MARRIAGE LICENSE

State	nf	Georgia Fult	nn Clauntu
A +04+	404	CD+ 414 44 664 SJ. 4444	

Person nothorized to Golemnia	age of the superior court. Stratter of the Sence, or ather is. Porized and permitted to join in the
3 .	Catrimony Nr. J.P.F101ds
•	0
ding to the Rites of your Chur	ch, provided there be no lawful cause to obstruct the same, uc this State: and for so doing this shall be your sufficient License.
	OUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD
Given under my Hand and Seal	this 25 day of May, 1866
	Dan'l Pittman Cordinary L. S
ined together in the HOLY BA	1866
te of Georgia, Fulton County.	ordinary's office s. s. **ATLANTA, GA., Nay 4, 1931 192
ARTHUR R. MARBUT	Clerk Court of Ordinary of said County, hereby certify
	Mr. J.P.Fields
and	Miss A.E.Stewart

Jonet of Ordinary Fulton County STATE OF GEORGIA

CERTIFIED COPY OF

MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

Mr. J.P.F1elds

AND

hiss A.F. tewart

Recorde: in Book C

page Ls

Thos.n.Jeffries

Ordinary

Georgia Soldier Roster Commission

LILLIAN MINIDERSON, S SOPHIA MYMBS, Clark

Atlanta, Ga., May 4, 1931.

I, Lillian Henderson, Superintendent Georgia Soldier Roster Commission, hereby certify that the rolls of Co. H, 7th Regiment Georgia Infartry

James K. P. Fields enlisted as a private May 51, 1861. Paroled, Lynchburg, Va., Apr. 13, 1865.

GEORGIA, FULTON COUNTY.

Personally appeared Edward R. McClellan who swears that he was personally acquainted with the first husband of the was Jas. A. Polk fisac.

Eva Ray, also personally acquainted with her second husband Jas. P. Ray, he further swears that the said Jas. K. Polk Field died in Fulton County, Georgia in the year 1888, and that her second husband Jas. P. Ray died in Falton Countys Co Gadsden. Alabama, in the month of April, 1912, and that the said Mrs. Eva Ray is now a widow.

E. R. Dellellan

Sworn to and subscribed before me, this 4th day of May, 1931.

State of Georgia Fulton County

Mrs. Eve My, appearing hefers the Ordinary of Selton County, states that she results that marters Paden and James Cox served in the same demany with her hasband, James E. P. Fields; (00, H. Will Bage, Ga. Vol.

hun Evax Ra

a R. Marlant

GEORGIA, FULTON COUNTY.

Personally appeared Mrs. Bya Ray who makes affidavit that she has made diligent search and has been unable to find any witness to the service of her deceased husband, James K. Polk Field a confederate soldier._

Sworn to and-and-subscribed before me this 2nd day of May, 1931.

POWER OF ATTORNEY.

Ray Jensey C. Fultan &		
INDIGENT PENSION		STATE I, Witness Executes
1898.		of Feering of the President of the Presi
Name of PRay		COUNTY COUNTY or the person allowed and deal this denote of
Approved 1898.		day of
RICHARD JOHNSON, Commissioner of Penators.		by:
WARRANT HANDED TO		hereby 1898.
GEO. W. MARRISON, STATE PRINTER, ATLANTA		-[Las]
2126.48	1	SAC St

STATE OF GEORGIA, Questions for Applicant, STATE OF GEORGIA. Fultru County. to avail himself of the Pension Accapproved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and enswers as follows:

1. What is your name and whate do you reside 2 (give State, County and post office.) Witness my hand and seal this 2. How long and since when have you been a resident of this State? 6-/ years: Executed in presence of 3. When and where were you born? Granvelle so C Moreh 74/5/42 When and where and in what company will regiment did you enlist or serve & Bumpung 3 (36) Grorgia How long did you remain in such company and regiment? houth 6. For how long a period did you discharge regular military Juty 2 3 Justo of 6 Moth 7. When, where and under what circumstances were you discharged from service. In May 8. What is your present occupation? I have with any an alunt of right 9. How much can you earn (gross) per annum by your own exertions or labor? Not at 12000 10. What has been your occupation since 1866? upon the third, state whether you are totally blind and when and where you lost your sight. 13. What property, effects or income do you possess and its gross value? Asia aug 14. What property, effects or income did you possess in 1894, 1895, 1396 and 1897 and what disposition, if any, did you make of same? Thou any 15. In what County did you reside during those years and what property did you then return for taxation? 16. How were you supported during the years 1896 and 1897? By the alle of auly 18. What was your employment during 1896 and 1897? What pay did you receive in each year? Mulleure not any thing T_0 19. Have you a family? If so, who composes such family? Give their means of support? Have they shomestead? JOHNSON homestead? HANDED 20. Are you receiving any passion, if so, what amount and for what disability? Sworn to and subscribed before me this the

QUESTIONS FOR WITNESS.
STATE OF GEORGIA.
Tulbur County.
as a witness in support of the application of
under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:
1. What is your pame and where do you reside? William M Vaniable
2. Are you acquainted with, the applicant, is so
3. Where does he regide, and how long any since when hashie been a resident of this State ?,
for duther co attente the all of his
When, were and in what company and regiment did he enlist, and how do you knows
L. Wore you a member of the same company and regiment?
6. Howards did he perform regular military duty, and what do you know of his service as a Confederate spidler, and the type and circumstances of his discharge from the service?
he with the hill a fine South
What property, effects or income has the applicant? (Give your means of knowledge)
the his no property at all because
8 What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if
may, did be make of same?
9. Has be conveyed away any of his property in the lest three years, if so, what was it and to whom?
What is the applicant's occupation and physical condition?
and has free to long since the
11 Is the applicant unable to support himself by labor of any sort, if so, why?
any noy an alcourt of But Migh
12. Now gas he supported during the years 1896 and 1897?
13. What portion of his support for these two-years was derived from his own labor or income?
Give a full and complete statement of the applicant's physical condition that entitles him to a pension
under the Act of December 15th, 1894?
in the onine
Sworn to and subscribed before me, this
the day of July 1898.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
County.
Personally came before me James , Sorbary Mos and
, out allows to me as a pinable physicians
of and County, who being severally aworn, say on oath that they have examined carefully, rpplicant for pension under the Act of 1894, and after
and personal examination say that his preside physical condition is a filling
he have Thanky Transie Sul James P Ray
and find him almost & Physical Rect
Fifth Remuteren
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
26 day of 1898.) Warden
Dil tree June J. Junta My
Optioary.
ORDINARYS' CERTIFICATE.
STATE OF GEORGIA,
Frelto-County.
I, dinary in and for said County, hereby certify
that the applicant free death of the county, and has
been a bona fide resident of this State since the day of, 186
and that the witnesses, viz.:
are of trust worthy character and that their statements are entitled to full faith and credit.
I further certify that before answering the forgoing questions, the applicant and each witness took
the oath hereon prescribed, and that the full text of the affidavite was read to the applicant and witness
before same was signed.
I further certify that the tax digests ofCounty show that applicant
returned for taxation in his name in 1896
of property, and in 1897Dollars of property.
In my opinion the foregoing claim ismade in good faith.
Witness my hand and seal of office, this day of 1898
() What of continuery
of County.
NOTE.
 Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You have answer make to each of the questions saked of you, and the evidence you shall give will be the whole truth, so help you

POWER OF ATTORNEY.

	GEORGIA	

County.

, hereby authorize

of

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

by

Witness my hand and seal this

day of

1899.

(L. s.)

SOLDIER'S PENSION INDIGENT

POWER OF ATTORNEY.

STATE OF GEORGIA. Juiten , hereby authorize to receive and receipt for the pension allowed; and request that he rames same to his our use.

Received in presence of AUN WILAULAN

No. 0 - 0 C

FOR THOSE ALBEADY

RICHARD JOHNSON

Executed in presence of

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, FULFONCounty.
Personally appears Ser Pay 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 theday of 18= 1; that he is 56 years old and
by eccupation a transfer that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of 2 he often in Company of 36 th Regiment of
that his physical condition is as
Etheria. in Seneral Leleiter
erunia. in Italial Relative
, ,
that his property consists of the fellowing items
to the second se
of the value of Dollars, that by reason of his physical
condit on and poserty he is anable to support himself by he own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. These hypereofore as a spring of FULTON
Thave interest for the year form. I have interesting as a resident of
county been allowed a pension for the year 180 9
Sworn to and subscribed before me, this, the
/ C day of 1899.)
Ordinary.
State of Georgia,
FULTON County.
I. Ordinary of said County,
do certify that I am well acquainted with Saules County,
applicant in the foregoing affidavit, and are well satisfied that the statements made by him
in his said affidavit are true, and I know 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
· · · · ·
Ordinary FULTON County.
Ordinary FULTUN County.

NOTE -- The blank spaces squas be filled.
NOTE -- Affidavit should not be attested before January 1st, 1899.

LAN WITHIAWATO HOWSTOLONE WIFIAMED LEUSIANS

State of Georgia,
Fultor County.
Personally appears
County, State of Georgia, who, being duly sworm, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since theday of 1860; that he is 65 years old
and by occupation a that he enlisted in the military service of the Con-
federate States (or of the State of Late of during the way between the
States, and served for the term of J Wal in Company of the Regimen:
of that his physical condition is as follows: Infirmate, of porcerty
follows: Definantly of percents
/
that his property consists of the following items;
of the value of Dollars 1 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 Fillion.
County, been allowed a pension for the year 1906.
Sworn to and subscribed before me, this the
John R Wilkenson. Ordinary.
John R Wilminson Ordinary.
State of Georgia,
County.
I, John P. Hamara, Ordinary of said County, do certify that I am well acquainted with J. J. A.
1, Fer. 1. Million Million (1997) of seld county,
do certify that I am well acquainted with
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.
Given under my official signature and seal this
day of JAN 21907.
Ju mari
Alla
Aug 1991 Ordinary County
Nova.—The blank spaces must be filled. Nova.—Affidavis should not be attested before January iss, 1907

POWER OF ATTORNEY.

STATE OF GEORGIA,

hereby authorize to receive and receipt for the pension allowed, and request that he remit same to et ____ Witness my hand and seal, this _____day of ______1900. [L. S.]

Executed in presence of

SOLDIER'S PENSION INDIGENT

WARRANT ISSUED

JOHN. W. LINDSET,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, County. Dersonally appears Carrie P. Carry of 10-10N			
personally appears - ancest - 1224 of 10-1019			
County, State of Georgia who being duly swern, 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 1848; that he is 57 years old and			
by occupation a that he enlisted in the military service of the Confed-			
crate States (or of the State of Lie- during the war between the States,			
and served for the term of 3/2 /20 in Company 7, of 30 th Regiment of			
that his physical condition is as			
,			
Contract Cliffe Co			
Smiller Chiller Ci			
· ·			
that his property consists of the following items			
Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1931 and the Acts amendatory thereof, and makes application for the pension to which he is satisfied for the condition.			
county been allowed a peasion for the year 180 5 Sworn to and subscribed before me, this the			
Tronding Ordinary.			
State of Georgia, County			
do certify that i am well acquainted with Courts of Kary the			
do certify that i am well acquainted with Concilo J. Kay the			
applicant in the foregoing affidavit, and gor well satisfied that the statements made by him			
in his said affidavit are true, and I know he is the individual he represents himself to be			
and that he resides in this County.			
Given under my official signature and seal, this /5-			
day of June 1900.			
() To To and any			
Ordinary. County.			

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

POWER OF ATTORNEY. STATE OF GEORGIA In line Qualla ilm hereby authorize al Marin to receive and recorge to the pension allowed and request that he reint same to that A recy at Allowed the 10 1Paul 16 13 1000 Actiness my lead and sea, the day or process SOLDIER'S PENSIO OHN W CINDSEY INDIGENT

STATE OF GEORGIA, to receive and receipt for the pension allowed, and request that he remit same to WITNESS my hand and seal, this was a day of Real. Recuted in the presence of the Bradley (184): COUR SECTION 12%.
(FOR THOSE ALBEADY ENROLLED.)

4 (3111) 41.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

to about

tate of Georgia,

POWER OF ATTORNEY.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
County State of Georgia who being didy sworn, says on oath that he is a bona add evident of said County and State, and has resided in said State continuously exime the lay of 180° 9; that he is a 3° 9 years old a by occupation a late of the Conference States and served has the team of 17° 17° 13° in Company 10° 3° 16° 18° 18° 18° 18° 18° 18° 18° 18° 18° 18	et nd n- be
the file of the file to the to the new me trems.	
Dollars that by reason of instably season of instably conditions and process has an able to support homeoff by his own exertion or labor, and that he receives no penature but the new location applied for larger and desires to participate in the beaters of the Arc. up coved December 15th 15th and the Arcs amerikana thereoff industries a placement of the pension to chief I controlled on the reason 1991. These horse that as a testilent of the pension to chief I controlled on the reason of t	4
STATE OF GEORGIA. 1. County. 1. County. 1. County. 2. County. 2. County. 3. County. 4. County. 4. County. 4. County. 4. County. 4. County. 5. County. 6. County.	1
Ordanary 24 1 County New The black spaces in set be filled	

Norw The blank spaces in 1st be filled Norw Affids, remaind not be attested before January 1st 1901

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Personally appears Fulto:
County, State of Georgia, who, being duly sworn, was on oath that he is a bosa fide civizen
and resident of said County and State, and has resided in said State continuously ever
since the 60 day of 18 ; that he is 60 years old and
by occupation a sure of the Con-
federate States (or of the State of Alargiac) during the war between the
States, and served for the term of July of Company of Shath Regiment
of that his physical condition is as
sollows sufermity and powerty
Manager Man control on
that his property consists of the following items:
of the value of Dollars. I am now earning
by my labor,Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1906. I have heretofore, as a resident of
County, been allowed a pension for the year 1905.
Sworn to and subscribed before me, this the
1906.
Ordinary.
State of Georgia,
County.
I, Grdinary of said County
do certify that am well acquainted with Level Charles.
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this JAN 1 1906
day of
Jan PWil Newson
Affir Four Soal Ordinary County.

Nors.—The blank spaces must be filled.
Nors.—Affidavis should not be attested before January 1st, 1806.

POWER OF ATTORNEY.

STATE OF GEORGIA, County. __hereby authorize_____ to receive and receipt for the peusion allowed and request that he remit same to by_ Witness my hand and seat, this day of _______1902. Executed in presence of

INDIGENT

PENSION	Hank	SSUED SOLD	1903.	NDSEY,	NDED TO 7
SOLDIER'S PENSION	Name (M.C.)	NARRANT ISSUED	fin	JOHN W. LINDSEY,	WARRANT HANDED

POWER OF ATTORNEY.

STATE OF GEO	5)		
	Co.	DUNTY		
	1,		*	hereby authorize
		of		
to receive and re	ceipt for the per	nsıon allowed,	and request	that he remit same to
#4.000 To		at		
by				`
WITNESS m	y hand and seal, th	ats	day of	19 8 5
				(t, s
Executed in	the presence of			

JOHN W LINDSEY.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF	F GEORGIA,)			
Tinit	_Cou	nty.)			
Personally ag		PKO	w	of E	uiton.
	Georgia, who being du			h that he is	a hona fide citizen
and resident of sa	aid County and State	e, and has	resided in	said State	continuously ever
since the	day of		1848; th	at he is	years old and
by occupation a	ange	that he en	listed in t	he military s	service of the Con-
federate States (or States, and served	of the State of for the term of 31/4	le) during the	e wa: between the
of	w term or 22	1			
follows			., 111	at his physic	ral condition is as
-6.12	ulu Killie	ety			No. and a
1 1					
that his property of	ousists of the follow	ing items		5.	
		1446 (114)			
of the value of			Dollars, .1	iet by reaso	n of his physical
that he species we	rty he is unable to st pension but the one	apport him	iself by hi	s own exert	ion or labor, and
1894 and the Acts	res to participate in amendatory thereof, a	nd makes	application	ct, approved	December 15th,
is entitled for the	year 1902. I have h	eretofore a	apprication	a for the pen	iston to which he
	l a pension for the ye				
	subscribed before me,		11	PRan	4
day	الالم ما مرد المام الم	2,1902. S	rdinary.	0 (000	<i>J</i> *
STATE OF G	EORGIA,				
	County.				
I, John St	Withenson.			Ordinara	of said County
do certify that I as	m well acquainted wi	ith Ja	is PC	Rais	of said County,
the applicant in the	foregoing affidavit, a	nd am well	satisfied	that the stat	ements made by
him in his said affid	avit are true, and I k	now he is t	the individ	inal he repre	esents himself to
be and that he resid	es in this County.				
	Given under my offic	rial signatu	re and sea	d, this	
~~	day of		1909.	un	
Affix your seal here		20/	-A	Wils	Ferson:
	Nors The blank spaces m	Ordinary			County.
	Note Affidavit should no	t be attested b	efore Januar	y lat, 1902.	

TAM ULLINGUID HEDDELALADE UPPRARTA LEUZIOUZ STATE OF GEORGIA, Fulton. ___County. Pearsonally appears L.P. Ray County, State of Georgia who, being duly sworts, 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 by occupation a _____, shat he culisted in the military service of the Confederate States (or of the State of Alan Jia) during the war between the States, and served for the term of 3 year in Company I , of 3k th Regiment ; that his physical condition is as that his property consists of the following items of the value of. Dollars. I am new earning, by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of_ County been allowed a pension for the year 1904. Sworn to and subscribed before me, this the STATE OF GEORGIA. Fulton. County 5 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 scal, this

County.

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

POWER OF ATTORNEY.

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

Jehn Alle Kinson

INDIGENT

SOLDIER'S PENSIO

1903.

Southy

Co A Regiment 362

WARRANT ISSUED

JOHN W. ZINDSEY,

Commonwers of Prasins

WARRANT HANDED TVI

Gree BATTLED, MARRANT HANDED TVI

Company MARRANT HANDED TVI

Gree BATTLED, MARRANT HANDED TVI

COMPANY HANDED TVI

COMPA

POWER OF ATTORNEY.

STATE OF LEORGIA,

Paulous County,

Sauces Roughles of Allanta for
to receive and receipt for the pension allowed, and request that he remit same to

ME at Allanta for

WITNESS my hand and seal, this with day of June 1984

Executed in the presence of

A The County of the county of

Executed in the presence of At Minigham 117 Fullingham 117

SOLDIER'S PENSIO

FOR THOSE ALREADY ENROLL

1904

Commissioner of

WARRANT HANDED

Jul.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

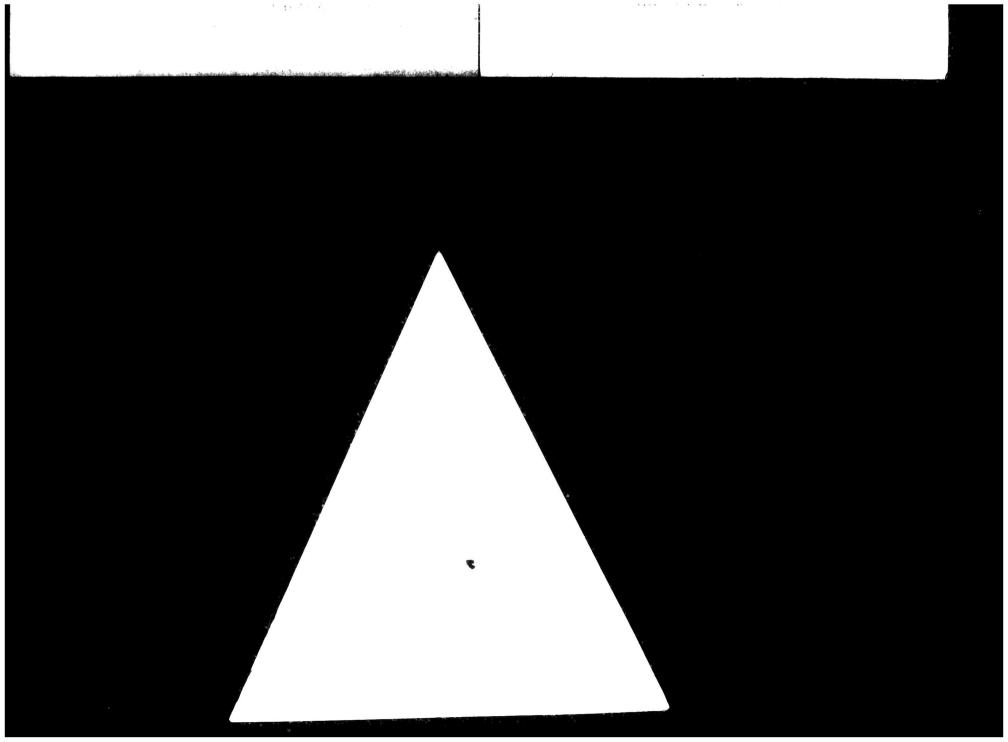
STATE OF GEORGIA,
Fulton. County.)
Personally appears Jas P Ray of 2 11101. County, State of Georgia, who, being duly sworn, says or oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of1848; that he is 60years old and
by occupation a , that he eulisted 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 1/2 pm in Company of 1/2 th Regiment
of that his physical condition is as
follows: J. & 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
Sworn 40 and subscribed before me, this the
John A Wil Assessed Ordinary
STATE OF GEORGIA.
, }
County.
I. do certify that I am well acquainted with Lan Page Officer
the applicant in the foregoing affidavit, and am we!! satisfied that the statements made by
him in his said affidavit are true, and I know 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 30% $\angle 1903$.
John Allel Kinson
Ordinary. County.
Note.—The blank spaces must be filled.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

The state of the s
STATE OF GEORGIA,
Fuittone County.
Personally appears y Pracy Frietten
County, State of Georgia, who, being duly sworn, says on eath that he is a bona hide carren
and resident of said County and State, and his resided in said State continuously ever
since the day of 1846 that he is 60 years old and
by occupation a
federate States for of the State of Au during the war between the
States, and served for the term . 3/2/12 in Company F of 36 th Regiment
of you tot , that his physical condition is as
follows
Inferm?
*
that his property consists of the following tems
Name of the same o
o. the value of Dollars, that by reason of his physical
condition and poverty he is mable to support himself by his own exertion or labor, and
that he receives no pension but the one berein 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 re-
is entitled for the year 1904. I have heretofore as a resident of Accellors
County been allowed a pension for the year 1903 1, 1)
Sworn to and subscribed before me, this the
1904.
firm Million Ordinary
STATE OF GEORGIA,
Fullow County
1 John & Wilkinson Ordinary of said County.
do cortife that I am well acquainted with & Ray
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents his sele-
to be, and that he resides in this County.
Given under my official signature and seed, this
and Jan a. C Philips
John Milkenson
Gordinary Fraitte in County

N. rx. - The blank apoves must be filled.

Syray-Affilding should not be appeared before January 1st. deep



POWER OF ATTORNEY. STATEOF GEORGIA,

	STATE OF THE PROPERTY.	AND SOME AND ADDRESS OF THE PARTY.	topo znameno en	Military Company Company					
Ray W. M.	and the second second				And Million	in the state of th	T. Se producero	A PARESTON	
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(For These Already Enrolled.)	i			o Gep	T				2
No. 696			둈	SERNAIM NI		receive a	ĭ,		
INVALID			Executed in	SHA		and rec			2
SOLDIER'S PENSION.						receipt for			GEORGIA
1897.			preserice of	WHEREOF,		the		County	Ā,
Name J.M. Ray				I have hereunto		pension pa		Ÿ. →	_
County Kullon			_	here 1897.		paid 1	٤,		
Disability Disabled Arm.					Ŋ.	hегеои	E		
Amount, \$ 50,00				E E		and	reby		
2//9 18978				set my hand and seal,		request that	hereby autho.ize		
RICHARD JOHNSON,				Ed.		tha	200		
Commissioner of Pensions.				seal,		t he			
WARRANT HANDED TO				this	1 () () () () () () () () () (remit			
apper			Ţ			t same			
CEO, W. HARRISON, STATE PRINTER, ATLANTA.			· s.]			e to			
No Doto						_			

POWER OF ATTORNEY. STATE OF GEORGIA, County. Ι, hereby authorize. to receive and receipt for the pension paid hereon and request that he remit some to at IN WITNESS WHER! OF, I have hereunto set my hand and seal this day of [1. 8] Executed in presence of SOLDIER'S PENSION INVALID

4,		_hereby authorize	
		of	
		ension paid hereon and request t	
	,		and the remit sauce
8t			
IN WITNES	S WHEREOR	F, I have hereunto set my hand an	d seal, this
day of			,
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Executed	ia presence of		
The second of the second			

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	ION.	12 CM	instinue.

