard to this question.
11. What property, effects or income has the applicant? (Give your means of knowledge.) Of this I do not know.
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 do not know.
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? I do not know.
14. What is the applicant's occupation and physical condition? Farming, on account of his age he is not physically strong.
15. Is the applicant unable to support himself by labor of any sort; if so, support of his age he is not able to support himself.
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? 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. He is 67 years old and for this alone is fit for no other.
19. Who composes family? What property have they? Children's ages and their earning capacity? Wife, Children all married.
20. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this 25th day of Dec 1901.

J. F. Edge Ordinary.

Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Freeman COUNTY.

Personally came before me

E. P. Avery

and

F. T. Wiggins

both known to me as reputable physicians

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

He is suffering from Rheumatism in left shoulder and arm has been suffering for several years rendering him totally unable to make time for himself.

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

Sworn to and subscribed before me, this 25th day of Dec 1901.

J. F. Edge Ordinary.

F. T. Wiggins M.D.
E. P. Avery M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Freeman COUNTY.

I, Freeman Ordinary, in and for said County, hereby certify that the applicant Augustus Miller resides in said County, and has been a bona fide resident of this State since the 10th day of June 1864, and that the witnesses, viz:

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

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

I further certify that the tax digest of Freeman 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.

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

Witness my hand and seal of office, this 25th day of Dec 1901.

Freeman Ordinary.

of Freeman 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.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Fuller County.

I, Augustus Miller, of said State and County, hereby apply 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) Fuller Miller Reside East Point, Fuller County, Georgia

2. How long and since when have you been a continuous resident citizen of this State? Ever since my birth on Jan. 27, 1842

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Enlisted in January 1, 1862

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Enlisted in Carroll County, Ga. Company 1st. Hottel's Regt.

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Ever since June 1st until June 1st, 1862

6. When and where was your Company and Regiment surrendered or discharged from the Service? I was surrendered with my company on June 1st, 1862, at Vicksburg, Miss.

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. With the command

a. Where was your Command when you left it? Did not leave until after the surrender

b. When did you leave the Command? Jan. 1, 1865, after the surrender

c. For what cause did you leave? Surrendered

d. By whose authority did you leave? By the Jackson Army

e. For how long was your leave granted? In what way? As far as I know this for all time to come. I was paroled

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

g. In what way were you prevented? None

h. What effort did you make to return? None

i. Were you captured during the war? Only at the surrender at Vicksburg

j. If so, when, and where? In what prison were you held and when were you released? As captured as above stated, paroled and after months exchanged

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) 40 acre tract of land, in Carroll County Ga

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? I have sold a large plot of land, about the last of 1908, on the west of 1909, to a party in Carroll County

11. What property 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) My home 1500 sq ft of ground and kitchen furniture. I have no other property or money

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None

13. Are you drawing a pension of any amount from this State or the United States? No

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? I applied for pension in 1908 but it was never presented

Sworn to and subscribed before me, this the 27th day of October 1911, at East Point Fuller County.

Soldier's Application

UNDER ACT 1910.

Confederate

County Fuller

Name Augustus Miller

Company 1st

Regiment 1st

Approved 10/24/11

J. W. JENKINS,

Commissioner of Pensions.

10/24/11

Augustus Miller
Reside East Point, Fuller County, Georgia
Enlisted Jan 1, 1862
Discharged June 1, 1862
Age 1823

Miller, Augustus
Fuller County, Ga
Age 1915
Discharged June 1, 1862

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Spalding County.

I, R. H. Parker of said State and County is hereby presented as a witness in support of the application of Augustus Miller for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? R. H. Parker, Inside at East Point, Ga.

2. How long and since when have you known Augustus Miller the applicant? Since 1862

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? He now resides at East Point, Spalding County, Ga. I have just been sworn to reside in Spalding County, Ga. at East Point, Ga. and I moved from Campbell County, Ga. to Spalding County, Ga. in 1862.