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, Dutton personally appears 4711 Pace of Lattere Councy, State of Georgia who being duly sworn, says on oath that he is a bong fide citizen and resident of said State, and has resided therein continuously ever since the 20 4 day of 1/2 1 that he enlisted in the military service of the Confederate States for of the State of during the war between the States, and served as a Hill cate in Company & of 42 th Regiment of forth Condisconneers, Martin 's Brigade, that whilst engaged in such military service in the State of Liquide on the 24 th day of (2276 1864, he was wounded, injured or diseased as follows The white were source in Deponent desires to participate in the benefits of the Act, approved October 24th 1887, and the acts unendatory thereof, and makes application for the pension to which he is entitled for the year ending Octyber 26th, 1897. I have heretofore under said law as a Sworn to and subscribed before me, this, the county been all used an invalid pension of day of Sec. 1897. | POST OFFILE STATE OF GEORGIA. Section County. do sertify that I am well acquainted with 77.71 Con 2 the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be

Given under my official signature and seal, this

and that he resides in this County.

for applicancs herecolore allowed reasions.
STATE OF GEORGIA.
Fullan County.
14-
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 1865; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a fundad in Company 6, of 2th Regiment
of Novembers, Marins 's Brigade; that whilst engaged
in such military service in the State of Vingues , on the 24 ca day
of Cuig- 186 4, he was wounded, injured or diseased as follows:
Eln right arm looser ust & same
No the second of the contract of the second
The second of th
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
and the acts amendatory thereof, and makes application for the pension to which he is
entitled for the year ending October 26th, 1898. I have heretofore under said law as a
resident of Fullancounty been allowed an invalid pension of
150 20 Dollars, for the year 189-7
Sworn to and subscribed before me, this, the
day of
moran
Norz-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,
Fullan, County.
I, It Ja Jaulely Ordinary of said County,
do certify that I am well acquainted with It. M. May. the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 of1898.

she Harabafara Williams of Danalas .

here } Ordinary . E ... County.

POWER OF ATTORNEY

Fultan a.	6					
(FOR THOSE ALREADY ENROLLED.)	Ex.	ьу	to receive	ŗ.	ì	STATE
No. 22	ĕcuted	Witness my	ve and			E OF
From Jospet 1901	Exécuted in presence of	s my haud	receipt			GEORGIA
SOLDYER'S PENSION	ence of	and	for			RGIA,
1902.		seal, this	the pen		County.	
Name David a Rea		15	pension a		<u>у</u> .	_
Regiment Regiment		d:	allowed	- be		
WARRANT ISSUED		day of	and r	reby a		
1/14 1902			request	hereby authorize		
JOHN W. LINDSEY,			that h			
Ommissions of Presions. WARRANT HANDED TO			he remit			
Gel, W. Barried, Suto Frinter, Atlanta.	<u> </u>	1902	t same			
	iv		8			

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Personali	Fulton. County.	Fulton.
	of Georgia, who being duly sworn, says on o	
and resident	of said County and State, and has resided	in said State continuously ever
since the 2	O day of face 1843;	that he is weere old and
by occupation	a Ham analler that he enlisted in	the military service of the Con-
	or of the State of	
States, and ser	rved for the term of 4 yr in Com	neny & of 10 th Besiment
of Ele		that his physical and it is
follows:	,	that his physical condition is as
1	award disability	
that his proper	rty consists of the following items.	
		The second secon
of the value of	Della-	41-41-41-41-41-41-41-41-41-41-41-41-41-4
	poverty he is unable to support himself by	that by reason of his physical
that he receive	es no pension but the one herein applied for.	his own exertion or ignor, and
Deponent	desires to participate in the benefits of the	Act approved December 15th
1894, and the	desires to participate in the benefits of the Acts amendatory thereof, and makes applicate	Act, approved December 15th,
1894, and the A	Acts amendatory thereof, and makes applicat	ion for the pension to which he
1894, and the A	Acts amendatory thereof, and makes applicat the year 1902. I have heretofore as a resi	ion for the pension to which he
1894, and the A is entitled for county been all	Acts amendatory thereof, and makes applicat	ion for the pension to which he
1894, and the A is entitled for county been all	Acts amendatory thereof, and makes applicate the year 1902. I have heretofore as a resilowed a pension for the year 1 1901	ion for the pension to which he
1894, and the A is entitled for county been all	Acts amendatory thereof, and makes applicate the year 1902. I have heretofore as a resilowed a pension for the year 1 1901 and subscribed before me, this the	ion for the pension to which he dent of Justin
1894, and the A is entitled for county been all Special Specia	Acts amendatory thereof, and makes applicate the year 1902. I have heretofore as a resilowed a pension for the year 1 1901 and subscribed before me, this the Ordinary	ion for the pension to which he dent of Justin
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is entitled for county been all STATE OF	Acts amendatory thereof, and makes applicate the year 1902. I have heretofore as a residuwed a pension for the year 1 1901 and subscribed before me, this the condition of the year 1 1901. GEORGIA, Fulton, County. I am well acquainted with the foregoing affidavit, and am well satisfies	on for the pension to which he dent of Sussian County, Ordinary of said County,
is entitled for county been all STATE OF	Acts amendatory thereof, and makes applicate the year 1902. I have heretofore as a residuwed a pension for the year 1 1901. and subscribed before me, this the condition of the year of year of the year of y	on for the pension to which he dent of Sussian County, Ordinary of said County,
is entitled for county been all STATE OF	Acts amendatory thereof, and makes applicate the year 1902. I have heretofore as a resilowed a pension for the year 1 1901 and subscribed before me, this the part of the year	Ordinary of said County, ed that the statements made by vidual he represents himself to
state of the applicant in him in his said	Acts amendatory thereof, and makes applicate the year 1902. I have heretofore as a resilowed a pension for the year 1 1901 and subscribed before me, this the ordinary of GEORGIA, Filton, County. I am well acquainted with nother foregoing affidavit, and am well satisfied affidavit are true, and I know he is the indirections in this County. Given under my official signature and	Ordinary of said County, ed that the statements made by vidual he represents himself to
state of the applicant in him in his said	Acts amendatory thereof, and makes applicate the year 1902. I have heretofore as a resilowed a pension for the year 1 1901 and subscribed before me, this the part of the year	Ordinary of said County, ed that the statements made by vidual he represents himself to
STATE OF	Acts amendatory thereof, and makes applicate the year 1902. I have heretofore as a resilowed a pension for the year 1 1901 and subscribed before me, this the ordinary of GEORGIA, Filton, County. I am well acquainted with nother foregoing affidavit, and am well satisfied affidavit are true, and I know he is the indirections in this County. Given under my official signature and	Ordinary of said County, ed that the statements made by vidual he represents himself to

MOTE. - AMIGEVIPARIOUS BOUDE Ettested before January 1st, 190

Dialo de Morano Janes Courte.

Di Molial D. Horano, brokinage of sant County, do durchy entity.

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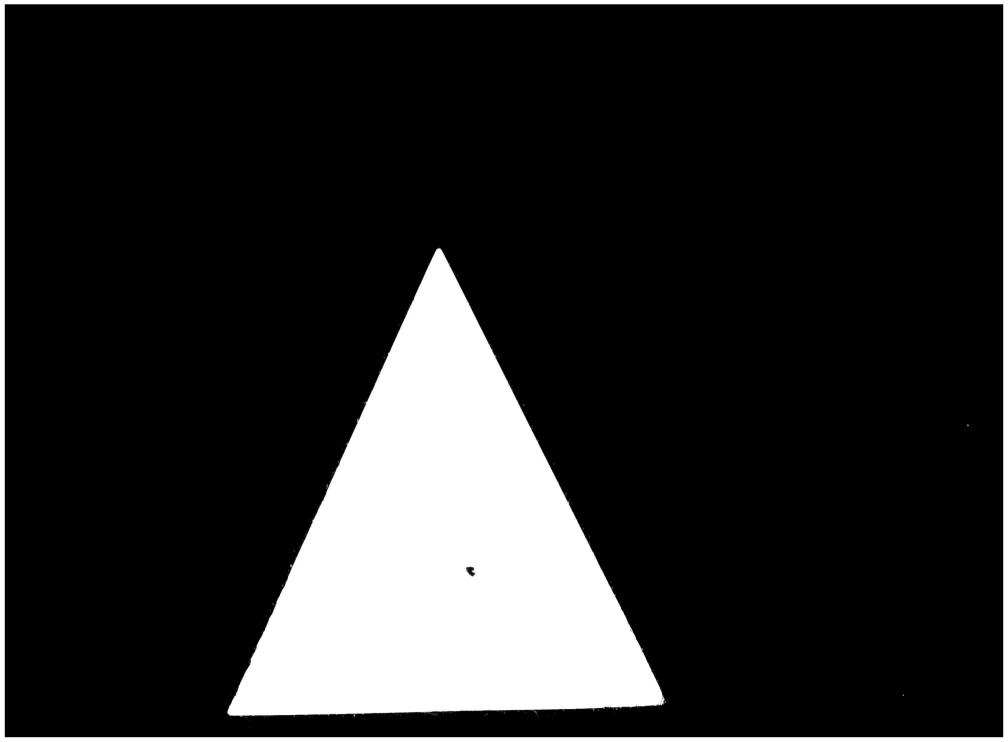
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In order to avoid unnecessary defacts to apphicants, and to enable all parties interested to understand the law granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the partnersh provided, the toldwarp suggestions are submitted.

If an applicant has been wounded the rescription of the sound should be carefully and fally set forth by applicant can be passed on an observe controlled the system of the disability. If applicant can be passed on the sound of the sounds to the service.

If an applicant can be provided to the colors of the state of the service of the disease should be given tracing its shoulding to defect the system of the disease should be given tracing its shoulding and controlled to the service.

There is no qualification to the clause of the data in reference to the arm of legicial to a system of the words above quoted, to say that an arm is "substantially acless for out not pursuits for all purposes be "substantially and essentially useless."

It is more difficult to say that unless the injury is such as to require the constraint use of crutch or such as were most seriously and essentially useless.

It is more difficult to say when a run is "substantially and essentially useless."

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It is more difficult to a veter understanding and essentially useless.

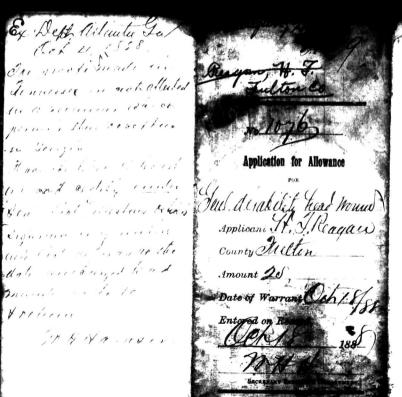
It is more difficult to a veter understanding and essentially useless.

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It is more difficult to a veter understanding and essentially useless.

It is more difficult to a veter understanding and because the contract to a distance of the surface of application where the surface of the public of the physicians



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MANA MAINE

NOTES.

In order an avoid innecessary 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 toaching the payments provided, the following suggestions are; submitted.

the 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 doublity. If applicant cloims disability from the case contracted in the service, a full and carefully stated history of the disease should be given, training the disability by positive proofs to the service.

2. The law makes no allow since for a cuppled hand, nor for a crippled foot, nor for an arm or leg, unless the lam or leg has been rendered subsantially and as enough useless.

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

4. If the application is act a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the mjury is such as to require the constant use of crytich or

such, that the leg is not esubstantially and essentially useless."

strong one, however, and the injury must be ery severe, and the aria in a badly damaged countion, to entitle one to the ariovariet members of arthe. At —The Legislature intended to limit these parametrs to such a were most seriously includes individual. In the future they will doubtless provide for all who were badly approach but the present any coes not reach many worthy, needy cases. It was inaugurated as in experiment, if objects any coes not reach many worthy, needy cases. It was inaugurated as in experiment, if objects a will naturally be once unpopular and be repealed—if properly administrately do to great good.

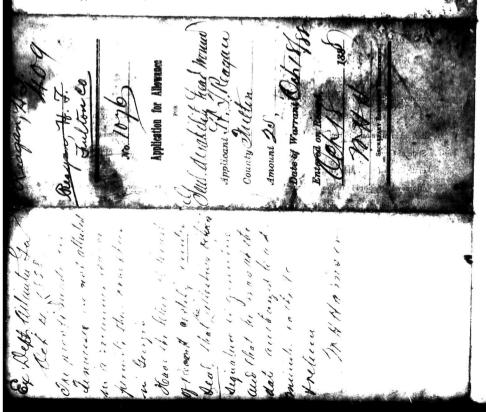
6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under each before another, and the proofs must show that the amendments

have been duly sworn to

7. The Ordinaries know the condition of applicants better than the Governor or his Secretaries, and the varies consistly requested so discourage any man from making application unless he is entitled under the law. Eundreds of applications have been to covered and disablewed by sure they were not disabled so as to confide them under the law. The entails much unnecessary work upon this office; it causes delays in making payments to those who are contribed, it puts parties to expense and trouble, and in the end causes bitter disappointment and mortineation.

Exery application reast be certified by the Ordinary of the country of the residence of the applicant.
 The certificate of any other will not be use veil in any case.

The Ordinaries of the severe countercare specially requested to call the ittention of the physicians and applicants to these points.



STATE OF GEORGIA:
confect Company.
PERSONALLY appears . I Acadam of Lulton country
State of Georgia, who, being duly sworn, says on 94th that he is a high, pide prizer, and resident of said
State, and has been such since the day of Schemes 1877; that he
enlisted in the military service of the Confederate States for of the State of . Lucillace
during the war between the states, and serve as a Break & County and to Company B. if
whilst engaged insuch cultury service at the present of the con-
the State of Infusea on the 20 day of Hay 186), he was
wounded as tollows full Entering an wich above
Symphasis futes bassure through the left from
suder let hip out semment deather
Lip gound toped Al heafin is desalled from all
manual later.
Deponent descres to paracapate in the 3-metas of the Astropproved October 24, 1897, and makes
application for the allocance to wmch he is counted the tennels. Sworn to and subscribely before fine the thin.
24 day of truben so IV. I long and
Allan Packer Hours Public
Norse. State fully nature of would a conferred because with a cases the disability, and explain particularly ton extent of the disability.
Commissioned Officer's Affidavit.
See Allandii
STATE OF GEORGIA.
Coffee (ounty)
Price on the country of the country
of state of Courge, who, being duly sworn, mas that he was
a commissioned office for Company B of Regiment of Court all
Volunteers, and that deponent knows . La dean , and that he received the wounds
(or contracted the disease) in the military service, as stated in this foregoing affidavit, and that wounds
(or discussion and the basis of the state of
Figure Deprenant frether total and A H T A
citizen of bissistate and resides in
de Count
11:0 . M. C. L. L. C.
The foregoing affidavis, changed to suit the facts, should be made by a summissioned officer of the Company of Regiment. If the spheavit of such an officer is not obtainable, the following affidavit of these responsible critizens should be formished.
Proprie to Traberched before are this
the 21th Day Josh Light
Man Tark & f
WI CIELL WILLIAM TO A

PERSONALLY came	W 40 10 10 10 10 10 10 10 10 10 10 10 10 10	
citizens of		county, in said State
who, being duly sworn, say th	hat they are acquainted with	
	and know that he re	eceived the wounds (or contracted the
disease) in the military service		ng affidavit; that said wounds (or dis
ease) permanently disables up	oplicant, as stated by aim; that said	applicant is a bona fide citizen of this
	* county and w	0 10 1
State, and resides in	ce unity, and w	we are well satisfied that all the state-
10.20 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000 10.000		ve are well satisfied that all the state-
State, and resides in ments in his affidavit are true. Sworn to and subscribed		ve are well satisfied that all the state-
ments in his affidavit are true.		ce are well satisfied that all the state-

STATE OF GEORGIA. Freedon Personally comes before me Tr. L. Le alborn Ordinary of said county, M. Mb. Comte and . E. Coelin , both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined Hop V. Reason and after such examination say that the applicant has been injured as follows By Minnie Ball Entering Meanand above the Symphysis Phibis ranging in the direction of the left Grain, Lodging near the hip Quint Rould Rendering Locomblion Sifficult. alla a Wound in The Forehead by a Price of Thell Coursing on Indentific The Outer take of the Scall upon the inen thereby fro ducing to his by - and in over of min he is worke Sworn to and subscribed before me, this) day of Celo Gra 1888 DY. L. Colhanner

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.

County. I. Ordinary of said county, do certify that I am well acquainted with The J. Reserved in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and ! know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief. I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said county, and that the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this day of County. POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all men by these presents, That I 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 storney 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		
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affidavit are time, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses are persons of respectability, and that their statements are worthy of full credit and belief. I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said county, and that the said affidavits and signatures thereto are genuine. Given under my official signature and seal, this day of Ordinary County. POWER OF ATTORNEY. STATE OF GEORGIA, County. Know all men by, these presents, That I of county, in said State, do hereby appoint of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military 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	•	- the
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In witness whereof I have hereunto set my hand and seal, this day of	ettorney to receipt in my name for any Warrant that many his	riereby authorizing my said
In witness whereof I have hereunte set my hand and seal, this		the Governor, or for any sum of
day of	In witness whereof I have harvente and aforesaid.	* * * * * * * * * * * * * * * * * * *
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	Palanadia	(1.8)

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STATE OF GEORGIA.

Surface County.

State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State and has been such continuously since the

State of Georgia, who, being duly sworn, says on oath that lie is a bona fide citizen and resident of said State, and has been such continuously since the day of resident of the State, and has been such continuously since the day of the State, and is company of the States, and in Company of the Regiment of Territories as a devilence of the battle of the States of the war between the States, and in Company of the Regiment of Territories of the war between the States, and in Company of the Regiment of Territories of the Wallette of the State of th

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the Act amendatory thereof, approved Dec. 24, 1888, and makes application for the allowance to which he is entitled for the year ending Oct. 25, 1389

Sworn to and subscribed before me, this Leicel, H.T. May our.
the b day of Felmony 1889

V. L. Le cellonne

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

STATE OF GEORGIA,

Friche County.

PRESONALLY comes before me

The Country of Said country who, being severally sworn, say on oath that they have carefully examined

The applicant has been injured as follows: Dy prince the such examination say that the applicant has been injured as follows: Dy prince the free that the foreign that the free that the first by producing that the fits, felso by since for the first by producing the left grown free back the first by forethe carry the left grown free back that felse the first by from the first by forethe carry the left grown free back that felse the fits felse the fits felse the fits felse the fits felse that the fitse felse the fitse felse that the fitse felse that the fitse felse fe

Norm.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting this court

MOTES

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

2 The law makes no allowance for an arm or leg, onless the arm or leg has been ren-

Aered substanticlly and essentially useless.

3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of Fig. 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 construction of the Act, and the words above quoted, to say that unless the injury is such as to require the construction of the Act, and the words above quoted, to say that unless the injury is such as to require the con-

stant use of crutch or stick, that the leg is not "substantially and essentially useless."

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

number, and points where amputated

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

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

STATE OF GEORGIA.

County.

County.

Ordinary of said county,

do certify that I am well acquainted with No. D. Regan, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses to wit: Will it is and and 7.6. bullion are persons of respectability and that their statements are worthy of full credit and belief before whom the foregoing affidavits were made and power of attorney was signed, is a, of said county, and that the said affidavits and signatures thereto are genuine. Given under my afficial signature and seal this. Co. day of February 1889 Ordinary truct .-: County POWER OF ATTORNEY STATE OF GEORGIA. KNOW ALL MEN BY THESE PRESENTS. That I county, in said State, do hereby appoint my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military serrice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to beceipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. In witness whereof I have bereunto set my hand and seal, this

dif of him hand Executed in the presence of us:

Send money to me as follows by

County, Georgia.

STATE OF GEORGIA,

do certify that I am well acquainted with 26. I 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 affidevits were made and power of attorney was signed, is a

of said county, and the said affidevits and

signatures thereto are genuine.

Given under my official signature and seal, this & day of Dresses 1800

Ordinary. Frucen

County.

For Applicants Accelorate Allowed Pensions.

At 3 GFORGIA 4

State & Permier.

Coffee Common of Jan 12 pools con the state of the history and the second of the second of the second of the control of the

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	For Applicants Heretofore Allowed Pensions.	
	STATE OF GEORGIA,	
	Flaction County.	
i ie	PERSONALLY appears Hod James Stage of July	
	State of Georgia, who, being duly sworn, says on oath that he is a bong fide citizen and	
	resident of said State, and has been such continually since the day of	
	1862; that he enlisted in the military service of the Con-	
	federate States (er of the State of) during the war between the States, and served as a in Company B, of Like Regiment	
	in such military service, at the battle of Man hard service. In the State	
	of bal Da on the 219 1156 3 16 2 2 hay aly 183 in the States	
	wounded as follows: at all at span & ac while in the	
	Cepter of the forehand; are severiline	
	The left green that bally line at-	
	an recounty their mondace	
	The colony the coloner manual	_
	A total and of the	
	Deponent desires to perficipate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowence to which he is	
	chitted for sile year endings October 20, 1800. I have heretofore been allowed a pension	
	Sworn to and subscribed before me, this the	
	7	
	day of tilling 1891 / 1 1 Conference	
	Note.—State fully nature of round of impractice of disease which causes the disability, and applain particularly the extent of the disability.	
	POWER OF ATTORNEY,	
	STATE OF GEORGIA	
	County.	
	KNOW ALL MEN BY THESE PRESENTS, 'That I,	
	of	
	county, in said State, do hereby appoint	
	of my true afid 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 Material 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.	
	ner IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	
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·	Executed in the presence of us:	
Às.	On California in the presence of us:	
, i	Land to the second of the seco	
V.	- Complete from	
TV.	Stad money to me as follows, by	j.

P.O.

County, Georgia.

Audited Feb. 6 1889.

UM STM GLAT

OMETRICAL SPECIES AND A STATE OF THE STATE OF TH

Tulton

Maimed Soldiers.

Voucher No. 121

Amouni \$ 50,

Paid to H. J. Reagan

For General dis-

by 6

1889

Included in Warrant No
issued to Preasurer

1889.

WARRANT CLERK

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

applicant

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Audited

OMPTROLLER-GENERAL

Maimed Soldiers.

Voucher No 141

Amount &

Part to St. J. Reagan

For Desables by

Head would

Included in warrant No.

issued to Treasurer

12

VARRANT CLERK

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

applie and

STATE OF, GEORGIA, EXECUTIVE DEPARTMENT. Manta, Ca. Stehy le 1809
Mr. A. J. Reagan of the County of Mellin having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
Dog 29 1888, and the same having been allowed for
He is entitled to receive the sum of Dollars
for such disability the same being the abrance due for the far 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 Governor.
By the Governor

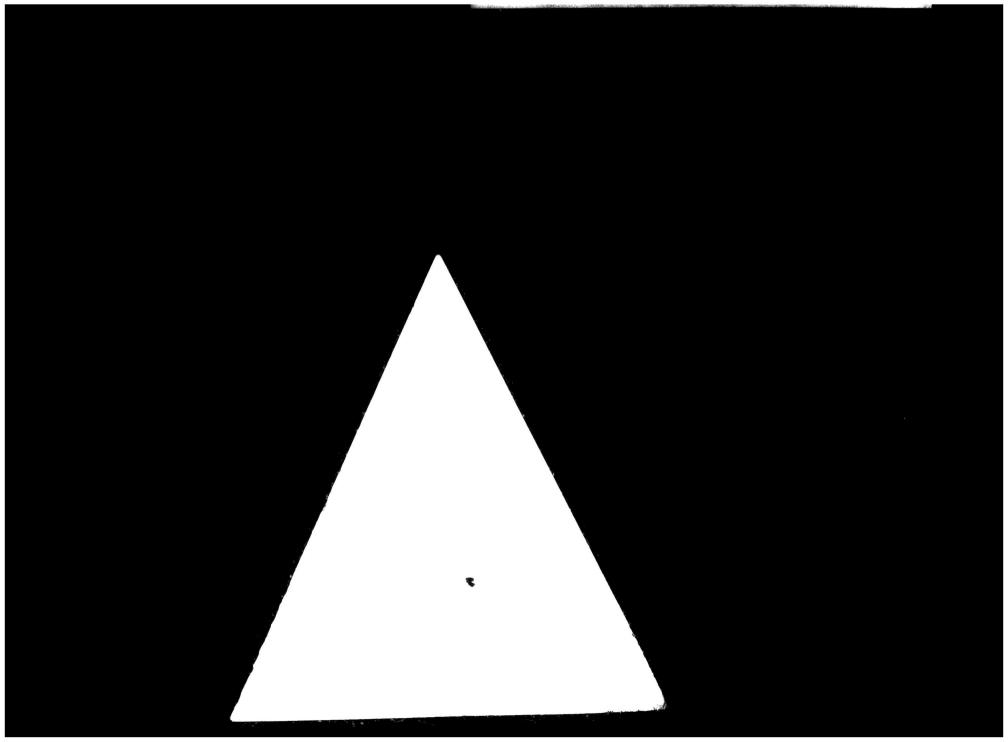
Per above voucher, this 6 of Reby 1889.

CLERK EXECUTIVE DEPARTMENT.

Dollars.

No. 121

Allanta, Ba., Fleby 4 1090 STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Aultin having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Act, approved, Dec. 24, 1888, and the same having been examined and allowed for He is entitled to receive the same of This to of Dollars or such disability, the same Bing the Ill waree due for the year ending October 24, 18 90 The Treasurer will pay the sand held his receipt on this voucher, and return same c Executive Department for warrant. By the Governor. WHatarrison CLERK EXECUTIVE DEPARTMENT , 5000 RECEIVED OF STATE TREASURER, R. U. HARDEMAN, Dollars, H J. Reagan, per above voucher, this



STATE OF GEORGIA,	
Aguillar County.	STATE OF GEORGIA.
John, C. D's of Or Cee , of said State and County, having been presented	Station County. 20
an a witness in support of the application of A It a files a Hill and the	Personally came before me.
under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the	Tersonally came before me and
following questions, decrease and answers as follows:	Mudeulian , both known to me as reputable physicians
1. What is your name and where do you reside ! Tother, C. Brownles .	of caid county, who being severally sworn, say on each that 'hey have examined carefully & April 1
Suctor Course say near Exposition Wills	W SR
2. Are you a quainted with Displies 2. Teagass, the applicant, is of	, applicant for pension under the Ac of 1894, and after
the applicant, is of	such personal examination say that his precise physical condition is as follows:
how long tave you known him? Or aim since begginging of war	- The finesh
3. Where does he reside, and how long has he been a resident of this State?	that the applicant stephen & Reagan has
die Gentata Guidelia Singe 1861 or 1862 tour	Edillibra The The State of the
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you	Epilepsy , Wk also find that he has Elepective
know this " & Karow Thist he desired in Confederate aring	Tilling use boath igex
I know it be cause be was in some Beginnent with me	
	We further say on oath that the physical condition of applicant renders him unable to labor at any
5. When where and in what company and regiment did he enlist? Bulisteded in	work or calling sufficient to earn a support for himself, and that we have no interest in said pension being
, 862, Corregion Sew Ton Co Las 42 Ga Kegiment	
6. Were you a member of the same company and regiment? Of The Same Hagin at	allowed.
7. How long did he perform regular military duty, and what do you know of his service as a Confed-	Sworn to and subscribed before me, this
erate soluier, and the time and circumstances of his discharge from the service? Heart 1862	the S. Aday of 1 1897.)
trucke The close of the main 1965 - no short	1 :
three years, was discharged when war closed	Ordinary.
10/4041	AND WALL OF THE PARTY OF THE PA
8. Want property, effects or income has the applicant? (Give your means of knowledge.)	ORDINARY'S CERTIFICATE.
Aou whelever of Brown fine well and	ORDINARI S CERTIFICATE.
What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if	PROPER STATE OF THE PARTY OF TH
What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if	STATE OF GEORGIA,
any did be make of same " colored and the make of same and the make of sa	County.
	I, Milliand , Ordinary in and for said County, hereby certify that
What is the applicant's occupation and physicial condition? He has suone	, Ordinary in and for said County, hereby certify that
	the applicant J D Recay care resides in said County, and was a bona
in Shokmaking.	fide resident of this State on the first day of January, 1894, and that the witnesses, viz
	of le Brunder d' D'Revoser 777: 1 Som Kam
Is the applicant unable to support himself by labor of any sort, if so why?	are of trustworthy character and that their statements are entitled to full faith and credit.
made is Support himself by labor of	I further certify that before answering the foregoing questions, the applicant and each witness took
Boy Jose, All is nearly blind and less	the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses
2. How was he supported during the years 1800 and 1896?	before same was signed.
the state of the s	I further certify that the can digests of County show that applicant
3. What porsion of his support for these two years was derived from his own labor or income?	The state of the s
4. Give e full and complete statement of the applicant's physical condition that entitles him to a pension	
Give a nun and complete statement of the applicant's physical condition that entitles him to a penalon	of property, and in 1896, 72 dollars of property.
nder the Act of December 15th, 1894 . Alroald Day from hix man-	In my opinion the foregoing clain ismade in good faith.
signitedness, and low State of health and from	Witness my hand and seal of office, this & day of day of 1897.
Laving Tide he is not able to most to earn a living	Willfrelay Ordinary
5. What interest have you in the recovery of a pension by this applicant? I have none	
Sworn to and subscribed before me, this	of County.
day of January 1897.	More.
	Before any questions are answered, the Ordinary shall away applicant and the missing to the control of the cont
With a land Ordinary	Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall stose answers make to each of the questions asked of you and the evidence you shall give will be the whole truth, so help you God." Additional addesvits may be attached if black spaces are insufficient.

I,	t same (
receive and receipt for the pension allowed, and request that he reminant	t same (
Witness my hand and seal, thisday of	
Witness my hand and seal, thisday of	_1900.
Witness my hand and seal, thisday of	
	ſL. S
0 0 · · · · · · · · · · · · · ·	

SOLDIER'S PENSION,

INDIGENT

CORE SEC. 7264 (Fer These Already Enrolled.)

NO. 1/3

Name & Allagur

1900.

JOHN. W. LINDSEY, Commissions of Po.

ANT HANDED TO

WARRANT ISSUED

For Applicants Heretofore Allowed Pensions.

	STATE OF GEORGIA, FULTON County
	personally appeared S. Cagin of FULTON
	County, State of Georgia, who being duly sworn, says on oath that he is a bone fide citizen
	and resident of said County and State, and has resided in said State continuously ever
:	since theday of1880; that he is 63 years old and
1	by occupation a Muselland; that he enlisted in the military service of the Confed-
•	erate States (or of the State of) during the war between the States,
ć	and served for the term of 4 flacs in Company of the Regiment of
	Markey of Luf. 4 Brig ; that his physical condition is as
f	follows:
	- General de Celett
	* · · · ·
	And the second s
	hat his property consists of the following items.
	Commission of the Commission o
	The state of the s
	t the value of Dollars, that by reason of his physical
9	ondition and poverty he is unable to support himself by his own exertion or labor, and
1	nat he receives no pension but the one herein applied for.
•	Deponent desires to participate in the benefits of the Act, approved December 15th,
•	394, and the Acts amendatory thereof, and makes application for the pension to which he
,	entitled for the year 1900. I have heretofore as a resident of
	Sworn to and subscribed before me, this, the
	1 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	15 day of Jany 1900. S mak
	Ordinary.
•	
)	tate of Georgia,
	FULTON County.
	I, W. H. HULSEY, Ordinary of said County.
)	certify that I am mall asserting the second
	plicant in the foregoing affidavit; and am well satisfied that the statements made by him
	his said affidavit are true, and I know he is the individual he represents himself to be
ė	d that he resides in this County.
	Given under ne official signature and seal, this
	day of Jany 1000.
	The state of the s

Norn, -Affdarli should not be abtested before January Lat. 190

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

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

[L. S.]

Executed in presence of

INDIGENT SOLDIER'S PENSION

WARRANT ISSUED

// 2

RICHARD JOHNSON,

COMMUNICATION

WARRANT HANDED T.

POWER OF ATTORNEY.

STATE	OF	GEORGI
0 2 . 1 2 2	3.	GEORGIA

County.

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

__at __

Witness my hand and seal, this day of ___1902.

Executed in presence of

LDIER'S PENSIO

(FOR THOSE ALREADY ENROLLED.

Regiment H

WAERANT HANDED TO

JOHN W. LINDSEY,

1/2 : 1/4

For Applicants Heretotore Allowed Pensions.

. 11
STATE OF GEORGIA,
Fuctor County.
Personally appears S. Reagan of Fulton
County, State of Georgia, who being duly sworn, says or oath that he is a honogide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 1840; that he is years old and
by occupation a that he enlisted in the military service of the Confed-
crate States (or of the State of Scorgia) during the war between the States,
and served for the term of files in Company of of #2 th Regiment of
that his physical condition is as
General Hehility_
that his property consists of the following items
,
Dollars that by reason of his physical
Dollars, that by reason of his physical combiner and poverty he is unable to support himself by his own execution 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,
1864, and the acts amendatory thereof, and makes application for the pension to which he
s entitled for the year 1898. I have heretofore as a resident of Full lan
county been allowed a pension for the year 189 7 101/2 2 22 200
Sworn to and subscribed before me, this, the
1-2 tay of 4 cm 1898. } -
70100
Ordinary,
State of Georgia,
Fullon, County.
Mario Lava
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 / 2
day of feet 1898.
AME
on ber.
Ordinary Zulla County.
NorkThe blank spaces must be filled.
CONTRACTOR OF THE STATE OF THE

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
ulton. County.)
Personally appears & D Vrague of witon.
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide civizen
and resident of said County and State, and has resided in said State continuously ever
since theday of1849; that he isyears old and
by occupation athat 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 the in Company To, of the Regiment
of ful Infinite ; that his physical condition is as
follows
youl debitity
that his property consists of the following items.
remaining remain
of the value of Dollars that by reason of his physical
of the value ofDollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1902. I have heretofore as a resident of
county been allowed a pension for the year 190/ P x ()
Sworn to and subscribed before me, this the
day of JAN 13 1902 1802
O. Del Belkenson Ordinary.
\ million \ mill
STATE OF GEORGIA,
County.
I, Ordinary of said County,
do certify that I am well acquainted with A NE again
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and eeal, this
day of 1902 1902
{ Amx } .
(here)
Norn—The blank spaces great be filled.

STATE OF GEORGIA,

County.

hereby authorize

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

by

For Those Already Enrolled.

478

Witness my hand and seal, this

day of

1901.

1. 5.

Executed in presence of

SOLDIER'S PENSION INDIGENT

JOHN W. LINDSEY. WARRANT HANDED TO

POWER OF ATTORNEY.

STATE OF GEORGIA,	COUNTY.	
	, here	by authorize
manuscus actions is not a minute as the parts affecting an instrumental actions.		are order over
to receive and receipt for the	pension allowed, and request that he re	mit same to
The state of the s	at	
by		
WITNESS my hand and sea	d, thisday of	1907
1		[1 8.]
Executed in presence of	of	

INDIGENT

Possenskuster 196. (Før Those Already En

JOHN W. LINDSEY

ror applicants heretoiore allowed Pensions.

STATE OF GEORGIA,
Factore County)
Dersonally appears & Nagin of Fullon
County, State of Georgia, who being duty sworn, says on eath 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
by occupation a day of that he enlisted in the military service of the Con-
federate States (or of the State of
States, and served for the term of Tytan in Company to of The Regiment
follows Grunal deviloty
that his property consists of the following items
of the state of Dollars that hy record of his hair l
Or the value of Dollars, that by reason or his physical condition and poverty he is anable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied fo
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
es entitled for the year 1901. I have heretofore as a resident of Freeltone commy been allowed a pension for the year 1900.
5, it day of ferror 1901
John A Well Kingon Ordinary
STATE OF GEORGIA,
Justion county.
ohn K Wilkings on Ordinary of said County.
do certify that I am well acquinted with a not be again the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the judividual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
0
day of John A Wilking 22
day of John M Wilkinson. Opinary Futton County.
Opdimity County.
North Affidavit should not be attested before January 1st, 1901

of Georgia. County. Personally appears_ County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever day of 18W; that he is by years old Athat he enlisted in the military service of the Confederate States (or of the State of Slargia) during the war between the States, and served for the term of John in Company 1, of the Regiment that his property consists of the following items: of the value of by my labor.____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or 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 John D. Marines Ordinary State of Georgia, Fulton. County. Ordinary of said County, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this_ John R. Willinson. The blank spaces must be filled.

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

CUNICAGA VERTURAL DINOIONA

STATE OF GEORGIA,)	
County	<i>,</i> . }	
I,	_hereby authorize	
	of	
to receive and receipt for the pension	allowed and request that he remit	same to
	at	-
by	v observe	
Witness my hand and seal, this	day of	1903.
Executed in presence of		[L. S.]

Regiment 42 mil

WARRANT ISSUED

02/

JOHN W. LINDSEY,

WARRANT HANDED TO

(FOR THOSE ALREADY ENROLLED.)

4

CODE SECTION 1254.

SOLDIER'S PENSION

INDIGENT

1903.

Name SD Tegene

POWER OF ATTORNEY.

Marie War - Commission and Commissio	the street and
STATE OF GEORGIA,	
COUNTY	
OUNTY	
Ι,	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	f ima.
1 61	[L. S.]
Executed in the presence of	

Mo datu-

(FOR THOSE ALREADY ENROLLED.)

SOLDIER'S PENSION

No. <

ny Prolion,

1904.

WARRANT HANDED TO

nodote

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,)
Fulton. Cou	ntv.)
(/0 /	rgan of Fulton.
	sworn, says on oath that he is a bona fide citizen
and resident of said County and State, a	nd has resided in said State continuously ever
since the day of	1849; that he isyears old and
by occupation a, t	that he enlisted in the military service of the Con.
federate States (or of the State of	during the war between the
	in Company F, of 42th Regiment
of fac	that his physical condition is as
follows = -	made of
J X P	
that his property consists of the following	items:
and plants	
of the value of	Dollars, that by reason of his physical
	port himself by his own exertion or labor, and
that he receives no pension but the one he	
	ne benefits of the Act, approved December 15th,
	d makes application for the pension to which he
is entitled for the year 1903. I have here	
county been allowed a pension for the year	2000
Sworn to and subscribed before me, thi	is the
det of JAN - Lists	1903. y
T I	Ordinary.
STATE OF GEORGIA,	ì
Count	y. ∫
1. 9. " ""	Ordinary of said County,
do certify that I am well acquainted with	V // 1/ 1/
the applicant in the foregoing affidavit, and	d am well satisfied that the statements made by
	ow he is the individual he represents himself to
be and that he resides in this County.	
Given under my officia	l signature and seal, this
day of	1903.
your Seal , here \	(1903.
	Ordinary County.
Nors.—The blank spaces must	

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

TOTAL TOTAL TOTAL TOTAL	MO.
STATE OF GEORGIA,	
Fulton. County.	
Personally appears I L Cle	
County, State of Georgia, who, being duly sworn, says on oath that he is a boar jude and resident of said County and Said Said Said Said Said Said Said Sai	tizen
and resident of said County and State, and has resided in said State continuously since the day of	y esci
to 2/2; that he is years o	ld and
federate Countries of the constitution of the maintary service of the	
States, and served for the term of H in large in Company of H2 th Reg	en the
tollous:	188
LA A P	
that his property consists of the tollowing items:	
of the value of Dollars, that by reason of his ph	
condition and pover y he is unable to support himself by his own exertion or labor	ysteal
that he receives no pension but the one herein applied for.	, 4110
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 wh.	en Le
is cutitled for the year 1904. I have heretofore as a resident of	
County been allowed a pension for the year 1	
Sworn to and subscribed before me, this the	1
1904.	
Jon AWil Kinson / Ordinant	
STATE OF GEORGIA,	
Rillion County.	
In John (William) Ordinary of said Co	onto
I. Ordinary of said Condo certify that I am well acquainted with S	mix
the applicant in the foregoing affidavit, and am well satisfied that the statements	irade
by him in his said affidavit are true, and I know he is the individual he represents hi	sel!
to be, and that he resides in this County.	
Given under my official signature and seal, this JAN 29 1904	
day of	
AME COMMINGENERAL COMINGENERAL COMMINGENERAL COMMINGENERAL COMMINGENERAL COMMINGENERAL	
ordinary Maniton. Count	tv.

Nors.—The blank appear must be filled.
Nors.—Affidavić spopid not be attested percet January ist. 180.

Executed in the presence of

WITNESS my hand and seal, this day of 1905.

___ [I. S.]

COUNTY.

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

I _____hereby authorize

STATE OF GEORGIA.

POWER OF ATTORNEY.

Personally appears.

state of Georgia,

STATE OF GEORGIA.

since the ____day of ______18 ___; that are is

County.

and respective and County and State, and the resided in socretate or a

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Deb wert species of feetings in the benefits of the Action

Executed in the presence of

WITNESS my hand and seal, this _____day of ______day of _____

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

Conut. Conut. 1 (a)

LAD ALLTINAVIO HEKRIALARE STRAMED STATE OF GEORGIA. Fuiton. County. Pearsonally appears 21. D. Reagen 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 day of _______18 ____; that he is _____years old and since the that he enlisted in the military service of the Conby occupation a federate States for of the State of Scargia) during the war between the States, and served for the term of 3 428 in Company 4, of 42 and Regiment of sta. ...: that his physical condition is as follows that his property consists of the following items :___ of the value of Dollars. I am now earning, by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of_____ County been allowed a pension for the year 1904. Sworn to and subscribed before me, this the STATE OF GEORGIA. Fully County ordinary of said County. do certify that I am well acquainted with the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this

Ordinary Fultor

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

Nora.-The blank spaces must be filled.

County

Affix your Seal here

State of Georgia, Fullon County. Personally appears D. Reading of Fullon County, State of Georgia, who, being duly sworn, and 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 660, years old and by occupation a black locker, that he enlisted in the military service of the Confederate States (or of the State of allows: in Company in of the Regiment of the state of the term of the intermediate in the physical condition is as follows:
Personally appears . Respectively. State of Georgia, who, being duly sworn, and so 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
county, State of Georgia, who, being duly sworn, and so 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 brice Market Confederate States (or of the State of a late of during the war between the States, and served for the term of a late of company to the Regiment of
since the day of 1841; that he is 660 years old and by occupation a bless of the Confederate States (or of the State of States, and served for the term of 1941; in Company to the Regiment of
since the day of 1841; that he is 660 years old and by occupation a die a little of state of the Confederate States (or of the State of state of state of the Company of the Regiment of the term of the term of the company to the Regiment of the Regiment o
by occupation a line of the State of all of the enlisted in the military service of the Confederate States (or of the State of all of the Company of the War between the States, and served for the term of of the company to the Regiment of
by occupation a Chee. Matter of the Confederate States (or of the State of a line of during the war between the States, and served for the term of the company of the Regiment of the company of the Regiment of the company of the company of the Regiment of the Company of
States, and served for the term of Office in Company, of the Regiment
States, and served for the term of Office in Company in of the Regiment
of Carlot
follows: Infirmity and powerty.
Control of the Contro
that his property consists of the following items: 220 for oferly
of the value of Pollare I am
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 1908. I have heretofore, as a resident of 111101
County, been allowed a pension for the year 1905.
Sworn to and subscribed before me, this the day of JAN 1 1906 1906.
6/1/0.00/
Ordinary.
State of Georgia.
Trailing
County.)
I, Ordinary of said County,
lo certify the am well equainted with . D. Beagin
he applicant in the foregoing affidavit, and am well satisfied that the statements made
y him in his said affidavit are true, and I know he is the individual he represents himself
o be, and that he resides in this County.
Given under my official signature and seal, this IAN 1 1906.
day of 0 1906
A Wieking

A

ors.—The blank spaces must be filled.

OBV

County.

YEAR LOOP GOINGY PALSON

WHEN AND WHERE BORN? 1000 near Autorous Court Bouss &.C.

ENLISTED WHEN AND WHERE? MINCH 1888 COVERENCE, Co.

RANK.

COMPANY AND REGIMENT? CO. T. Land. Rogt. Co. Tole.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Sentreeted typhoid fever-1864 Decas to have fits. Caused from over exertion while marching.

CAPTURED, WHEN AND WHELE?

RELEASED.

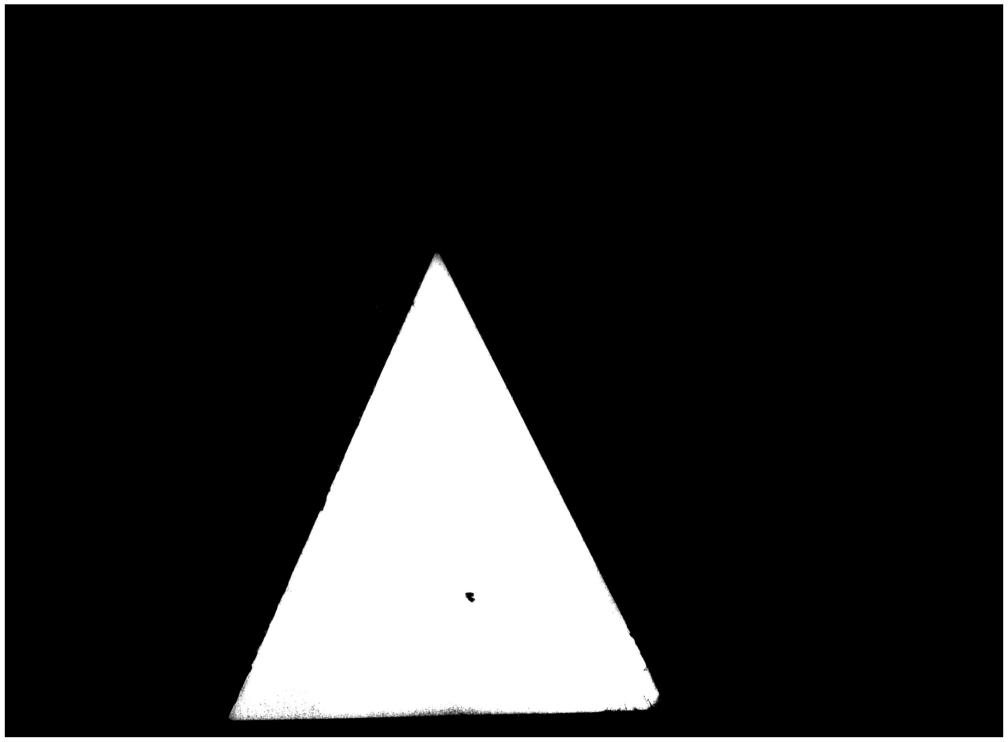
WHEN AND WHERE SURRENDERED? 1865 near Greensbore, F.G.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERET

BURIED.

WITHESSES. John C. Brownles, and regiments. D. date.



			χ.	8	1	ST
INDIGENT PENSION	was he sup		Executed in	Witness my hand and s		STATE OF GEORGIA
19069		ا د	presence of	2		EORGIA,
care to matical				ectsion allowed and		Court
Mett Lear				request that		<u></u>
JOHN W. LINDSHY Commission				hy day of	of	
BRANT HANDE				6		
		<i>i.</i>		190	bereby authorize	6
			T. 8.		uthorize	Ci

OUESTIONS FOR APPLICANT. STATE OF GEORGIA. STATE OF GEORGIA. Hulton COUNTY. to avail himself of the Tension 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.) Greenwich Ave Attanta, S. to receive and receipt for the pension allowed and request that he result same to 2. How long and since when have you been a resident of this State? 3. When and where were you born! Depte 11-1840. Cuthoert Randonal Co Witness my hand and real, this 4. When and where and in what company and regiment did you collect or serve?