4. When, where and in what Company and Regiment did Augustus Miller enlist during war from 1861 to 1865? (Give date and place) He was in Company B, 4th Va. Heavy Artillery, 1862. He was in the 1st Va. Heavy Artillery, 1865.

5. How did you obtain your information of this Service? From the same Regt. and Mustered into service at the same time he did.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) From 1862 to 1865.

7. When and where was his Command surrendered or discharged (give date and place)? At Appomattox, Va. in 1865.

8. Were you personally present at the Surrender? Yes.

9. If not, where were you and how came you there? I was there and so was Augustus Miller.

10. Was the applicant personally present with his Command at surrender? He was.

11. If not where was he and how came him there? He was there with the 4th Va. Heavy Artillery, and was there when the 4th Va. Heavy Artillery surrendered at Appomattox, Va. in 1865.

12. When did he leave his Command? At the surrender. Where was his Command when he left? At Appomattox, Va.

13. By whose authority did he leave? Paroled. and how long was he granted leave? Paroled on ad hoc status. How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was there with him in the 4th Va. Heavy Artillery, and was there when the 4th Va. Heavy Artillery surrendered at Appomattox, Va. in 1865.

14. In what way was he prevented from returning to his Command? He was left. How do you know? From the same.

15. What effort did he make to return to his Command and how do you know? None.

16. Was applicant captured as a prisoner of war? Yes. If so, when and where? He was captured at Appomattox, Va. in 1865.

17. In what prison was he held? None. and when released? Short time after he was captured at Appomattox, Va. in 1865.

Sworn to and subscribed before me, this the 1st day of April, 1914.

John R. Williamson Ordinary

of Spalding County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Spalding County.

Personally before me comes A. J. McIlroy T. M. Oliver who on oath says that they are freeholders residing in said County and we know Augustus Miller 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.)

Augustus Miller has 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.) He sold a parcel of land in 1909 Campbell County, Ga. to A. J. McIlroy.

2. When and to whom was it sold or given to? Just before Miller's death to A. J. McIlroy.

3. What was the price paid or stated to be paid? 500.

4. What return is the property applicant? He has and has him.

5. What disposition was made of the proceeds of the sale? None.

6. Was the disposition of this property made in good faith and full value? Yes. or was it made to obtain a pension? Yes.

Sworn to and subscribed before me, this the 1st day of April, 1914.

John R. Williamson Ordinary

of Spalding County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Spalding County.

I, John R. Williamson Ordinary of said County, certify that I know the applicant Augustus Miller for Pension is the person he represents himself to be and resides in said County. That I also know R. A. Baker the witness swearing to the service and A. J. McIlroy & T. M. Oliver who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of Augustus Miller shows that he and wife value for tax is in 1908 \$ None for 1909 \$ None for 1910 \$ None for 1911 \$ None for 1912 \$ None for 1913 \$ None

Sworn under my hand and official seal of office this 30th day of Oct, 1914.

John R. Williamson Ordinary.

of Spalding County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth to help you God."

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

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

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

14. What effort did he make to return to his Command and how do you know? left the command until he surrendered

15. Was applicant captured as a prisoner? Yes If so, when and where? in the street
detained In what prison was he held? None and when released?
Short time after he was captured at Vicksburg, Miss

Sworn to and subscribed before me, this the 20th day of October, 1914 P. A. J. Parker
John R. Anderson Ordinary
 of Fulton County.

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

Jan 0
 Feb 30
 Mar 30
 60
 18
 78

TO PAY-
 1930, \$119
 Cig. & C. Tax \$
 TOTAL

Edward L. Parrish
119 179 R

For Fulton County

1933

**Application for Pension
 Due Deceased Pensioner**
 (UNDER ACT 1904)
 (To pay expenses of last illness and funeral)

Thos. H. Jeffries Ordinary
 For Fulton Augustus Miller
 Date of Death March 8th, 1933
 Amount \$ 60.00 + 119