Aug 1863 Co. Co. San Marie Bellation Infantry 9 [L. 8.] Executed in presence of 5. How long did you remain in such company and regiment! I remained in Service that Collection and the 10 Day April 1865 - When taken prisoner of war at Columbus for 6. When and where was your company and regiment surrendered and discharged By Wilson, Raid Here was your company and regiment surrendered and assequence of the elypse, messelin augustered above a hard of my Both alice was Captured I being among the captured.

Were you present with your company and regiment when it was surrendered? No. prisoner of was 7. Were you present with your company and regiment when it was surrendered? No present of war all and clearly where you were, when you left your compand, for what cause and by whose authority? Authority of the state of the sta 12. If upon the first gre ind, 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 bistory of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you loss your sight? sucreasing of age and failing life, Sight naturely, debars me from garding a support as in former years is why 13. What property, real and personal, or income, do you possess, and its gross value?

College a result annount of Household - Effects

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905 and this disposition, if any, by sale or gift, have you made of same? I had not to dispose of -ausure, ed above. 15. In what County did you reside during those years, and what property did you then return for taxation? Julia Co, Za-None_ 16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? By what I evald 17. How much did your support total for each of those, years, and what portion did you contribute thereto by your own labor or income? _ Couly a distallisticion and my by my work, 18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year? 18. What was your employment during 1901, 1902, 1903, 1904 and 1900? What pay did you receive in each year?

Carrier Ways.

19. Have you a family? It so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how applied to myself and a first means of support. There are a homestead, or other property? Their ages and how applied to myself and laft me 20. Are you receiving any pension? If so, what amount and for what disability? 21. Have you ever made an application for pension before? Owe & force 22. How many applications have you ever made and under what class? Core, in haddling ("
Wilder the Alge and Poverty Clause No. 11, above day of William Ordinary. tullon

LUMBE OF ALLUKINEY.

ř	
STATE OF GEORGIA,	STATE OF GEORGIA
10cht COUNTRY	STATE OF GEORGIA,
	County.
said State and County, having been presented	06/12/2
All Comments	Personally came before mg JC While
under secting 1264. Code, and after being duly sworn true was as make to the following questions, deposes and	
	both known to me as reputable planting to
What is your name, and where do you reside? Samine A. Signed	of said County, who, being severally sworn, say on oath that they have examined carefully from I Learn
Threen But Co San	
	, applicant for pension under Section 1254, Code, and after
2. Are you acquainted with South 1. Teams the applicant: if so how	such personal examination say that his precise physical condition is as follows.
long have you known him send (865 - 1/10 mly met him for time sing 1865	a) Vel and in the state
3. Where does he reside, and how long and since weep has he been a resident of this State?	and the most
a unanctar to has fulled in fulla Co	to the Marine Labor - En a Dight
When where and in what gompany and regiment did be solved, and how do you know?	
Solyvany C. Inque Battalin Fongenter Brigar in	the course of light fram the
The state of the s	head mobally caused by theil wound
Were you a member of the same company and regiment? Was in usu many of Busham	1 1 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6 Hex long did be petrorm regular in vary duty? Will laws & ylar	Chiring War of 1 cet 6 166 -
7 When and where was his command surrendered? Columba &	and that we have so interest in said pension being ailford.
	Sworn to and subscribed before me, this the
11	
8 Were you present when it surrendered?	Aday of Mark 1906)
9. Was applicant present?	Johns (William Ordinary (
10 If he was no present where was he'	the state of the s
	ORDINARY'S CERTIFICATE.
When did he leave his command? For what cause?	ORDINARYS CERTIFICATE.
By what suthers to be let?	STATEOF GEORGIA,
James and the same of the same	Tullon
-	- COUNTY, I
11. What property effects or income has the applicant. (Give your me) of knowledge:	1. John & Welshuson Ordinary, in and for said County, beache certify
	Ordinary, in said County, hereby certify
No mil Know	that the synlicant John J R Even resides in said County, and has
12. What properly, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what	
dissessition, if any, did be make of same? AT Not Kriss	been a bona fide resident of this State since the day of 189
	and that the witnesses, viz.
13. This he conveyed away may on he property in the last four years: it so, what was it, and to whom?	
CAMANT KAY	The second secon
14 What the applicant's occupation and physical condition 2 22 /1 11 // LA	are of trustworthy character, and that their statements are entitled to full taith and credit.
14 What the applicants occupation and physical condition?	I further certify that before answering the foregoing questions the applicant and each witness took the oath
	bereon prescribed, and that the full text of the affidavite was read to the applicant and witness before same was signed.
15. Is the applicant unable to support binself by labor of any serie, it so why? Can and way	I further certify that the taz digest of County shows that applicant
10. Is the approximate unable to support to the set of all the set of the set	
	returned for taxation in his name in 1901
	property, and in 1902Dollar
16. How was he supported Juring the years 1901, 1902, 1963, 1904 and 1902; Sull not kee	
	Dollare
1" What pertion of his support for these four years was derived from his own labor or income?	Dollars or
1	
Campo Any	Do Do
18. Give a full and complete statement of the applicanc's physical condition that entitles bim to a pentite under	In my opinion the foregoing claim is made in good faith.
Bection 1254, Code	01 $+$ $+$
	Witness my hand and seal of office, this 249 day of Co hour 190 C
19. Who composes family? What property have they? Children's ages and their earning capacity?	Loth De Williams
	Ordinary.
	of Julian County.
· · · · · · · · · · · · · · · · · · ·	MOTE.
20 What interest have you in the recovery of a pension by this applicant?	
Sworn to and subscribed before me, this the)	 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. 7 day of Section to 190 () Witness.	 Additional affidavits may be attached if blank spaces are incufficient.
7	3. In every case the ordinary muss certify to the character of the witness, and as to the execution of the proof as above set out.
- Correctly Ordinary.	
orgia Belle Court	222
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County To and any placement of my	and guell and guela
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ie, and after being duly sworn	true answers to make to	the following questions, de	r pension poses and
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in what company and regiment	did he enlist, and how d	o you know?	
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pefrorm regular military duty?		Control of the Contro	
was his command surrendered?			
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ommand?	For what	cause?	
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he make of same?	has 1901, 190	2, 1903, 1904 and 1905, a	his_
	ast four years; if so, wh	at was it, and to whom?	_
nt's occupation and physical co	pdition!	o a Carrio	se Gricome
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What property have they?	Children's ages and the	Aly hear earning capacity?	de L
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y? What property have they?	Children's ages and the Market	by barning capacity?	de st
	de, and after being duy sworn the and where de you reside? de with im? dide, and how long and since who the what company and regiment er of the same company and re perform regular military duty? when it surrendered? when it surrendered? command? the make of same?	of the application of the and after being duly sworn true answers to make to the and after being duly sworn true answers to make to the and where de you reside! It with the true the true the true the same of the same company and regiment did he enlist, and how do the same company and regiment? The perform regular military duty? The what it surrendered? The what it surrendered	the and after being duly sworn true answers to make to the following questions, de and where do you reside! I have the substitution of the State? I have the same company and regiment did be enlist, and how do you know? I was his command surrendered? I when it surrendered? I when it surrendered? I when it surrendered? I when he same company and regiment? I when it surrendered? I when it surrendered? I when it surrendered? I where was he? I what cause? I who do you know all the applicant possess in 1901, 1902, 1903, 1904 and 1905, a he make of same? I was any of his property in the last four years, if so, what was it, and to whom? Int's occupation and physical condition? I why? The why? The last four years, if so, what was it, and to whom? Int's occupation and physical condition? I why? The why? The last four years, if so, what was it, and to whom? I who was a support himself by labor of any sort; if we why? The last four years was derived from his own labor or income of the four years was derived from his own labor or income.

Co. E, lat City Botton (Calumbus)

Reams John To

VEAR 1908 COUNTY

Cooke Jeques Batta, Infenter, One

Fulton

Main Am haraga jourg Sept. 11, 1840, Guthbort, Georgia. (Readolph County)

. Ebelinger (Does not state where)

Part of the Art and or one Searcel Re Paques, Ocumend of Batta-

Pain in head, probably caused by shell would, during the war of 1861 to 1865.

emong the captured. Taken prisoner of war at Calumbus, Coorgie. By -Filen's Raid.

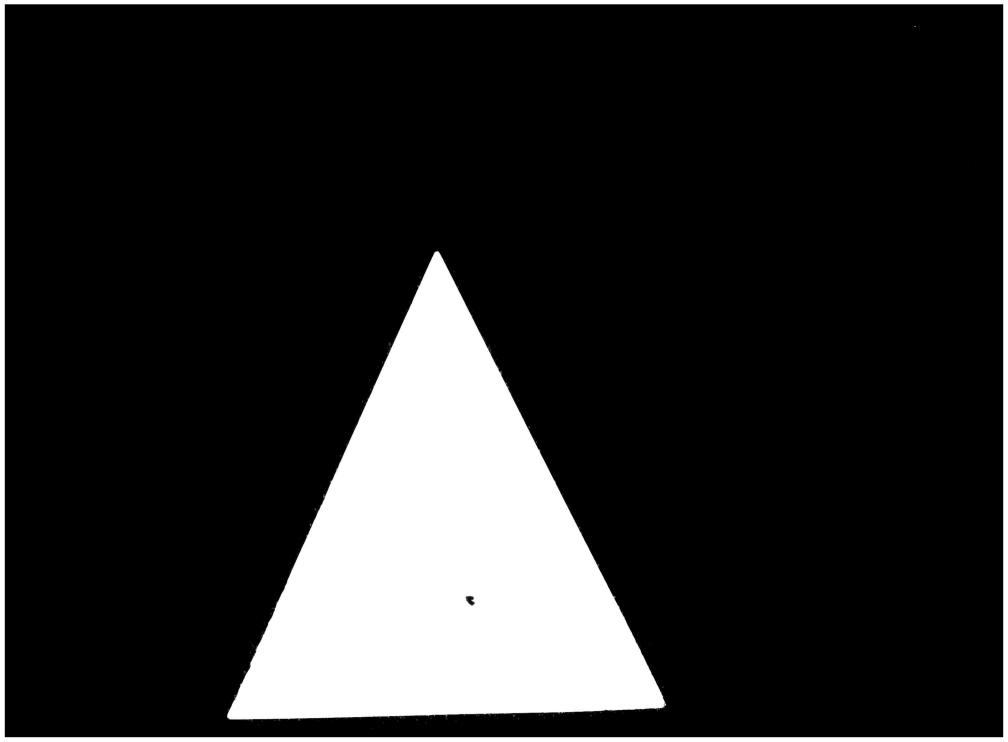
Pareled at Flirt River, at Double Bridges, in Pike County, Cas about the Strd of April 1865. Latinate De

Part of Enttalion was captured, applicant being among the captured, Talen prisoner of war at Columbus, Ga. Witness states; Command surrendered at Columbus, Coorgia.

if him stands is token into where week your (Prisoner of war, percial at Plint River, at Double Bridges, in Pike County, One, about the SOrd of April 1808. Plus, Wast At Fall Sc. 2.

Bille 17,

William Seemel R. Jaques, Command of Entellian. He date.



Widow's Application

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

FULTUM COUNTY COMMUNICATION OF THE PROPERTY OF THE PROPERTY

Widow of J. R. REED Date of Marriage .. Bent. 2. 1988

Date of Husband's Death Dec. 1919

Company Regiment

RECEIVED

JAN 12 1938

L. THOS. GILLEN, DIRECTOR

Ordinary's

Certificate

GEORGIA. MOLIUM

THOMAS R. JEFFEL ES

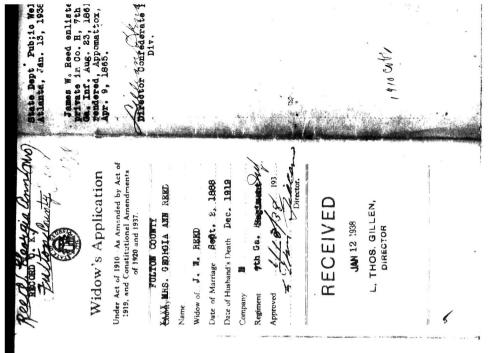
herself to be, Ann Reed

ORDINARY

1910 7:17

Public Velfare, In: 15, 1938.

L. Reed enlisted as a in Co. H. 7th Regt. Aug. 23, 1861. Sur-1, Appenattox, Va., 1861.



Ordinary's Certificate

STATE OF GEORGIA

FULTON

COUNTY

1. THOMAS A. JEFFRIES , Ordinary of said County, do certify
that I know Mrs. Georgia Ann heed 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 1s', 1920, that I also know. J. I. Wright.
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 2th day of 1938
(SEAL OF ORDINARY) Ordinary.
of County.
INSTRUCTIONS:
1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You

IN THE WATER WATER WATER STATE OF THE PARTY AND THE PARTY

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:

FULTON COUNTY.

	Personally appears before me, Mrs. Georgia ann Reed of said State and County
and	hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the
Cons	stitutional Amendments of 1920 and 1937, and submits testimony to support the same, and after
	g duly sworn, true answers to make to the questions propounded, answers as follow, to wit:

SECTION I.

1. What is your name, and where do you reside? (Give Post Office and	County)	
Georgia Ann Reed, North Roswell, Ga.	Ful ton	
* **		

2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All her life

Give date, or year, of your birth. 28, July 9, 1868

3. (1) When, (2) where and (3) to whom were you married? Sept. 2, 1888 Milton County, J. W. Reed

b. When and where did your first husband die? Dec. 1919

c. Were you residing together when he died? Yes

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

e. Are you now a widow? Yes.

f. Have you or your husband heretofore been paid a pension by the State? Husband - Cobb County
g. If so when and for what cause were you or your husband placed on the roll? Confederate Veteran
Drew until his death SECTION II.

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

1. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry. Cavalry, Artiliery, Reserves, State Guards, State Militia or State Troops. Enlisted in Aug. 23,1861, at Marietta, Ga. in Company H. 7th Ga. Regiment

2.	When	and	where	did	the	Commands	of your	husbana	surrender	or	discharge	from	the	Service?
	Surre	nde	red .	Àpp	Q ID B	ttax, V	A. Ap:	. 9, 1	1865,		(

3. Was your husband personally present with his Command when it was surrendered or discharged? Ins.

4. If he was not present, state specifically and clearly where he was?

5. When did he leave the Command?

a. For what cause did he leave?

b. By whose authority did he leave?

c. For how long was his leave of absence granted?..... d. In what way?

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

What effort did he make to return to his Command?

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

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

i. If so, when and where? In what prison was he held and when was he released?......

Sworn to and subscribed before me, this the

(SEAL OF ORDINARY)

State of Georgia, Fulton County.

•
Personally before the undersigned authority now
comes J. I. Wright who upon oath
says that he knows Mrs. Georgia ann Heed and
knows that she tas living with her husband Read
at the time of his death, that she has not remarried since his
death and is now his dependent widow.
Sworn to and subscribed before me
this 7th day of Jan. 1937
I.S. With
US Balledon
0. 0. Ordinary, Fulton Co. Ca.

Court of Ordinary

COUNTY

STATE OF GEORGIA

CERTIFIED COPY OF
MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

OF

J. W. REED,

AND

GEORGIA A. BURGESS,

Recorded in Book B Page 314

W. H. NESBIT,

Ordinary.

MARRIAGE LICENSE

State of Georgia-Auton County

A succe my Carnet Bin-Successful Chimith
To sny Minister of the Conpel. Indge of Buperior Court. Instice of the Peace, or other Person authorized to Bolemnize,
You are hereby authorized and permitted to join in the
honorable state of Matrimony J. W. REED
and GEORGIA A. BURGESS
According to the Rites of your Church, Provided there he no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall he your sufficient License.
RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD
Given under my Hand and Seal this <u>27</u> day of <u>Aus. 1888</u> 19
W. H. Neebit, L. S.
hereby certify that J. W. REED
and GEORGIA A. BURGESS
vere joined together in the HOLY BANS OF MATRIMONY
n the 2 day of Sapt. 1888 19 , by me.
REV. A. G. HEMBRER,
Annual Control of Cont
State of Georgia, Ordinary's Office
Fulton County. 8, 8.
3 1
1, W. A. BRAND, , Clerk Court of Ordinary of said County, bereby certify
that the foregoing is a true copy of the Marriage License and Certificate of Marriage of J. W. REED
GEORGIA A. BURGESS
as the same appears of record in this office.
Given under my Relat Signature and Seal of the Court of Ordinary, the day
and year ajorsoid.
It a Brand
Clerh, Court of Ordinary.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

AILM'TA

Hon. T. H. Jeffries, Ordinary, Polton Jounty, Atlanta, Georgia.

WHEREAS:

MRS. HEORGIA ANN REED, W.D.W. CF J. W. RFED,

has filed in this office en 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 Junuary 1st, 1920, and that she was not remarried; it is, therefore,

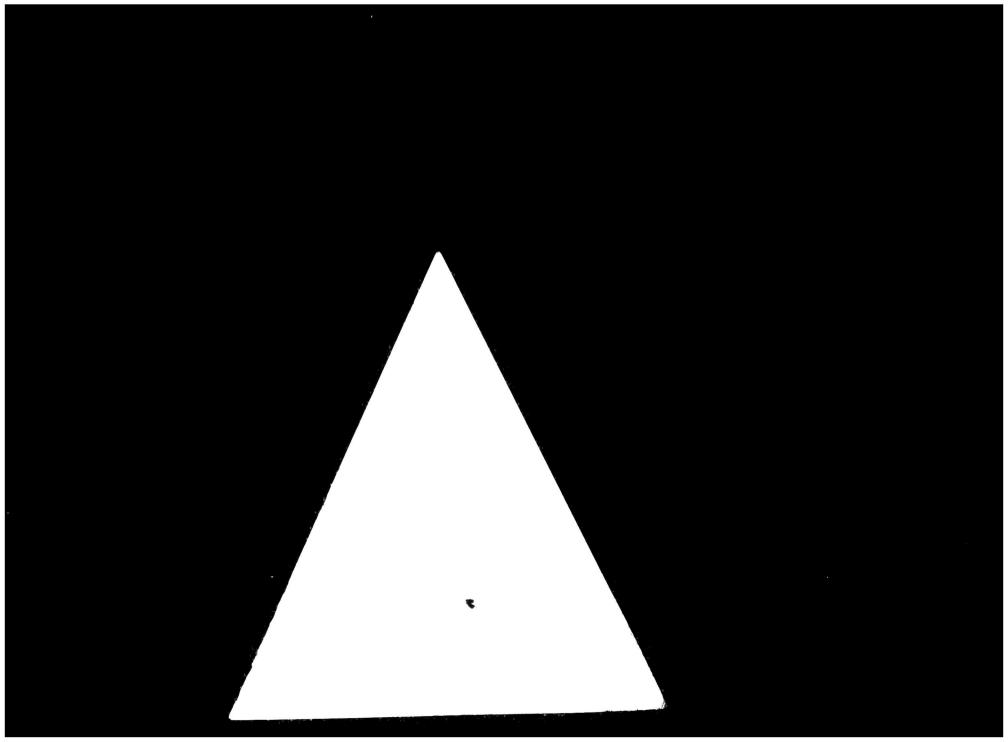
ORDERED:

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

This, the 13th day of January 19 38 .

. This Pat Tillen

Director, Confederate Division State Department of Public Wolfare



THE Reed J. S.

YEAR 1918 COUNTY Fulson

WHEN AND WEERE BORN? A resident of Georgia since/Richard

ENLISTED WHEN AND WHERE? 1864

.RANK:

COMPAN: AND REGIMENT? Co. D. 6th Ga. Rogt. Infantry.

NAME OF CAPTAIN AND COLONEL? Capt. R. T. Bowie , Col. Allen D. Candler.

WOUNDED?

MAPTURED, WHEN AND WHERE?

RELEASED:

WHEN AND WHERE SURRENDERED? Jacksonville, Fla.

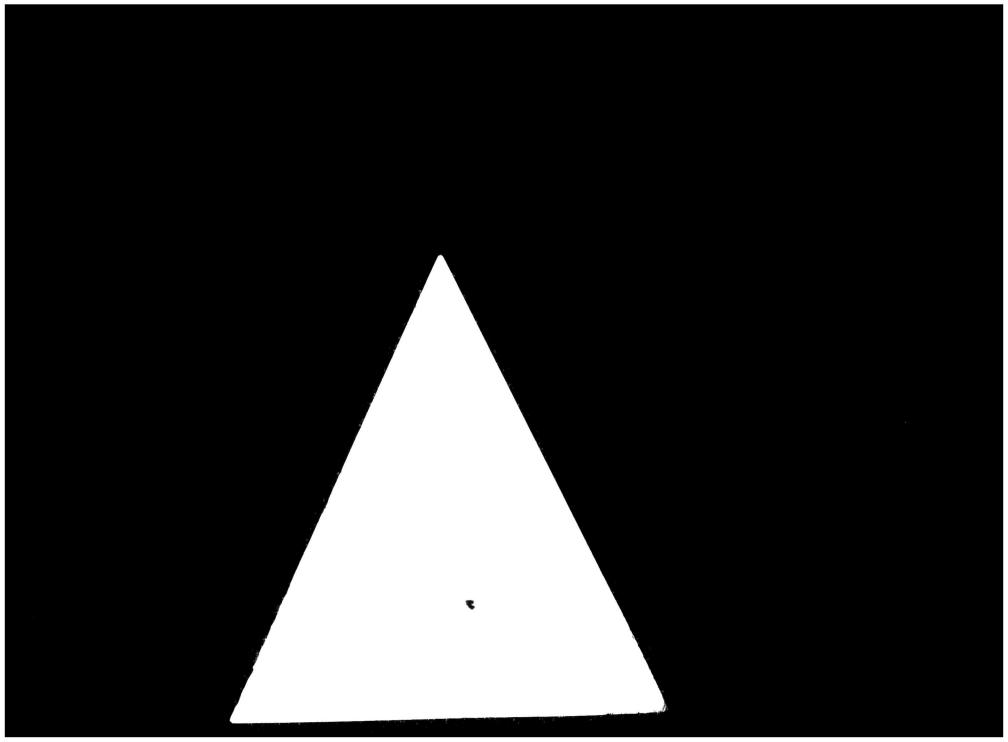
IF NOT PRESENT AT SURPENDER, WEERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: Capt. R.T. Bowie - Same comman

DO Ante



STATE OF GEORGIA.

COUNTY

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INDIGENT PENSION,					,	Execute	ese my ha
1902.						ed an pres	nd and se
Name QM Redd						ence v	at, the
County Hullan							
co. & Ja m Reg'm't							
Approved 1902.		15					day of
JOHN W. LINDSEY,	ŕ						
Commissioner of Pensions.	ú s	,				•	· 3
WARRANT HANDED TO		8					
1/12+1/12-1902			S				1902
Ordinary-will write Name of Applicant, Compand and Regiment on back as indicated above.				8		į t] r.

QJ25TIONS FOR WIT. STATE OF GEORGIA. as a witness in support of the application of formula to the supplication of formula to the supplication of formula to the supplication of formula to the following questions, or answers as follows:

1. What is your pame and where do you reside for the following questions or answers at follows:

2. Are your acquainted with formula to the following pass you acquainted with formula to supplicant to the proposed to the supplicant to the following have your terms of the following the supplicant to long have you known him . 38 Jians -Last to the state of the Where does he reside, and how long and since when has he been a resident of this State Stanton loo Sa - in State and 503 May 1402 - Farestio les inc. Loo & 36 Garagent Were you a newber of the same company and regiment? At Jon Sun Villegaria 6 How long that he perfector regular military duty? Orders 3 per to - Manual of a given been and where was his command surrendered? January and the transfer to the surrendered of the s 1865 - Grunshurf Mle. 8 Were you present when it surrendered 9 No - gar Gallack 9 Was applicant prosent No at hand on Fullaugh - Mundlella 10 If he was not prosent, where was he's at house - mainthick When did be leave tic command 1864. For what cause Maurillinantele By what authority he lead the land of this? Symplectical How do you know ail of this? 11 what property effects or income did the applicant to the continuous of the property effects or income did the applicant to the continuous of the continuo 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? Works a little in fulle weak & wanted in right ankle 15. Is the applicant unable to support himself by labor of any sort, if so, why? He is amulal To make a support of labor of any Sort - ald field + weak- Suffers from Evanuel in right andie 16. How was be supported during the years 1898, 1898, 1900 and 1901? By his wrife of Children and Little work he law Landton do. 17. What portion of his support for these four years was derived from his own labor or income PENSION 18. Give a full and complete statement of the applicant's physical condition that entitles him to a persion junder.
Section 1254, Code? He is all any work are W. LINDSEY, ankle I have no interest in this claims What it terest have you in the recovery of a pension by this pplicant . Tunns INDIGENT JOHN

STATE OF GEORGIA.	1		
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STATE OF GEORGIA.	ľ		H
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are of rists other character, and that their statements	are contilled to full taxtic	a Ceredi	9 4
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eries to a rebed and that the full text of the affidavits	was read to the applicant	and witness before some was signed	- 🕦 ,
I to then certify that the tax digest of		County show that applican	e e e e e e e e e e e e e e e e e e e
etimed in texetom in his name in 1869.		Indian o	
r perty, and a 1900		Dollars of property	A A
In no spinon to foregoing claim is		ade it good faith	
Vitness my hand and sea' of office, this	day of	1902	
į.		_ Ordinary,	1
	4		

2 Additional addactism as be attached if clank 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 Applicant.
	STATE OF GEORGIA,
	Hullon County.
	t said State and County, desiring to avail himself of the Pension Act (Section 1254, Cisle), hereby submits his proofs, and after being doly 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 postoffic)
	- agains at Rich
	2. How long and since when have you been a resident of the State
	8. When the there were you pure Del 1540- Fareyth County to
	4. When and where and in what company and regiment did you enlist or rerve.2
	May 1 7 1 2 - 30 10 1 20 60 6-36 60
	5. How long did you remain in such company and regiment the life that when all at
ਰਂ	Garlsbaro San Sue 1864
H H	
5	When and where was you'r company and regiment surrendered and discharged?
P In	
ď	7. Were you present with your company and regiment when it was surrendered. **TO** S. If not present, state specifically and clearly where you were, when you let? your command, for what gaussians.
4	and by whose authority Was the house on the way the
n	9. How much can you carn (gross) per annum by your own exercising or labor - prot own 40
ŭ	9. How much can your earn (gross) per annum by your own exertions or labor? 2 Post Collect. \$60. 10. What has been your occupation since 1865? Including a
4	11. Upon which of the following grounds do you base your application for pension, you first, mage and poverty,
Ω	second, "infirmity and poverty," or third, "blindness and poverty". 12. If upon the first ground, state now long you have beer 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.
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4	suplaint - her tigo
Ö	13 Whet property real or personal, or income, do you possess, and its gross value! Noul
1	14 What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1838, 1899, 1900 and 1 o1.
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	and what disposition, if any, by sale or gift, have you made of same and
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3	and what disposition, if any, by sale or gift, have you made of same? ARALL If what County did you resi is during those years, and what property did you then return for taxation.
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3 310	and what disposition, if any, by sale or gift, have you made of same? Accelling the same in the same in the same is disposition, if any by sale or gift, have you made of same? Accelling the what County did you then return for taxation. If the water you supported during the years 1899, 1900 and 1901? by saids 9, 5. Collins in the same is said.
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\$10 × 1	and what disposition, if any, by sale or gift, have you made of same? All I for what County did you resi to during those years, and what property did you then return for taxation? Limited May your supported during the years 1899, 1900 and 1901? By Limited S. S. G. L. T. How much did your support cost to each of those years, and what portion did you contribute thereto by your own labor or 'roome. All May 1911. What you your own labor or 'roome. All May 1911. What you do you contribute thereto by Your own labor or 'roome. All May 1911. What you your own labor or 'roome. All May 1911. What you you could have your coupleyment during 1898. 1899 and 1901? What you you can contribute thereto by May have your coupleyment during 1898. 1899 and 1901? What you you can contribute thereto by May have your coupleyment during 1898. 1899 and 1901? What you you can contribute thereto by May have your coupleyment during 1898. 1899 and 1901? What you you can contribute thereto by May have your coupleyment during 1898. 1899 and 1901? What you you can contribute thereto by May have your coupleyment during 1898. 1899 and 1901? What you you want to be a second of the couple of the coupley was a second of the
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	16 How much did you reside during those years, and what property did you then return for taxation. 17 How much did you reside during the years 1899, 1900 and 1901? By Lands 9.5. Left. 18 How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or 'recome." 18 What was your coupleyment during 1898, 1899 and 1901? What pay did you receive in each year? 19 Have you a family? It so, who composes such lamily? Give their means of support? Have they a homestead?
	and what disposition, if any, by sale or gift, have you made of same? If In what County aid you resi to during those years, and what property did you then return for taxation? If How were you supported during the years 1899, 1900 and 1901? By Lands & S. C. L. L. If. How much did your support cost to each, of those years, and what portion did you contribute thereto by your own labor or 'recome? And the support of the support cost to each, of those years, and what portion did you contribute thereto by your own labor or 'recome? And the support of the s
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	16 How much did you reside during those years, and what property did you then return for taxation. 17 How much did you reside during the years 1899, 1900 and 1901? By Lands 95 Lands 1900 and 1901? By Lands 95 Lands 1900 and 1901? What portion did you contribute thereto by your own labor or 'recome? Aland Holl and Holl and Holl 1901. What was your coupleyment during 1898, 1899 and 1901? What pay did you reveive in each year? 18. What was your coupleyment during 1898, 1899 and 1901? What pay did you reveive in each year? 19. Have you a family? It so, who composes such lamily? Give their means of support? Have they a homestead? 20 Are you receiving any pension. If so, what amount and for what disability?

Applicant.

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Executed	n the presence	of	*			[L. S.]
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21915 15 15 15 more

FOR APPLICANTS SOURT SECOND PERSIONS.

LAW WILDIAWAY UDVOTALAWE WFFAMRA LENZIOUS STATE OF GEORGIA, Rulton County Personally appears & M Roll of County, State of Georgia, who, being duly sworn, says on eath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever day of AGER 18 %: that he is by occupation a___ , that he collisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 2 421 in Company 6, of 36 th Regiment ; that his physical condition is as follows: (1 ge and infirmally that his property consists of the following items. Dellars, 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 1994. I have heretofore as a resident of ___ County been allowed a pension for the year 1 Ele Reda Sworn to and subscribed before me, this the Ordinary STATE OF GEORGIA, 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 himseif to be, and that he resides in this County. Given under my official signature and seal, this...... JAN 20 1904 Afti x your beal here

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

STATE OF GEORGIA,)	
County	v.)	
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	of	
to receive and receipt for the pension	allowed, and request t	hat he remit same to
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by		
WITNESS my hand and seal, this	day of	190%
Executed in the presence of		[[t. 8.]

L Regiment Joth Ley

WARRANT ISSUED

JOHN W LINDSEY, " on maximum of Pr

WARRANT HANDED TO

FULLER.

Name Court

SOLDIER'S PENSION

INDIGENT

1905.

(FOR THOSE ALREADY ENROLLED.)

No.

COUR SECTION 12%. (FOR THOSE ALREADY ENROLLED.)

No 426

POWER OF ATTORNEY.

STATE OF GEORGIA, CGUNTY.	}	
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SOLDIER'S PENSION Regiment 36" L 1908. IM. Ole Fulton Coursely 5 Name +

JOHN W. LINDSEY.

WARRANT ISSUED

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STATE OF GEORG	IA,	
Hullou Cou		
earsonally appears J.	Redd .	Fulton
County. State of Georgia, who, bein	g duly sworn, says on oath th	at he is a hong fide citizen
and resid ut of said County and S	tate, and has resided in said	State continuously and
since the day of_	18;that h	e isyears old and
by occupation a	_, that he enlisted in the mi	litary service of the 3
federate States or of the State of	clardia Idu	ring the new bat
States, and served for the term of A	Live in Company	of 3 6th Regiment
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that his property consists of the following	owing items	
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STATE OF GEORGIA	A. /	
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do certify that I am well acquainted w	rith + M	ledel,
the applicant in the foregoing affiday	it and am well satisfied tha	t the statements made
by him in his said affidavit are true, a	nd I know he is the individua	al he represents himself
to be, and that he resides in this Cour		IAI II IO
	al signature and seal, this	1N 2 1905
day of_	- + · · · · · · · · · · · · · · · · · ·	
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rour heal bere	Ordinary Fulle	County,

Note. -The blank spaces must be filled.
Note.- Affidavit should not be attested before January 1st, 1s05.

LAW WILLIAMIS HERELAKARE AFFORED LEUZIOUS'

State of Georgia,
Fulton County
1 /1
Personally appears J. M. Medd of Fulton
County, State of Georgia, who, being duly sworn, says on oath that he is a houge fide sixing
and resident of said County and State, and has resided in said State continuously
since theday of18 \(\frac{1}{2}\); that he is \(\begin{aligned} \tau\) years old a
by occupation a, that he culisted in the military service of the C
federate States (or of the State of State of during the war between
States, and served for the term of Line Company o, , oil 6th Regime
that his physical condition is
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that his property consists of the following items
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Deponent desires to participate in the benefits of the Act approved. December 1501
1894, and the Acts amendatory thereof, and makes application for the pension to which h
is entitled for the year 1906. I have heretofore, as a resident of Hin
County, been allowed a pension for the year 1905.
Sworn to and subscribed before me, this the
1800.
Ordinary.
State of Georgia,
Full County.
5/12/201
I, Ordinary of said County
do certify that I am well acquainted with J. M. Cledd
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himsel
to be, and that he resides in this County.
Given under my official signature and seal, this 12N 1 1905
day of/
m Mill Kenson
Affix your
Ordinary County.
Note. — The blank spaces must be filled.

STATE OF GEORGIA. COUNTY.	to all a self-contract to the	bereby authorize
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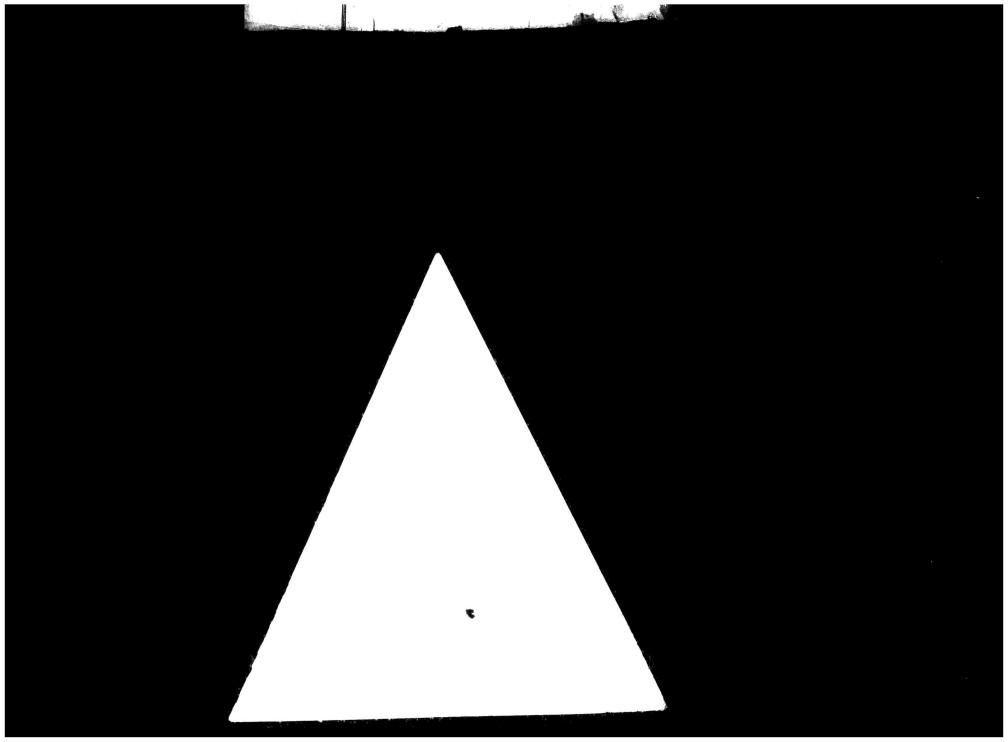
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in his said affidavit are true, and I	know he is the	individual be	neuts made
nd that he resides in this County.	anor ne is the	incividual ne repres	ents nimself
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State of Georgia Personally Came before County me NE Reus caho I being duly Luarn Lays ---on sails that The is a resident and cologen of Said County and That she is Go years of age will her earrally sall acquainted sails J. M. Redd of Tulton County Se. That She remembers be enlisted in the Confiderate Service in the Spring of 1862 and remained in Service to about Sept 181864 dolun he was warmeled in the battle at In reshourd sa through The leg fust above the right ankle 32 He was then Lugloughed and went have and was mener able to return to his Command again before the war ended-4th He Still Suffer from the effects of Laid comment is old and infinite and unable to make a Support a any kind of babor on Calling Swarm to & Subscribed hefore me This 15 clay of may 1408? NE Rueres A Deace Wholy Wellow Co S.

Georgia & S. B. Seale Ordy Millow County is in and for said Cimby resident and bonarfide Citizen of sail County. and that her statements are wo, they of fece faith and credit. Seven under my hours and real of Officer at alphanite Ea. This ning 15 1903 He-I Seale Erdy Millor Candy



Ordinary's Certificate

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	V7 Volton County	NOTES	worthy, and their statements Sworn under my hand and (SEAL)	is the person she represent with No. and was on the 4th No. the witness who swears were duly sworth the wore duly sworth to the	ST-TE OF GEORGIA LALE LALE
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	County Pulton	questions slemnly swe will be the will be affidavite in who mar ts must be try. the deficients the deficient the deficients the deficient the deficien	Sworn under my hand and official seal of (SEAL)	~ · · · · ·	SCA STATE
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	J. W. LINDSEY, Commissioner of Pensions.	9 4 F	Ordinary,	aid C	do o
	Byfe Printing Co., State Printers, Atlanta.	County county eridance eridance by	416	and	ertify She
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COUNTY 1. Ordinary of said County, do certify that I know List a person she represents herself to be and she is a bous fide continuing resident citizen of said County and was on the 4th November 1908, that I also know List a show the said county and represents to the service of husband, that both of them are now residents of said County and The citizen who servars to the service of husband, that both of them are now residents of said County and The citizen are questions are antified to full faith and credit Sworn under my hand and official seal of office the County and their statements are satisfied to full faith and credit NOTES 1 Defers are questions are nassered the Ordinary shall swear applicant and the vitizens in the following works. You do selemnly areas that you will true answers make to each of the questions saked you and the writiness you and give will be truth. So help not collected as a selection of the questions asked you and the writiness you and give will be truth. So help not collected as a selection of the questions asked you and the writiness you and give will be truth. So help not collected as a selection of the questions asked you and the writiness you can be selected to the present to be severe and certified by a selection of the present to be revern and certified by a selection of the present to be revern and certified by a selection of the present to be revern and certified by a selection of the present to be revern and certified by a selection of the present to be revern and certified to present of marriage licenself obtainable. If 'd, prove marriage, by some person, or by general reportance. And Deferming the arms of the present to be reverned to the present		OF GEORGIA,)		1
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As Amended by Act of 1919

Questions for Applicant

STATE OF GEORGIA,
Pulton COUNTY
Fulton COUNTY.
Personally before me comes. Mrs. Lucy Badd of said State and County,
and, after being duly sworn, says that she desires to apply for a pension allowed under the Act
of 1910, as amended by Act of 1919, and submit testimony to make out the same, true answers makes to
the following questions to-wit:
1 What is your name, and where do you reside?Mr.s. Lucy Read, Rt. 5. Atlants
2. How long and since when have you been a sontinuing resident of the State of Georgia !
All my life
3. When, where and to whom were you married? Aug. 15 1878, Forey th. Co., Ga., to
Thomas Redd
a. Have you married since the death of first and soldier husband?
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Con-
federate Army or Georgia Militia? (State the arms and class of Service.) Sept. 1863 Cantor, Ja.
Co. "B", Charckes Lagion, State Troops, Inf.
5. When and where did the commands of your husband surrender or discharge from the army!
Rome, Ga., March 1864
 Was your husband personally present at the time of the surrender or discharge of this command!
Yas
7. If he was not present state clearly where he was 1
8. Where was his command when he left?
a. For what cause did he leave his command?
b. By whose authority did he leave his command 1
c. For how long was he granted leave of absence?
e. What was his physical condition when he left his command?
f. What effort did he make to return to his command ?
g. In what way was he prevented from going back to Comman?
h. Was he captured by the enemy at any time?NONO
i If so, when and where captured and where held as a prisoner, and when and for what cause released?
j. When and where did your first nusband diet Oct 3, 1893. Curred no. Ga.
k. Wore you residing together when he died!Xes
l If not, how long had you resided apart?Nevel_resided_apart.
m Are you now a widow!Xea
9. Have you or your husband heretofore been paid a pension by the State!NC
If so, when and for what cause were you or your husband placed on the roll?
Never applied
The Lucy Field
Charle Mason Dordinary)
of Pul to n County.
(RRATA)

STATE OF GEORGIA,
COUNTY. }
Personally before me comes
being duly sworn, true answers to make to the following questions, answers as follows:
1. What is your name and where do you reside!
J. M. Lindaey, Nor or one, Ga.
2. How long and since when have you knownMrsLucy_Reddapplicant
Over forty-five years
3. How long and since when has she continuously resided in this State! (Give date.)
Lived in Ga. aver since I have known her
4. When and to whom was she married! Thos. Redd How do you know!
5. How long and since when did you know Thos Redd her
nusband!All my life
6. When and where did Thos Redd
he husband of applicant, die: Oct. 3 1892 Cumming Ga.
7. Were the applicant and her husband living together as husband and wife at the date of his death?
Yas and is now his lawful widow
8. If not, how long did they live apart before his death? NOTER resided apart
Vere they divorced 1Na_
9. When, where and in what Company and Regiment didReddenist?
Sep. 1863. Canton Ga., Co. "B", Cherokee Legion. State Troops, In
10. Were you a member of the same Company!Xes
11. How long within your personal knowledge did he perform actual military service with his Company about serven months about serven months. 12. When and was discharged at Rome da. 12. When and where did his Command surrender, and was discharged?
Rome, Ga., March 1864
13. Were you personally present when it was surrendered?X25
ere youand how came you there!
14 We she had a decided a second and the second and
14. Was the husband of applicant personally present at surrender 1
here was hef
suze did he leave Command† (Give date)
ong was he granted leave!
.I. was member of same company and saw him constantly in service fr
enlistment to discharge in March 1864
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-
and f
16. What effort did he make to return to his Command and how do you know this? Of your own
mowledge or how!
Sworn to and subscribed before me this the
18 and of October 19.29 (4th Copyed)
ofFultonCounty.

a Fall

STATE OF GEORGIA, PORSYTH COUNTY.

Court of Ordinary of said county, do hereby certify that I have compared the foregoing copy of

Lucy Terry

with the original record thereof, now remaining in my office, and the same is a correct transcript therefrom, and of the whele of such eriginal rec-In Testimony Whereof, I have hereupto set my hand and affixed the seal of the Court of Ordinay, this 12 May of Datasan 1912

ORDINARY. AND EL-OPPICIO C, C. O.

Last is County That I as rest walls

et younder with Stromas, read to beat

Cot. 34 1892 in Juray to County Sa

I can Granding Sa R. H. Josnie J. L.



You are hereby authorized to join

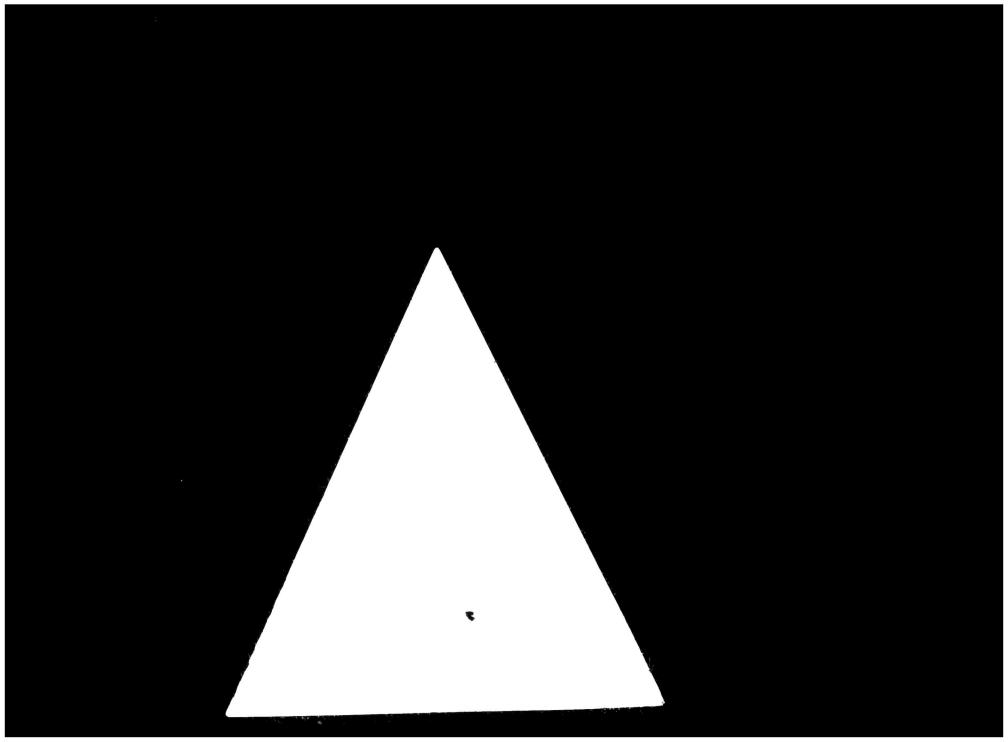
in the Holy State of Matrimony, according to the Solstitution and Figure of this State and for so doing this shall be your Fromse. And you are hereby required to return this Ficense to me with your Costificate horon of the fact and date of the Starringe.

Jugus 1818 my hand and soul this 14 2 day of . J. Bentley Undinary.

FORSYTH COUNTY I Certify that Thomas Jud and Lucy Jury

were gened in Matumeny by me this 15' & day of Cier quel Interior Hundred mm

Heroided



POWER OF ATTORNEY.

STATE OF GEORGIA,

Week Partice PENSION			Executed i	Witness m	to receive and rec	STATE OF
Name Phelip P. Rue	4	The second secon	a presence of	hand and seal this	ript for the pension allow	GEORGIA,
Name Thelip P. Rue #452 6 Fair St. County Frielm Ground			·	day of	of	County.
RICHARI JOHNSON, Secretary Executive Department.	g s			-by	he remit same to	
WARRANT BANDED TO		•		_1895.	hereby au	

of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give grate, County and post office) Thellight Reed Fair Shart (M. Maria Lallon (Muly 22. Where did you reside on January 1st, 1884, and how long have you been a resident of this State?

At aim olated, place of the state of the state of the state?

When and where were you born? In Justin County La Delet 16 1820

Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate any

When and where did you collist? In all lauth In January 1862
In what company and regiment did you enlist? Coll, 1st Robellan Manney

How long did you remain in that company and regiment? Close of the war

If you were discharged from same and joined another, or if you were ransferred to another, give an account of such discharge or transfer?