Approved and ordered paid

PAID TO ORDINARY ON THIS CLAIM:
 1933 FUND FROM WHICH PAID
11-11 C.C. 60.00
1-15-35 1930 119.00
 TOTAL 179.00

MAR 11 1934

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 HOWARD L. Carmichael of said County, who, after being sworn, on oath says that he knew Augustus Miller 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 9th day of MARCH 19..33., 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 \$..... 172.00 per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
..... Ordinary
Fulton County

(Seal of Ordinary)

Howard L. Carmichael

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, THOMAS H. Jeffries Ordinary of said County, do certify that I personally know HOWARD L. Carmichael 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 Augustus Miller 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 Dollars (\$20.00) Dollars for January 19..33., 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 20th day of MARCH 19..33.
(Seal of Ordinary)

..... 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 owing 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.

Thos. P. Att
Notary Public, Fulton County Ga.
My Commission Expires Nov. 25, 1917

Thos. P. Latt
Notary Public Fulton County Ga.
My Commission Expires Nov. 28, 1917

Sworn to and subscribed before me this 26 day of
October, 1914.

Thos. E. Stett
Notary Public Fulton County Ga.
My Commission Expires Nov. 26, 1917

Nov. 9th 1933

Received from Thos. E. Jeffries, Ordinary
Sixty & No/100 ----- Dollars
On
Funeral expenses of Augustus Miller
\$ 60.00 *H. L. Carmichael*

A Certificate

STATE OF GEORGIA, County of Fulton

IN RE: Expenses last illness and funeral Augustus Miller

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)

Thos. E. Jeffries

Ordinary

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

Received of Thomas E. Jeffries, Ordinary \$ 119⁰⁰
for the account of Augustus Miller. This amount has
not previously been paid and is now owing to me.

March 8 1935.

Howard L. Carmichael

EAST POINT, GA. March 20, 33. 193

M^r. Augustus Miller, (Deceased)

East Point, Ga.
IN ACCOUNT WITH

Howard L. Carmichael

FUNERAL HOME & PRIVATE AMBULANCE

OFFICE PHONES CALHOUN 1128-1129

1933

March 9. Casket & Box	\$150.00
Embalming	15.00
Suit	12.50
Underwear	1.50

	\$179.00

Georgia, Fulton County.

Personally appeared Howard L. Carmichael,
who swears that the above bill/was for funeral
expenses of Augustus Miller, deceased.

Sworn to and
subscribed before me,
this 20th day of Mch. 1933.

James B. Markert
C.O. Ordinary

NAME **Miller, Augustus.** YEAR **1918.** COUNTY **Fulton.**

WHEN AND WHERE BORN? **January 27, 1842 in Georgia.**

ENLISTED WHEN AND WHERE? **March 4, 1862, Carroll County, Georgia.**

RANK: **Private; Appointed 5th Sergeant October 8, 1862.**

COMPANY AND REGIMENT? **Regt. Ga. Vols. Inf.**
Company G, 41st Georgia Infantry

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE? **Captured at Vicksburg, Miss.**
does not state being in prison or date released.

RELEASED: **Not state.**

WHEN AND WHERE SURRENDERED? **April 1865, Danville, Va.**

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: **R. A. Parker-- -- Same Command-- -- No data.**
J. F. Edge -- -- Same Command-- -- No data.

mt.

BURIED:

WITNESSES:

R. A. Parker--
J. F. Edge --

-- Same Command-- -- No data.
-- Same Command-- -- No data.

mt.

Widow's Application
No. 11112 (WMS)
Widow of John H. Mason

Widow's Application

UNDER ACT 1910.
Who Lost a Husband During War as a
Soldier, Remarried and is Now
a Widow.

County Fulton
Name Emily C. Miller
Soldier Husband's Name John H. Mason
Company B
Regiment 28th Ga Regt
Name of Last Husband C. F. Miller

Approved ROSTER OFFICE

J. W. LINDSEY,
Commissioner of Pensions.
Chas. F. Byrd, State Printer, Atlanta.

11/14-1911