9. For now long a period did you discharge regular military duty? There year A Months

10. When, where and under what circumstances were you discharged from service of Nucce,

11. What is your present occupation? Carpenter by to de

12. How much can you earn per annum by your own exertions or labor ! Holking

13. What has been your occupation since 1865? (a free C.

14 What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? Significant of the support for this pension year, and how much are you able to

15. What is your present physical condition and how long have you been in such condition? Very old releasely Dufelined, Piles been a hyperfular and general debruing

16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and paverty," second "infirmity and poverty" or third "blindness and poverty"? First & Second 17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? 8 1/1000

18. What property, effects or income do vou possess? Hoha follars with

19. What property, enects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same" Aline

20. In what County did you reside during those years and what property did you then return for axation? It full in Casuity - Made "No relicin-

21. How were you supported during the years 1893 and 1894 " Displanted by my wife

22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Out I man, Contributed to thing

23. What was your employment during 1893 and 1894? What pay did you receive in each year? Hat he receiple you cach, weath to the past group

24. Are you married and have you a family. If so, is your wife living and how many children have you? Give age and sex of children and their means of support? Hally limy, find It we married children who I ving to thewesters.

Sworn to and subscribed before me this the Theips X any of Mch H. L. b acknown ordinary if thellow QUESTIONS FOR WITNESS. STATE OF GEORGIA. Julian County. William McConsider of said State and County, having been presented as a witness in support of the application of Thicky Reed for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the under the detailed representation of the Lord, and after being any sweet true answers to a following questions, deposes and nurswers as follows:

1. What is your name and prince do you reside: The Council 194 Council Mill of Mill , the applicant, if so how long have you known bim? Ucv, 110 year, By Where does he reside, and how long has he been a resident of this State ? In Maria Lo 4. Do you know of his laying served in the Confederate anny or the Georgia militia? How do you know this? Ho, He was much ever my Company 5 When, where and in what company and regiment did be enlist? Lott. 18 Bal Classica 6. Were you a member of the same company and regiment?. With 1. How long did he perform regular military duty, and what do you know of his service as a Copfedegge soldier, and the time and circumstances of his discharge from the service of the Net 11 d from Munay 1861 to the Surunder What property, effects or income has the applicant" (Give your means of knowledge.) 9. What property, effects or specime did the applicant possess in 1893 and 4894, and what disposition, if any, did he make of same : Hime 10 What is the applicant & pecupation and physical condition the is about 75 years old and is disfigure has an place and other adonate, He is unable to do any thing 11. Is the applicant unable to support himself by labor of any sort, if so, why? He is, because of age + infrantes 12. How was be supported during the years 1883 and 1804? I million to called the Acade Mi was small in Outher during Said Over 13. What portion of his support for these two years was derived from his own labor or informs? 14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th. 1894? He is Ald Furfixes, kuy depends alon escribed and is without means of support 15. What interest have you in the recovery of a pension by this applicant?

Sworn to and subscribed before me, this William ME consell

the 28 day of March 1895.

m. L. Lackom

STATE OF GEORGIA. Fullow County. Personally came before me or N. C. Divines In 2. J. E. Callie Mrs., both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully & a menual Philip & Reid applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows: They influ from age 100 gears and Migheat ailment (2) Regulars or Herrico in left Fide Togona of lego - Colonger bien Hemorrhoods of Pelis and Rhamatism We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to care a support for himself, and that we have no interest in said pension K. G. Direco In Z = + Sworn to and subscribed before me, this the 16 day of March 1805. 1 L'a Colin May m L. louckoun (admany ORDINARY'S CERTIFICATE STATE OF GEORGIA, Fulling County. 1. W. L. boal from Ordinary in and too said County, hereby certify that the applicant Thillips Read a revides in said County, and was a bona fide resident of this State on the first day of Jamacy, 1894, and that the witnesses, viz: Ir clicary M' bonnell, Dr. 4. Donne & J. E. Collien 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 applicational each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same were signed. I further certify that the tax digesis of Thellow County show that applicant nothing, returned for taxation in his name in 1893, dollars V nothings of property, and in 1894, dollars of property. Witness my hand and seal of office, this 259 day of ware Inthe ackound Ordinary 2 dela

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

POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA, State of Georgia, County. County. I. hereby authorize hereby authorize to receive and receipt for the pension paid hereon and request that he remit same to to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have nereunto set my hand and seal, this IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1897. day of day of____ [L. S.] [L. S] Executed in p esence of Executed in presence of Soldier's Pension RICHARD JOHNSON, SOLDIER'S PENS INDIGENT vo. 433

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA. Partine County. personally appears C. P. Pers of Pullon County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resi 'ent of said County and State, and has resided in said State continously ever since 18 - ; that he is _____years old and by occupation a Carfeentee; that he enlisted in the military service of the Confederate States for of the State of Secretice) during the war between the States, and served for the term of & Heart med in Company a, of - th Regiment of 1 st Bollation @ Bannors ; that his physical condition is as follows Dunia funda Chekilla, Mothery 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 beaefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entirled for the year 1897. I have heretofore as a resident of county been allowed a pension for the year 189 6 Swern to and subscribed before me, this, the fight cold STATE OF GEORGIA. de certify that I am well acquainted with C. C. applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1897.

NOTE-The blanks spaces must be fi.led.

-7/11 Hulong Ordinary Fiction County. Par Annlicante Haratafara Allawad Danciana

tot whytiograps motorology with non-transforms.
STATE OF GEORGIA,
Fullon County.
0'
Personally appears PP Reca of Fullow
County, State of Georgia, who being duly sworn, says on eath that he is a bona fide citizen
and resident of said County and State, and has resided in said State gontinuously ever
since the day of Live This -; that he is years old and
by occupation a Cafeenthe; that he enlisted in the military service of the Confed-
erate States (or of the State of Seorgia) during the war between the States,
and served for the torm of 3 (Banking) in Company and the Regiment of
that his physical condition is as
follows: To carrie of the state
Tocinia general debilite
that his property consists of the following items
of the value of Dollars, that by reason of his physica:
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,
1884, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of
Sworn to and subscribed before me, this, the
Sworn to and subscribed before me, this, the Philips Print Read (
1898. Shill fr. A Stelle fr.
Ordinary.
State of Georgia,
Gulton County.
I, MISTALLEY 2002 Ordinary of said County,
do certify that I am well acquainted with SPACECL the
applicant in the foregoing affidavit, and am well satisfied that the statements made by nim
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of
Affix four four
here. Ordinary Tracklan County

NOTE. - The blank spaces must be filled

POWER OF ATTORNEY.

STATE OF GEORGIA, County. ____, hereby authorize to recei e and receipt for the pension allowed, and request that he remit same to by Witness my hand and seal this 1899. Executed in presence of (I., S.)

SOLDIER'S PENSION

INDIGENT

POWER OF ATTORNEY

STATE OF GEORGIA.

County.

hereby authorize to receive and receipt for the pension allowed and request that he reunt same to by Witness my hand and seal, this day of

Executed in presence of

INDIGENT

SOLDIER'S PENSION

THIN W. LINDSEY

For Those Aiready Enrolled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, FULTON County.
Personally appears 292 Occasion of FULTON County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and res lent of said County and State, and has resided in said State continuously ever since the day of years old and
be occupation a Carfee the ; that he enlisted in the military service of the Confed-
erate States (or of the State of Lace) during the war between the States,
and served for the term of 3 terms in Company a , of - th Regiment of
that his physical condition is as
Tournia General Oletich &
that his property consists of the following items
a and
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 1899. I have heretefore as a resident of FULTON
county been allowed a pension for the year 189 🔏
Sworn to and subscribed before me, this, the
1 - 1000.)
2117 Bales of Ordinary.
State of Georgia,
FULTON County
W H HIII SEY
De De County,
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 ferry 1899.
Tour Print P
Ordinary FULTON County.
Note.—The blank spaces must be filled. Note.—Affidevit should not be attested before January 1st, 1899.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Rullare County
County State of Georgia, who being duly sworn, says on oath that he is a bona that entirent and resident of said County and State and has resided in said State continuously ever since the day of little 18 that he is lyears ald and by occupation a that he entisted in the military service of the Confederate States (or of the State of little little) and during the war between the States, and served for the term of little little, that his physical condition is as tellows
Maintain General deather of that his property consists of the following stems
of the value of Dollars, that by reason of his physical condition and poverty be is unable to support himself by his own exertion or fabor, and that he receives no pension but the one herein applied for Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of School County been allowed a pension for the year 1902. Sworn to and subscribed before me, this the Sworn to and subscribed before me, this the Sworn to and subscribed before Ordinary Ordinary Ordinary
STATE OF GEORGIA, Fullan County. I, John Rewilling and Ordinary of said County. do certify that I am well acquired with applicant in the foregoing affidavit, and am well satisfied that the statements in the by him in his said affidavit are true, and I know he is the individual he represents houself to be und that he resides in this County.
Given under my official signa use and seal, this
Gay of John 1901. John R Will Kenney. Ordmany Pullar County

MARRANT ISSUED WARRANT ISSUED WARRANT ISSUED WARRANT ISSUED WARRANT ISSUED WARRANT ISSUED WARRANT MARRANT ISSUED WARRANT MARRANT ISSUED WARRANT MARRANT MARRAN	Ι,				unty.	of			eby authoriz
Witness my hand and seal, this	eceive	and rec	ceipt fo	r the p	ension	allowed, an	id request	that he re	emit same t
Witness my hand and seal, thisday of									,
Executed in presence of					this	day			
1900, 1900.						THE REAL PROPERTY AND ARREST LAND	ar. 486772222888874874474447474748788888	1864 (1864) (1867) (1874) (1864) (1864) (1864) (1864) (1864) (1864) (1864) (1864) (1864) (1864) (1864) (1864)	L. C
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Aready Eurolled.) O. 48-20 NDIGENT R'S PERSION, DOCLECK FULTON FULTON AN. W. LINDSEY, Committee of President AREANT HARDED TO		en 10997 3		manufacture of the commendance of		•			
Aready Eurolled.) O. 46-20 NDIGENT R'S PERSION, DOCLEC FULTON FULTON AN. W. LINDSEY, Comment of Present AREANT HARDED TO									
Areay Euroled.) O. 4640 NDIGENT R'S PERSION, DOCLEC FULTON RRANT ISSUED A. LINDSEY, OMERAY ALENDS TO									
Areay Euroled.) BYS PERSION, PLEACE FULTON EULTON AND LINDSEY, Comment of Pressor									
APPLICATION PORTICAL PORTICAL PORTICAL FULTON FULTON AND LINDSBY, COMMENT ASSUED AND W. LIN					- ope extra		y	4 000 0	
PS PER FULTON FULL TON W. LINDSE OF STATE OF STA		1		-	- mp even	1 ()	. ,		h !
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N S S S S S S S S S S S S S S S S S S S	Enrelled.)	9	T	ENSION,	ċ	N N	SUED 1/4_1900.	DSEY,	010 TO
	c. rect. pady Enrelled.)	320	GENT	PENSION,	00.	Recol	17 ISSUED	LINDSEY, Ownshinter of Periods,	F BARDED TO
	present service. Arealy Enrelled.)	9320	DIGENT	R'S PERISION,	900.	O Recod FULTON	IRANT ISSUED	N. W. LINDSEY, Commissions of Precious,	RAST BANDED TO

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.
FULTON County.
Dersonally appears PRICE of FULTON
The state of the s
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 Succession 18; that he is 80 years old and
by occupation a Carfenter; that he evisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of 3 years in Company Q, of th Regiment of
12-Bat-a Burnly ; that his physical condition is as
follows:
11 Herria General delercity
· · · · · · · · · · · · · · · · · · ·
that his property consists of the following items
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1900. I have heretofore as a resident of FULTON
county been allowed a pension for the year 189 9
Sworn to and subscribed before me, this, the
(b) day of Jany 1900.) mark
Ordinary.
ν
State of Georgia,
FULTON County.
,
I, W. H. HULSEY, Ordinary of said County,
do certify that I am well acquainted with I be ceed the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 Jany 1900.
your \ mail \
- Trues
Ordinary FULTON County
Vone Charles and and

Norn.—The blank spaces must be filled. Norn.—Affidavit should not be attested before January 1st, 190 POWER OF ATTORNEY.

STATE OF GEORGIA,

County

In the County

In the County

In the person allowed and request that he remit same to the person allowed and request the perso

Callenson.

SOLDIER'S PENSIO

OODE SECTION 126.
(FOR THOSE ALREADY ENROLLED.

Regiment A

WARRANT HANDED TO

JOHN W. LINDSEY,

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and the second second

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
Personally appears Parad of inton.	-
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citize	n
and resident of said County and State, and has resided in said State continuously evo	er
since the day of Settle 18; that he is years old an	ıd
by occupation a that he enlisted in the military service of the Co.	n
federate States (or of the State of) during the war between the States, and served for the term of in Company, of the Regimen	nt
of _ full	
Cornia Grad debility	
that his property consists of the following items	
of the value of Dollars, that by reason of his physic	al
condition and poverty he is unable to support himself by his own exertion or labor, an	ıd
that he receives no peus on but the one herein applied for.	
Deponent desires to participate in the benefits of the Act, approved December 15t	h,
1894, and the Acts amendatory thereof, and makes application for the pension to which	he
is entitled for the year 1902. I have heretofore as a resident of	
county been allowed a pension for the year 1 901	
Sworn to and subscribed before me, this the PANA (1)	
Childenson Ordinary	
STATE OF GEORGIA,	
County	
I John R. Williamson. Ordinary of said County	ίy,
do certify that I am well acquainted with FIFTHER	
the applicant in the foregoing affidavit, and am well satisfied that the statements made	bу
him in his said affidavit are true, and I know he is the individual he represents himself	to
be and that he resides in this County.	
Civen under my official signature and seal, this	
day of 902	
Affir your hand here	
Nors.—The blank spaces most be filled. Nors.—Affidavit should risk be attested before January 1st., 1992.	ty

NAME, Rood, Phillip P.

WHEN AND WHERE BORN? In Jasper Co. September 16th. 1880.

ENLISTED WHEN AND WHERE? Atlanta, Ca. January 1868.

COMPANY AND REGIMENT? Co. A, lat. Battalion O'Bannere 9

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERET

RELEASED.

WHEN AND WHERE SURRENDERED? Close of the war.

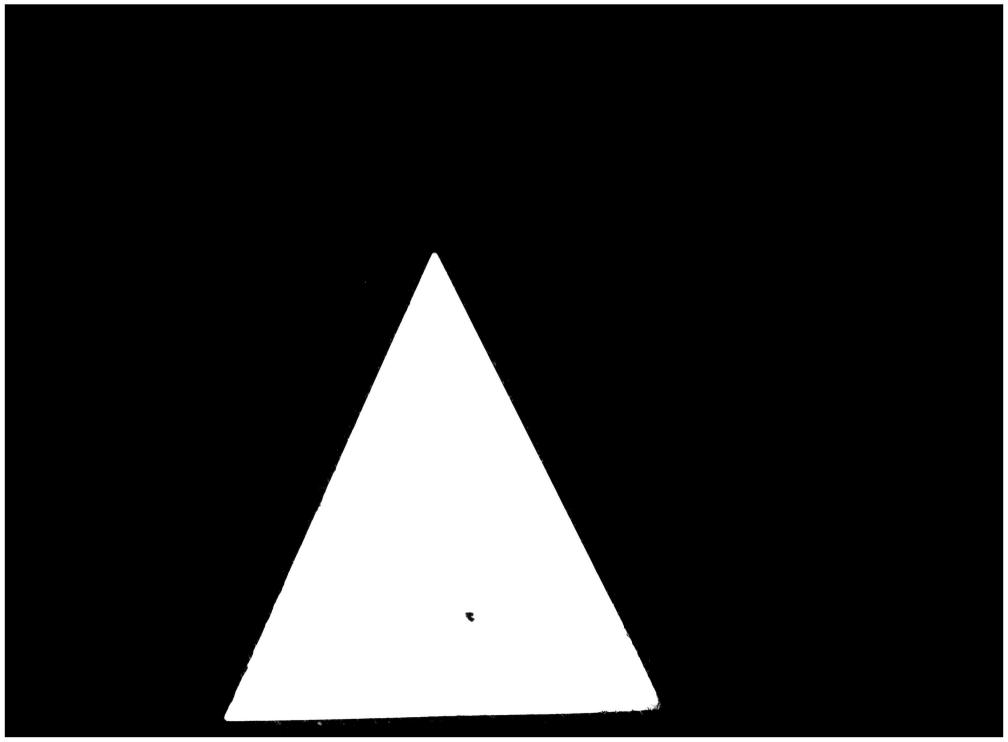
IF NOT PRESENT AT SURRENDER, WHERE ALRE YOU?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES. William Mc Connell. No data.

COUNTY.



(To Be Paid to His Widow or Dependent Children) UNDER ACT APPROVED OCTOBER 9, 1891. STATE OF GEORGIA. + veton Personally before me comes Mrs. Ida may Reed, of said County, who after being duly sworn, on oath says that she is the widow of U who was duly enrolled as a Indight Pensioner from the County of tueston and was paid a Ronsion of One Hundred Dollars from 7 weton County for 1922, and that the said I'm Ried die in tueton County on the 1/4 day of Jan , 1823, and at the time of his death a Pension of \$ /00 was due him from County and unpaid for 1923 Applicant further swears that she married the said U M Reed on the H day of May 1421 1 in 100 ft State of Gibilia, 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 Peusion so due and onpsid be Sworn to and subscribed before me this 23 day of tek 1923, me Chattahorck, Ordinary. Ida Mayx Read (L. 8.)

(SEAL.)

(SEAL.) AFFIDAVIT OF WITNESS STATE OF GEORGIA, Fuctor County Personally before me comes H U Free man who I my Reed while in life and that he knows Mrs. Ida Nicey Reed above applicant; that he knows that the said together as husband and wife at the time of his death on the and I know that she is his dependent widow. Sworn to and subscribed before me this 23 day of Tel 1923 arthur R. Marbet, Ordinary. H My Heresse

ist. This form can be used by guardian, or minor children, where there is no widow, and the Ordinary must, in all cases, and certificate of marriage attached hereto, if marriage is not proven by with ness.

Avoid the use of the secremously large form of marriage certificate in common vogue throughout the fitzate, suit able after the common of the certificate in certificate in the certificat



MISS IDA PHILPOT

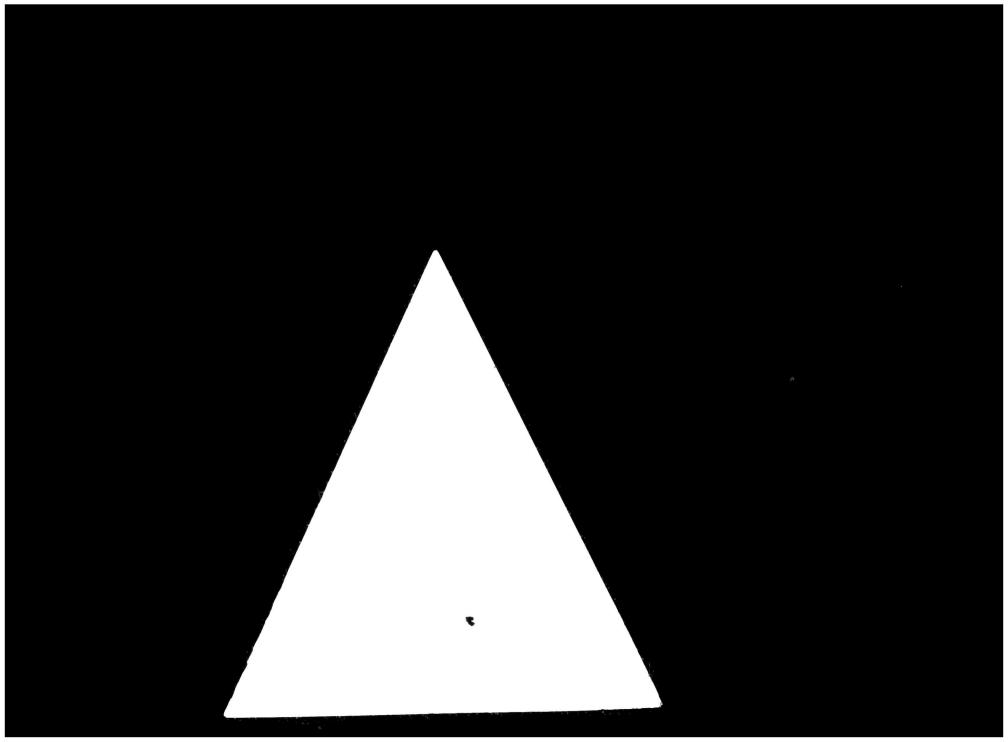
WERE UNITED IN THE HOLY BONDS OF MATRIMONY

J.A.WILSON N.P.& J.P.

On the 4th day of HAY in the year of our Lord 1921

as appears of record in my office in Maritage Record, book "E"

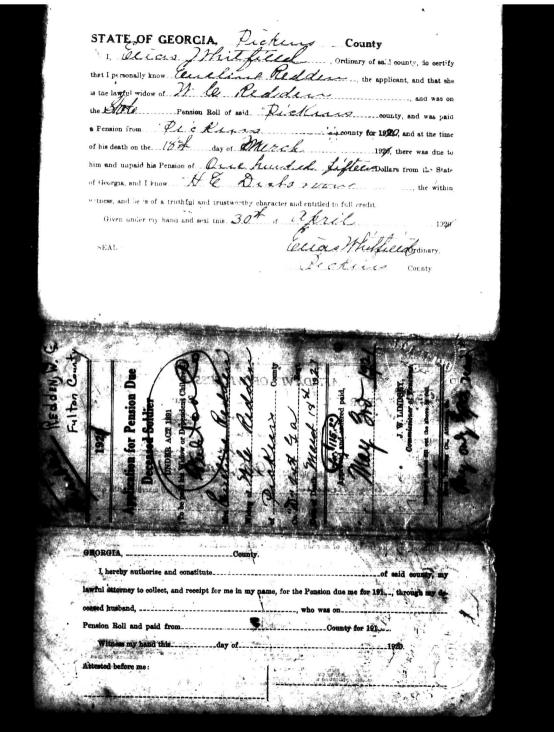
. This .5th day of FEBRUARY 192 8



		Redden W. G.		and the second s
Pension Rell Witness	GEORGIA, Lareby s Lawful strorney reased husband	192	of Georgia witness, an Given	SFA: that I pe the Lag the Pension
ss my hand paid	by authorize s rney to collect	Application for Pension Due Deceased Soldier	eorga, and I know eorga, and I know eorga, and he is of a truth ess, and he is of a truth ess, and he is of a truth ess. I have a like the control of the co	TATE OF L. C. C. A. A. C. C. A. A. C. A.
from	and constit	UNDER ACT 1891 To be part his Widow or Dependent Children	2/E × 3	GEORGI
day of	TiteCd	m Churches Redden	Usike L HE L and trustworthy well this 3.0	A China Constitution of the constitution of th
	County.	of Pickers County co D: 1x4 4 a Regt	L. Luken Dx x x x Dx x x f	
	for the Feas	Date of Death March 18 2 3	The same of the	in the second
('ounty fo	non due me	Approved and ordered paid,	the state of the s	Condinant
1920	of sa	May 300 1921	eca-Dollars Prest	of sud he appli
8	aid county,	J. W. LINDSNY, Commissioner of Pensions: Occinet, should fill out the above in fall.	rs from the w	ounty, do unt, and t and and we and at th
	.₩ E.	Don't Printing Co., Atlanta Ch.	within 1994	vertify hat she was on was on

Attested before

y ...



(To Be Paid to His Widow or Dependent Children) UNDER ACT APPROVED OCTOBER 9, 1891 STATE OF GEORGIA, Cickery County Personally before me comes Mrs. Elansline Medder, of said county, who after being duly sworn, on oath says that she is the widow of Male Redden who was duly enrolled as a Aisthlal Pensioner from the county of Prekling and was paid a Pension of Miss to 1 \$90" Dollars from Pullius county for 1924, and that the said We Redden died in Perkuns consty on the 18 4 day of March 1921, and at the time of his death a Pension of 115 was due him from Da Chaira _______county and unpaid for 1926. Applicant further swears that she married the said HC Redden the 29th day of Ochtler 1860 in January county and wife, and is now his dependent widow, and she asks the Pension so due and unpaid be paid to her. Sworn to and subscribed before me this 30 \$ day of Peril 1924 Dickers County. AFFIDAVIT OF WITNESS STATE OF GEORGIA. Partient Personally before me comes Ar. 6. Dishayour on oath says that he knew W. G. Rigidin and that he knows " Mrs. Mrs. Smaline Reddun the above applicant; that he knows that the said ... Who Redden and & inaugaline Redden were in due form of law married in the county of January in the State of Longia on the 28 4 day of Oclobe , 186 3 and that they resided together of March 1921, and I now know that she is his dependent widow. Sworn to and subscribed before me this 30 H day of Alasal 1928 Elias Mustee Brdinary

Application for Pension Due Deceased Soldier

(SRAI4). New interests and the property of the second REDDICK, MART REEVES, CMAP Dept. 406 State Capitol, Atlanta, Ga. Nov. 26, 1941. Jlass "B" Approved for Dec. 1941. Records show that John S. Red-Records show that John S. Red-dick enlisted in 1864 in The Naval Ordnance Works Battal-ion and was paroled, Charlotte, N. C., Eay 3, 1865. Original letters, this day re-turned to Mrs Reddick, sub-stantiate above statement from the War Dept., Washington, D.C. Widow's Application Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendments of 1920 and 1937. Seein Senduon County FULTON Name REDDICK, MARY REEVES (Mrs. Widow of REDDICK, JOHN SMITH Date of Marriage Feb. 16, 1904. Date of Husband's Death Feb. 10, 1986. Company Naval Ordnance Works Bet Approved November 26 for Dec 1941 Henderson Director. CONFEDERATE DIVISION State Department of Public Welfare

Regiment

RECEIVED

RECEIVED SONFEDERATE DENSION & RECORD DEPARTMENT, NOVEMBER 26, 1941.

onfederate Pension & Record

Confederate Pension 406 State Nov. 26,

Tors

Widow's Application

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

Name REDILLIK, MARY REEVES (Mrs.) Date of Husband's Desth Feb. 10, 1926. Naval Ordnance "orks Ba, North Carolina, Date of Marriage Feb. 16, 1904. JOHN SMITH, Widow of HELLICK, KCm Ifin

CONFEDERATE DIVISION State Department of Public Welfare

RECEIVED
CONFEDERATE PENSION & RECORD
DEPARTMENT,
NOVEWBER 26, 1041.

Approved November 26 for Diff. 1941

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 appeared before me More Mary Reves Canada 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 1987, and submits testimony to support the same, and,	
arter being duly sworn, true answers to make to the questions propounded, answers as follows to-	
wit:	
SECTION 1.	
1. What is your pame, and where do you reside? (Give Post Office and County). Mr. Mary Cerres Redeak, R. 7. D. #1 Valuetto Justin.	ao. Ba
2. How long and since when have you been, continuously, a bona fide resident citizen of the State	
of Georgia? Auty (3-19/9	
Give date, or year, of your birth June 29. 1871 Age? 70	,
8. (1) When, (2) where and (3) to whom were you married 2 16-1904	
8. (1) When (2) where and (3) to whom were you married to 16-1904 Atlanta, JA. John Smith Reddeek	J.w.
a Have you rearried since the death of first and soldier burks 12	
b. When and where did your soldier husband die? Feb 10 1926. Hagh, Ports	1 40
c. Were you residing together when he died? Yas	, , ,
d. If not, how long had you resided apart?	
e. Are you now a widow?	
f. Have you or your husband heretofore been paid a pension by the State? Ho	
g. If so, in what county was first pension drawn and what year were you or your husband placed	
on rolls?	
SECTION II.	
 When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan- try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops. 	
Table A. I. Mark A. Array and A. Land and	
Mated in NorthCarolina in the Laval Sattalion Ordnance Works 1864. Surrer Jered, Charlotte, M. J. Nay 3, 1865.	
2. When and where was the Command of your husband surrendered?	
Charlotte, N. C., May 3, 1e65.	
8 Was your husband personally present with his Command when it was surrendered?	
, eof	
4. If he was not present, state specifically and clearly where he was	1
5. When did he ! ave the Command?	
a. For what cause did he leave?	- 1
b. By whose authority did he leave?	1
c. For how long was his leave of absence granted? d. In what way?	,
e. What was his physical condition when he left his Command?	
f. What effort did he make to return to his Command?	
g. In what way was he prevented from going back to his Command?	

Sworn to and subscribed before me, this the . 196// Tulton (SEAL OF ORDINARY)

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?

hirs mary Ruses Beddeck

answered the Ordinary shall swear applicant and the want will true answers make to each of the questions as

dicense if obtainable. If not, prove marriage by some person, or by gen-

of Marriage Certificate in vogue throughest the State. A short, simple form is

Court of Ordinary

FULTON COUNTY STATE OF GEORGIA

CERTIFIED COPY OF MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

ME. JOHN SMITH PELLECK AND

MISS MARY REEVES

Recorded in Book

THOS. H. JEFFRIES, Ordinary

CONFEDERATE PENSIONS & RECORDS STATE DEPARTMENT OF PRODUCTION

MUNICIPALITY 406 STATE CAPITOL

ATLANTA, Georgia

WHEREAS :

Mrs. Mary Reeves Reddick, Class B, widow of John Smith Reddick, 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 and that a copy of this order be sent to the Ordinary of said County,

This, the 26th day of November 1541 .

Director, Confederate SECONDATE OF THE PROPERTY OF THE PARTY OF TH

Pension & Record Department.

WACKDERLY

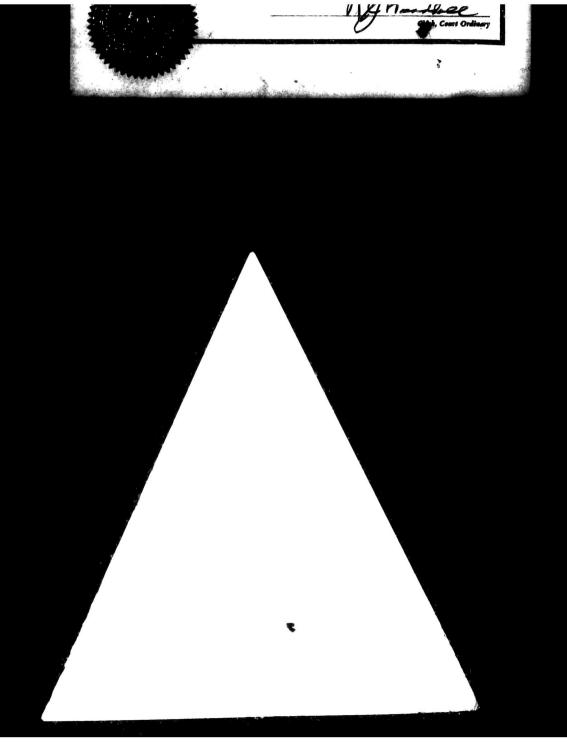
MARRIAGE LICENSE

State o	f Beo	raia-A	ulton	County
---------	-------	--------	-------	--------

To any Minister of the Gospel, Indge of Superior Court, Instice of the Peace, or other Person Authorized to Solemnize,

You are hereby authorized and permitted to join in the honorable state of Matrimony MR. JOHN SMITH REDDECK

nonorable state of Matrimo	my MR. JOHN SMITH REDDECK
and MISS	MARY REEVES
According to the Rites of your Church, Pr	rovided there he no tawful cause to obstruct the ews of this State; and for so doing this shall he
	TIPICATE THEREON TO MY OFFICE FOR RECORD
Given under my Hand and Scal this	16th day of FEBRUARY 1904
	JOHN R. WILLIAMSON L.S.
	Ordinary
hereby certify that	MR. JOHN SMITH REDDECK
and MISS MARY REEVES	
vers joined together in the HOLY BANS	OF MATRIMONY
on the 16th day of FEB.	
m the ANMA day of American	
	R. L. CAVE, N. Q.
Committee state of the	The second section of the second section and the second section sectio
	is.
State of Georgia,	ORDINARY'S OFFICE
S. S.	
Fulton County	ATLANTA, GA., NOV. 26 19 41
, R. J. Wooddall	, Clerk Court of Ordinary of said County, hereby certify
that the foregoing is a true copy of the N	Marriage License and Certificate of Marriage of
MR.	JOHN SMITH REDDECK
andMIS	S MARY REEVES
as the same appears of	record in this office.
Given under my	oficial Signature and Seal of the Court of Ordinary, the day
and year aton	resald.
	Manshae
	Old Court Outle



Redding a. S. (anderson						1	accentition (the consequence of the consequence)
Reading a.s. (anderson telton County	tons to see the second	3	1 1			to rpoe	1
INDIGENT PENSION		The second secon			Witness my ha	ive Aud receipt.	
1903.					hand and scal, th	for the pension	
Name Andrew & Redching						n.allowed and m	COUNTY.
Co. & Such Bull Ga Rogt. Approved 1908.	+			1	day o	of equisitability	,
JOHN W. LINDSEY, Commissioner of Pensions.				•		emit same to	
WARRANT HANDED TO							
Ordinary Will furthe Name of Applicant, Ordinary and Regiment on Block as indicated above. Get W Hydron, State Fristey, Alignet.			8	1 .	1908	bereby author	

TOWARD OF ALTONOMET. STATE OF GEORGIA, to receive and receipt for the pension allowed and request that he remit same to Executed is the presence of

QUESTIONS FOR APPLICANT.

	STATE OF GEORGIA,
	to avail himself of the Pension Act (Section 1254, Code) hereby submits his proofe, and after being duly sworn true answers to make to the following questions, deposes and enswers as follows: 1. What is your name and where do you reside? (give State, County and poss-office) dudy sworn true.
	2. How long and since when have you been a resident of this State ? Cold 21. 66. 511 1822 1. 54
	8. When and where were you born? All 120 agent of the of the dense of
	4. When and where and in what company and regiment did you enlist or serve? I had to the form of the state of
ק	6. How long did you remain in such company and regiment? Gut Company of the such as the su
nsvorered	6. When and where was your company and regiment sucrendered and discharged and di
rod	7. Were you present with your company and regiment when it was surrendered 8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?
4	terring of the decrease and authority of the fundament in the
0	9. How much can you carn (gross) per annum by your own exercions or labor? 10. What has been your occupation since 1865? 11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty."
HODE	second, "infirmity and poverty," or third, "blindness and poverty"? Uses the strength of the force of the strength of the force of the strength of the strengt
d	13. What property, real and personal, or income, do you possess, and its gross value!
dopa	14. What property real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and
deston	14. What property real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? Any the property for the formal or read forms to the formal forms of the formal formal forms of the formal formal forms of the formal formal forms of the formal forms of the formal formal formal formal formal forms of the formal fo
V Cheston	14. What property real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same 1 the same to the
very wheeton	14. What property real or personal, did you possess in 1894, 1895, 1895, 1896, 1896, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? Any the first the former of the first that the first than a manufactory fruit to the first than a manufactory fruit than a ma
Today or destron	14. What property real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? Here the property to property the property of the property of the property did you teside during those years, and what property did you then return for taxation? 15. In what County did you reside during those years, and what property did you then return for taxation? 16. How were you supported during the years 1899, 1900, 1901 and 1902? 17. How much did your suppost cost for each of these years, and what portion did you contribute thereto by your own labor or income? 18. What was your amployment desing 1898, 1899, 1904 and 1902? What pay did you receive in each year?
Today oreston	14. What property coal or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same the stand to property the form of the sale or gift, have you made of same the stand to property the sale or gift, have you made of same the stand to property did you then return for taxation? 10. In what County did you reside during those years, and what property did you then return for taxation? 11. How were you supported during the years 1899, 1900, 1901 and 1902? 12. How much did your support cost for sach of these years, and what portion did you contribute thereto by your own labor or income? Internationally 1898,
Today Adeston	14. What property coal or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same the stand two property and you then return for taxation? The stand of these years, and what property did you then return for taxation? 10. How were you supported during the years 1899, 1900, 1901 and 1902? 11. How much did your suppost cost for each of these years, and what portion did you contribute thereto by your own labor or income? International stand of these years, and what portion did you contribute thereto by your own labor or income? International stand of these years, and what parties did you receive in each year? 11. 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? If the standard of the standard
Toneston Aneston	14. What property cost or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? A ment that the property and you then return for taxation? The fact that a ment that the property did you then return for taxation? The fact that a ment that the fact tha
The Manager	14. What property real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? And the first the former of the first than the first than the first than a manufactor of the firs
TORENTA CIRCLE	14. What property real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? I have the property along the property of the property o
Topiano Airon	14. What property read or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? Any the first that the first form of the first

the statement is us

AFFIDAVIT OF PHYSICIANS

STATE OF GEORGIA,
Fulton COUNTY.
Personally came before me exam Postlanova
formula College Colleg
both known to me as reputable physicians
of said County, who, being severally sworn, say on oath that they have examined carefully
Ti the state of th
such personal examination say that his precise physical condition is as follows:
Talondar Inaufficiency Since Actionia
Rheumatiam - Saternal Generahoids (bleading)
Chronic Diarhor Progressive deafross. Bushale
Working
The second secon
Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the
0 6 day of Soft 1903.) The Columbia with
hul Willamor Ordinary.
A DOMESTIC CONTRACTOR OF THE C
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
Tutton Comery
I, Johns Williams Ordinary, in and for said County, heroby certify
that the applicant
1881.
and that the witnesses, viz.: The first or agreement
. 0
are of trustworthy character, and that their statements are entitled to full faith and credit.
I further certify that before answering the foregoing questions the applicant and each witness took the oath
person prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.
2 7
the state of the s
Donnes of
Dollars of property, in 1901
Dollars of property, in 1902
Dollars of property.
In my opinion the foregoing claim is made in good faith.
Witness my hand and seal of office, this day of day of 1903.
Johns Williamson Ordinary,
of Fullow County.
NOTE:
1. Before any questions are answered, the Ordinary shall awars applicant and the
Defore any questions are answered, the Ordinary shall awear applicant and the witnesses in the following routs: "You shall true masses mints to each of the questions asked of you, and the widence you shall give will be in which to help you God."
2. Additional affidavite may be attached if blank spaces are insufficient. 2. In every case the Ordinary must cartify to the character of the winness, and as to the execution of the proof
MACHINE THE CASH

STATE OF G		1			
		COUNTY.	· Charles		
	1,			he	ereby authorize
		cî		0.00	and the second second second
to receive and	receipt for the p	ension allow	ed, and requ	est that he	remit same to
		at	-	to the William of Company	
by					
WITNESS 1	ny hand and seal, th	is.	day of		1904.
					[L. 5.]
Executed in	n the presence of				
\(\sigma_{\sigma}\)	-	****			
				1.0	
		1 1 manage	Contract of the Party of the Pa	A com thing the	Andreas
+ 32	ON		, ,	# J	1
- 26		1	و ا ز	E a	1 1 1

JOHN W LINDSEY,

WARRANT ISSUED

RIVER OF GEORGE

SOLDIER'S PENSI

INDIGENT

1904.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

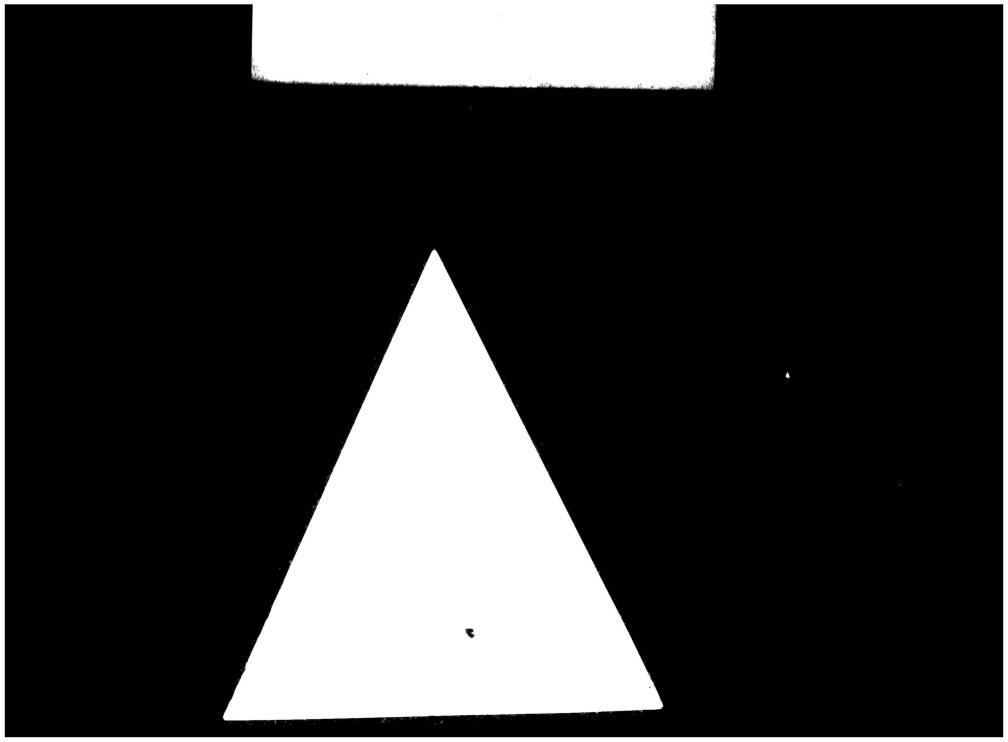
Rulton Profesion

TAN UTTRIORUTE HEUDIALAND BUTCAMED LEUSIGHZ STATE OF GEORGIA, Pastton County. Personally appears Col Redding 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 1887; that he is 6 / years old and , that he enlisted in the military service of the Conby occupation a____ federate States (or of the State of) during the war between the 11 Company of Judh Regiment States, and served for the term of of Lyce Batt Volo Later Wrig the anigade condition is as follows :_ that his property consists of the following items: Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of____ County been allowed a pension for the year ! ALEVA Co... Sworn to and subscribed before me this the day of AAN 20 804 1904. Jan Allie Vinson SPATE OF GEORGIA, do certify that I am well acquainted with Cl & Necleting the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this____ JAN 20 1904

Ordinary

Note. - The blank spaces must be filled

Norm.—Affidavi; should not be astested before January 1st, 1904.



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	TATE OF GEORGIA, (I)

Georgia,	~ / · · · / ·	County	
The unite	rsigned do certify roat		idding now of the
entry :	act in	's far same person	vincas Francisco
of comet vacan	de plast at legist the	seconds, and drew a par	isto of \(\lambda \) dollars
- 100 4 est for	Switzer's Same works	•	
Ceres unde	our Fund on Lothera.	sear of office	cery / 1908
		1. A stone	CCCC as
· · · · · · · · · · · · · · · · · · ·			

For Widows Heretofore Allowed Pensions.

STATE OF G	
County of	Fulton: } Mrs. H. J. Redding
who	being sworn says on cath, that she is a bona fide resident of said County of
Fulton	
, Fullon	State of Georgia, and that she has RESIDED in said Stat
continuously ever since	That she is the Widow of
-6.6	Relding who was a soldier in Compan
of the _	Regiment of 44
Volunteers, that he enlis	ted in said regiment on or about the month of about
186 2 , and served in	
life on the	day of Oel- 18 (State her
particulars of the husband	's death, when, where and from what cause.)
Was	wrighted at Perspoille 16.9
and di	within next day from down
100	
The same of the sa	The state of the s
Management and the control of the co	2 cm story
	The state of the s
	P = -10/2/16
I have been paid a	pension as a resident of
	, 1904, and now apply for the pension provided by law for the year ending
December 31, 1905.	1 and the state of
	1 pher 1)
Sworn to and sui	scribed before me,
thisaay of	1908.
2 Redigato	Post-Office Calla Co Office
The state of the	
	DV Duradi
State of Georgia	I, John Militurso
Weston.	County Ordinary of said County cartify that I am wall
In WARRE	Party Property of the Party of
acquainted with Mrs	Who made the above affidavit and
am satisfied that the fact	therein stated are true, and I know she is the individual she represents
to receive and receip	rifor the best each band present that
herself to be, and that she	has continuously resided in this State since the
day of	
Given under my of	icial signature and seal, this the day of JAN 905 1905
Given ander my of	
(Official)	John Redel Kinson
STRUTE OF CHORG	IV Fullon
The Anthropa State of the Control of	Ordinary of Ulton. County.

NOTE.—All blank spaces must be filled.

Vencior had Affiners must be alled.

Course OF GEORGIA Ordinary of Tulton Tulton. County NOTE - All Blank - DOWNERS - COS-V-4-U-9+ L4-P-y7 zet, 1905.

*

Fulto p County					
OODE SEC. 1254. (For Those Already Enrolled.)		bу	to receive	н	STATE
To Children 1899	Executed in pr	Witness my hand and scal	and receipt	,	E OF GEORGIA
SOLDIER'S PENSION,	presence of	and se	for the	7.1.000	-
Name Arm Rusi County Fullow		al, thisday of	pension allowed,	of	County.
WARRANT ISSUED		of	and request		
JOHN. W. LINDSEY, Commissioner of Fensions.			that he	NOTE OF TAXABLE PARTY.	
WARBANT HANDED TO		19	remit sa	hereby authoriz	
Goo, W. Haridson, State Printer, Atlanta.	L. s	900.	same t	thoriz	

For Applicants Heretofore Allowed Pensions.

Faction	County.		* * *	
personally appears	Lam	Rue of	Z. 11-1	11.
County, State of Georgia, who	being duly sw	orn, says on oath	that he is a bona he	le citizen
and resident of said County s	and State, and	has resided in	said State continuo	usly ever
since theday of		18.12; that	he is 80 years	old and
by occupation a .7	, that he -			- 5 -
crate States (or of the State of) during	the war between the	e States.
and served for the term of		in Company	T of 2 8th Dam	mont of
be we s	repr	; that	his physical condit	ion is as
follows: It is	of a	for te	e inte	
green-	- 00	u 10-6	Lace	,
X				
hat his property consists of t	he following it	ems	· · · · · · · · · · · · · · · · · · ·	
		•		
of the value of_		Dollars the	t by rooms of his	
ondition and poverty he is una	ble to support	himself by his	Own exertion or le	physical
hat he receives no pension but	the one herein	applied for	own exertion or la	oor, and
Deponent desires to partic	ipate in the b	enefits of the Ac-	approved Decemb	15.1
894, and the Acts amendatory	thereof and m	akes application	for the pension to in	er lotn,
s entitled for the year 1900. I	have heretof	Te as a resident	of the pension to w	Lich he
ounty been allowed a pension f	or the year 18	ne as a resident	01.07.2.	
Sworn to and subscribed be	fore me this	he)	صرمنيه	
Sworn to and subscribed be	nore me, this,	- Joan	mylea	· ·
17 day of Jan	718	900.)	more	
C/1 2800	may 0	ordinary.		
24a4a - C C '				,
State of Georgia,	,		_	
Fulle				
I, Monny	ezz		Ordinary of said ('ounts
certify that I am will acquai	nted with	An	Dan de	ounty,
plicant in the foregoing affiday	dt and an wal	I noticed that al		tne
his said affidavit are true, and	I know he is	the individual h	statements made	by nini
d that he resides in this Count	v.	the individual in	represents nimsen	to be
		ial signature and	seal, this /7	
CO Acres 4	2, 3, 5, 5, 1		scal, this	
Amx your }		1900.		
And her		rry	uses	
		14. 1	1	
of the second second second	Ordin	ary	then C	ounty.

NAME TO A

YEAR COUNT

WHEN AND WHERE BORNY Section to State and section of the section

ENLISTED WHEN AND WHERE?

RAIK

COMPANY AND REGIMENT? Co D SOLD Rocks Coopele Tolo . Toronto

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

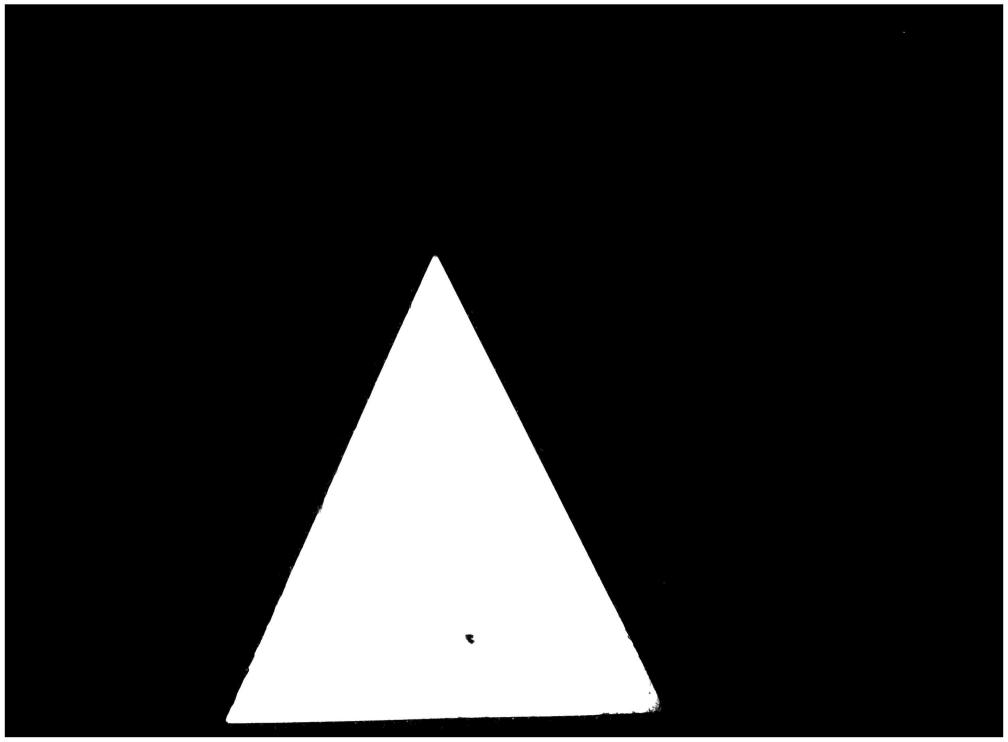
WHEN AND WHERE SURRENDERED?

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES.



ORDINARY'S CERTIFICATE

1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				. ,
Widow's Application	NOTES: 1. Be you want to have a second t	SWOFLL L	That I also know This Common the Common that Common that Common that Common the Common that Comm	STATE OF
To Be Put on Red! in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—	Before any question you do solemnly you shall give will be you shall give will be Additional affadrate must all affadrate must conly widows who make takeh certified copi widows are made and attach certified copi widows of Dhashled written became he	ınder 1.19 he	also know I	STATE 'N GEORGIA, PAISON Thomas I Thomas know Mrs / A L. J.e. know Mrs / A L. J.e.
As Amended by Act of 1919. County Fultor.	ly swear that y swear that le the truth rits may be sit be made married priv opics of mar led Fension he made no	Sworn under my hand and official scal	That I also know This M. That I also know This M. The Charles affidavis second to full faith and and a second to full faith and and a second to full faith and and a second to full faith a secon	as H. Jef (land Reese welf to be and
Name Mrs. Mary Land Recse.	the will the below the below the the the the the constant of second the terms of terms of the terms of t	÷.		COUNTY Cess
Company E Regiment 16th Lenn. Cas	d. : space ary : lary :	opping this	they are tru	Or O
Approved	applicant a each of the each of the ifficient by of resule thed. ot, prove in the Rian) and spurred to deprive to deprive to deprive to design the second spurred to design the second spurred to design the second spurred to design the second secon	***	That both of the foregoing we need that they are truthful and trustworthy	Ordinary olicant for a
	£ 5 £ 1	1 . C	s as to marr regoing wer	dusary of such Cou for this pension, numing resident of
J. W. Linds Commission of Consess	the you pers	Ordinary	witness as to marriage, and I also know the foregoing were duly sworn by ag- and trustworthy and their statements	STATE OF RECORDIA. COUNTY Thorize H. Jef fries Ordinary of said County, do sertify hat I the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona full county and was the county and the county and was the county and was the county and was the county and the county are considered to the county and the county are considered to the county and the county are considered to the county and the county are considered to the county are considered
Byrd Printing Co. State Printers, Atlanta.	following words: and the evidence on, or by general erm of husband's	19/4 nary. County.	also knew	tify hat I she is, the fand was

	OF GEOEGIA,				3				*.	-57	ъ
	Fulton			COUNTY	. }						
I.	Thomas	н. Те				Ordinar	v of said Car	unty, do certii	u shar I		ı
ou Mrs	/ aku	nd Hee	8 d								ı
				. To a second				, and that sh			ı
the 2	r presents herse	ing	m mar		7	continui.ne	resident of	said County	and was		ı
	also know		1. 1		19/9						I
That	C.L.	d		1	V 41			iage, and I al			ľ
				- 1	that be:	of the fe	oregoing wer	e duly sworn	by may	lew	
	aing the respective		18. 9914	that they	are trut	i!u. an-l t	rustworthy	and their sta	tements	5	I
	under os ham.		al se-	of o 9 €	ce) this	7	20 0 C	ef	10/4		
SEA			307		T.	dra	- ay 0:	. x y	197		
				1 -1	-+	17	1.	Crdinar			
						_		Со	unty		ı
	Sefore any question Voc do solemniy a				shall swear	applicant a	nd the witness	in the following	words:	- 1	
	1 1 1 1 1 - CC to										ı
	All affidaves must Only widows who no Attach certified con-	erried prior	to first	January, ise f ibta:	1881, are cu	otiel.	nce.	ne nerson or he	gar and		Į.
6. 4	Widows of Disabled	Personers	must us	e the Blue	And estu-	n diank and	atata an Leann	e full term of h	general		
*	service because be	made as pr	treat of	Service and		managed to 1					
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and the	E			Shear 1918	Cav			W. I. W.	Printers, Alasmit.		
	E			Shear 1918	Cav			J. W. Libiti commission of P. stons.	State Printers, Albanta.	31-100	objective and the second
The state of the s	E			Shear 1918	Tenz, Cav			J. W. Lipkill Commission of Paragon.	Co., State Printers, Atlante.	31.100	
Mary drawn	W'S Applicati n Roll in Her Own Right Was on the Indigent Roll Juder Act of July 11, 1910— Lmended by Act of 1919.	Pulton		LI AT II REGRE. CELON 1918	Tenz, Cav			J. W. Lipping	nuthe Co., State Printers, Affante.	0.31.100	
The state of the s	W'S Applicati n Roll in Her Own Right Was on the Indigent Roll Juder Act of July 11, 1910— Lmended by Act of 1919.		Mrs. Mary Land Resse	TALL LA ME . " RECES.  Elbur 1918	16th Tent. Cav		عر. عر	J. W. L. Com.	Printing Co., State Printers, Atlanta.	10-31-110	
The state of the s	Vidow's Applicati Be Put on Roll in Her Own Right Rushand Was on the Indigent Roll Put on Under Act of July 11, 1910— As Amended by Act of 1919.	Pulton	Mrs. Mary Land Resse	TALL LA ME . " RECES.  Elbur 1918	16th Tent. Cav		٩	J. W. L. W.	Byrd Printing Co., State Printers, Atlanta.	10 31 100	
Month of the state	W'S Applicati n Roll in Her Own Right Was on the Indigent Roll Juder Act of July 11, 1910— Lmended by Act of 1919.			TALL LA ME A. RECASE	Tenz, Cav	Approved	,,	J. W. L.	Bred Printing Co., State Printers, Atlanta.	10-31-10	おおおと かんしょう こうしゅう かんしゅう かんしゅう
Mary Condensation	Vidow's Applicati Be Put on Roll in Her Own Right Rushand Was on the Indigent Roll Put on Under Act of July 11, 1910— As Amended by Act of 1919.	Pulton	Mrs. Mary Land Resse	TALL LA ME A. RECASE	16th Tent. Cav		,,,,	J. W. Library	Bred Printing Co., State Printers, Atlanta.	10 31 10	おおおおとなっています。 マラー・カー・マー・ストラー・アー・アー・アー・アー・アー・アー・アー・アー・アー・アー・アー・アー・アー
March March 1991	Vidow's Applicati Be Put on Roll in Her Own Right Rushand Was on the Indigent Roll Put on Under Act of July 11, 1910— As Amended by Act of 1919.	Pulton	Mrs. Mary Land Resse	TALL LA ME A. RECASE	16th Tent. Cav		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J. W. Lines	Bred Printing Co., State Printers, Atlanta.	10 31 110	
The state of the s	Vidow's Applicati Be Put on Roll in Her Own Right Rushand Was on the Indigent Roll Put on Under Act of July 11, 1910— As Amended by Act of 1919.	Pulton	Mrs. Mary Land Resse	TALL LA ME A. RECASE	16th Tent. Cav			J. W. Lines	Bred Printing Co., Bace Printers, Addust.	10 31.119	
	Vidow's Applicati Be Put on Roll in Her Own Right Rushand Was on the Indigent Roll Put on Under Act of July 11, 1910— As Amended by Act of 1919.	Pulton	Mrs. Mary Land Resse	TALL LA ME A. RECASE	16th Tent. Cav			J. W. Lucius	Byel Pringing Co., Bate Printers, Addust.	10 31.16	
	Vidow's Applicati Be Put on Roll in Her Own Right Rushand Was on the Indigent Roll Put on Under Act of July 11, 1910— As Amended by Act of 1919.	Pulton	Mrs. Mary Land Resse	TALL LA ME A. RECASE	16th Tens. Cav			J. W. Ludio	Byed Pringing Co., State Printers, Addants.	10 31.11	
	Vidow's Applicati Be Put on Roll in Her Own Right Rushand Was on the Indigent Roll Put on Under Act of July 11, 1910— As Amended by Act of 1919.	Pulton	Mrs. Mary Land Resse	TALL LA ME A. RECASE	16th Tens. Cav			J. W. Ludio	Byrd Printing Co., State Printers, Adams.	10.31.11	

. County 19.33 **Application for Pension** Due Deceased Pensioner (UNDER ACT 1904) (To pay expenses of last illness and funeral) Deffue Ordinary TO PAY-Formany Jan Rosso 1930, \$120 ig. & C. Tax. \$ TOTAL Amount \$.. Approved and ordered paid Paro PAID TO ORDINARY ON THIS CLAIM: p1 4-4. Caro 812 15 35 TOTAL . 12/000 PL MAR 0 1983

STATE OF GEORGIA,
Multon COUNTY ( Wate Land Result said County)
who after being July sworn, says that sin is the valow of WW Rece
to when in the County of Pinala State of Mids she was married on
the Fox day of Dov 1-7 Hand that, she remained as sets and resided with him to the
date of his death in Opine 1918 and that she has not since his death remarried. At
the come of his death he was a resident of Elbert
of Georgia, and he was on the Pension Roll of the State and pand a pension
of * 80 m Ellert County for 19/ Sper annum, on account of being a wilder in
That she is them I wear to the resolute extremely sometimes of the Million and she
that the section of mean in the resident entering sent fainty of Court on and she has see continuously resided since 1 2 day of July 1
Sworn to and subsermed before me, this the
18 wall and
Change Colors on a continuery Miles Kate Lound Recons
of Decelen. County
SFAL
Affidavit of Witnesses to Prove Marriage and to Whom.
Date of Death of Husband
Date of Death of Husband
Date of Death of Husband
Personally before no somes of DR M started or known to be
Personally before no somes of DR M started or known to be
Date of Death of Husband  STATE OF GEORGIA  TOUNTY  Prosonally Sefere no some Services of the Market Service Service of the services of the se
Date of Death of Husband  STATE OF GEORGIA.  TOTAL  Prosonally Section to comes of the Mark State having been duly sworm say that set there can personal knowledge Mrs. A. A. C. Schown to be compensable and truthing personal knowledge Mrs. A. A. C. Schown the foregoing affective of the basic wild was the Mark State of the compensate of the same state of
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Date of Death of Husband  STATE OF GEORGIA  TOUNTY  Prosonally before no comes of the Marie born and swing been and swon to be responsible and tracking personal knowledge. Here Marie who made the foregoing affective to both with with the foregoing affective to both with with the foregoing of the same state of the sam
Date of Death of Husband  STATE OF GEORGEA  Formula Section in comes I A. M. S. T. T. C. Known to be responsible and fruthing persons in such Care's any after having been unly swore, say that ad the rote personal knowledge. Mrs. M. M. C. S.
STATE OF GEORGIA.  The second is before no seemes to see the second of the second in the foregoing in said that is and the foregoing who and the foregoing of the second knowledge. Mr. It will be and the foregoing of the second with which will be seen the foregoing who are see State of the second will be seen the wife of the second to the second with the second that she has not since remarked. That she became the wife of the second together as man and we continuously since day of the Land that the Walley was the same man who was on the pension rell of said State.  The Land that the Continuously since day of the Land that the Continuously since day of the Land that the Continuously was the same man who was on the pension rell of said State.
STATE OF GEORGIA.  Personalis before no comes of the Manual Construction of the responsible and tracking personal knowledge. Mr. A. W. W. L. S.
Date of Death of Husband  STATE OF GEORGIA.  TOTAL  Personally before no comes of the Market having been any swore, say that and the room personal knowledge Mrs. A Market who made the foregoing affebrual in bowle with word of the Market who made the foregoing affebrual in bowle with with ward on. The day of April 1910 and that she has not since remarried. That she became the wife of the College was man and we recontinuously since and any of the same man who was on the pension roll of said State.  Sworn to and subscribed before me this the day of fungaciant 1911. The Market was the same man who was on the pension roll of said State.  Sworn to and subscribed before me this the day of fungaciant 1911. The Market Mark
STATE OF GEORGIA.  Personalis before no comes of the Manual Construction of the responsible and tracking personal knowledge. Mr. A. W. W. L. S.

## 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)

Company of the Compan
GEORGIA COUNTY.
Personally before me, the Ordinary of said County, comes E. B. Bankston with
Autry & Lowndes Company of said County, who, after being sworn, on oath
says that he knew Mrs. Mary Land Reese 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
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 \$210.59, per sworn statements fully and completely
ITEMIZED hereto attached.
Sworn to and subscribed before me,  Clause Runary Scounty  (Seal of Ordinary)  Sworn to and subscribed before me,  Ordinary  **THE Country**  (Seal of Ordinary)
CERTIFICATE OF ORDINARY  GEORGIA, Fully County.  I, County Ordinary of stid County, do certify
that I personally know the same of the sam
citizen of said County, and that said person is of cruthful and trustworthy character, entitled to full
faith and credit; that I also know the the state of the s
the same person whose name appears on the Pension Roll of
was paid a Pension of Shirty (300) Dollars
in said County for 1922, and I now believe said pensioner to be dead; and that the instructions
at the foot of this voucher have been carefully observed in making up this voucher and the bills
which are attached hereto.
Given under my hand and official seal, this 19 day official
Final Town
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
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 hills must be sent to the Penning Department for appropriate
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 Pension Department.
Online and the state of the sta

JOH. W.	AWTRY, Pres.	& Trees.	
BELANE	A LOWNDON	Vice.Pres	-

WALRITT TOO

## AWTRY & LOWNDES COMP

FUNERAL DIRECTORS

AMBULANCE SERVICE

6/19/33/ ATLANYA, GA.

IN ACCOUNT WITH

Mr. Paul P. Reese,

Miss. Ethel Reese.

No. IIO5 Va. Ave., N.E. Atlanta, Ga.

For the Funeral of Mrs. Kabie Reese. 6/7/33/ (Widow W.W. Reese.) One Complete Funeral Out-Fit .---I85.00 Cleaning & Pressing Dress. . 50 Long-distance Phone. I.00 Constitution. 3.20 Journal. I.95 Georgian. 2.70 Transportation .---7.74 Music .---5.00 Packing Flowers .--3.50 210.59

Georgia, Fulton County.

Personally appeared H. B. Bankston of Awtry & Lowndes Company who wwears that the above bill is just and true and was for funeral expenses of Mrs. Mary Land Meese.

Sworn to and subscribed before me This 19 day of June 1932 C.C.Ordinary

	1033
Received from Thos. H. Jessers	os.Ordinary
Funeral expenses of Mrs.Mary Land	Reese
\$ 20.00 Cutry & Louis	

STATE OF GEORGIA. COUNTY OF FULTON.

Personally before the undersigned authority now comes C. C. LAND, who upon oath sava :

That he was present at the marriage of William W. Reese and Miss Mary K. Land which tok place in Pirola County, lississppi on the 25th day of November 1874; that the said William W. Reese and Mary Land Reese resided together as man and wife continuously from the date of their marriage to the date of the death of said William W. Reese in April 1918; that the said Mrs. Pary Land Reese has not remarried since the death of her husband and is now his lawful widow.

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

C. C. Jurid

Received of Thomas E. Jeffries, Ordinary, & This amount has not previously been paid and is now ewing to me.

A Certificate

STATE OF GEORGIA, County of

IN RE: Expenses last illness and funeral Mrs. Many Land Lees 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 paymese expenses.

10 day of lug

, Ordinary

(SEAL)

2. Left no estate of any kind or value, sufficient to pay these expenses. This the 16 day of ling (SEAL) , Ordinary (Ordinery will please complete and return immediately to A. L. Henson, Director, Voterans

Freston County						
No		4	<u> </u>		of remit the sa	STATI
WIDOW'S				Execut	ne to me	OF.
Indigent Pension.		247.		d in presen	ac .	GEOR
1901.	£ .	if		oe of Ordinar	<u>.</u>	QIA.
Name Men DeReese		· O		y,	County, 10 1	Count
Widow of Joseph Ruses		-35			receive and	<u></u>
Appeared 1900)	•		•	į	receipt for	
		- A			the Pension registered	
ANDERTO	News			·	n allowed a	
The state of the s			Em E	11. 8	and that he	

		Applicant,
	* 1	STATE OF GBORGIA,
STATE OF G	EORGIA.	T////A)
	,	County
	County.	Mrs J. Kelsel of said State and County, desiring to
$\mathbf{I}_i$ .	hereby authorize	avail mercell of the Pengion allowed to Indigent Widows of Confederate Saldies and A. C. C.
·		1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:
	.County, to receive and receipt for the pension allowed and that he	1. What is your name and where do you reside? (Give State, County and Poet Office)
remit the same to me at	by his check or registered mail.	and I whate Charle Tiller le "a
Witness my hand t		2. How long and since when have you been a goldene of this bear a
	this day of	Was from on the an hird till beautiful deriviting
Execut ed in	presence of	3. When and where were you born! 11 1 manife 1836 1 1866 1457
	Ordinary.	When and where was your husband horn—state his full name, and when were you and he married?
	Ordinary,	Morgan 6. 18.0 great to Record to a cod of
	County.	
	r.,	5. When and where, and in what Company and Reciment did your Ausbard split or come design at
SEAL		5. When and where, and in what Company and Engineers did your substant callet or surve during the war between the States (March 2006)
( )		madum ba
		6. How long did your husband serve to said (mpony and Regiment's Win take () land
		7. When and where did your husband's Company and Regiment surrender and was discharged?
		We All to the last
		c. was your husband present at the time and place when his Company and Regiment surrendered?
		9. If not with his command at surrender, stage clearly and specifically where he was, when he left som
		mand, for what cause, and by what authority? Hee was Museut.
		and to the total of vine authority fifth to the fellant
	•	
		10. When and where did your husband die? Alle
	• •	
	the state of the s	11. Which of the following grounds do you base your application for Pension, viz: First-Age and
	Costin Las	Poverty; Second-Infirmity and Poverty, or Third-Blindness and Poverty? 1900 Portally
		1 13 13
		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 we have a condition that you cannot earn the third state whether the
	the state of the s	the third, state whether you are totally blind, and when and where you lost your eight
		the third, state whether you are county blind and when and where you lost your sight.  Informity of forcesty de ght wary wear.
	4.7	
	A Service Control of the Control of	18. What has been your occupation since your husband's death? Hele House & did house
		work or mit don
		14. How much can you earn gross, by Gour own exertion or labor? I Sun hose about 20 n &
		15. What property, real or personal, or income do you have or possess, and its greet value? 15 to professional of the state of the stat
		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?
	ar : t.o.	7 (-2)
	villar s	17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
* 4		of within the notice makes to
STATE OF THE PARTY		18. How have you been supported since death-of husband, and especially for 1899 and 1900? The gastrong
	Contract Con	
11 18	2 *   X   A   A   A   A   A   A   A   A   A	19. How much did your support got for each of those years, and how much did you contribute by your
		own labor or income? Obout 10 bryo dellars
K.		20. What was your employment during 1899 and 1900 - how much did you receive for each year?
		detrecured my board for my Children's
	三 《不分子》 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	91 Hara you a Carilla It I am
	· 我们一直会会让一次是这些的自己的自己的自己的。	any lands or other property? true Aunt tive Widowed daughters, they
		22. Have you ever made an application for pension before?
C	The state of the s	and one 28. Hew many applications have you made for a Pension, and under what class? This or
Wolf 1d te la		Article Constitution of the Constitution of th
2		Bworn to and subscribed before me this 6th 1 122 D
4 4 1 4 5 4 5		Sur Do Rusic
the local many legiting to the last		Tolling 180
		Quidings

1000 Mm 01 3.

27. How was she supported for 1899 and 1900? County. In Stoolber With Patito 28. How much did applicant contribute to her support for last two years? don't I have been presented as a witness in support of the Application of Mrs. S N R Common V 39. Give a full and complete statement of applicant's physical condition? don't the forestable and Now North Which the has been able of de any for a Penajon under the Act of (9et 1900, and after baying been duly sworn true answers to make to the ( see of Auport in 5 years & Know she has not What is your name and where do you reside? A Pleother in Hetton C following questions, deposes and answers as follows 30. What interest have you in the recovery of this pension by the applicant? 2. Are you acquainted with the applicant, Mrs. S. H. C. E.S. E. If so, how long have you known her! For forly 42 kno or 24 one Sworn to and subscribed before me this 13 77 Mas 3. Where does the reside, and how long and since when has she begn a resident of this State? When have the form of the state will the free that will the free that will the free that when and where was she born? Warg an County of error in ##6(1836) 5. Were you ever acquainted with her husband? I Mad 6. Where did be reside in 1861? In Macroson Morg an C. Ra Affidavits of Physicians. 7. When and to v hom was he married , Mifs S N rade 8. When and where was he born? Lucalison Morgan Co 4a 1828 STATE OF GEORGIA. 9. How long have you known him? For over Fift, years Personally before me comes there Il Newaw Il N ich avery ild physicians of sale roounty, who, being severally sworn, say on path that they have camined carefully Mra.

applicant for a Pansion under Act of 1990 and 1990. 11. Were you a member of the same Company and Regiment? applicant for a Pension under Act of 1900, and after 12. How long did he perform regular military daty? Thony can & fur Wenthe such personal examination say that her physical condition is this form to be get the first the first that the first sake have streetly given may be the first the first to be can exist up and the first that the first 15. When and where was his Company and Regiment surrendered and discharged from service? Lun a very frail person Town unabli to sarry a lively took of has bet all 14 Were you with the command when H surrendered? and we have no interest in said pension if allowed. 16. Wasp 1 couph & cen c the husband of applicant present? Thospetenan M. D. day of o house. 16 If not present, where was he? He was present present.

17. When and where did be leave his Command? Command? Command? Arch. Avary M.D. For what cause? Mar being even

By whose authority be left? Col & h Marin

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

Marine Chackerge do ORDINARY'S CERTIFICATE. TATE OF GEORGIA. 18. When and where did bodytok flesse I, John R Wilkingson, Ordinary in and for said county, hereby certify the the applicant, Mrs. S H Russ. resides in said Where did he reside at his death and how long had he been a resident of Deorgia at his death? Where did he resident of Deorgia at his death? ounty, and has been a bona fide resident of this State since_____day of____ 20. Do you of your own knowledge know that applicant is the lawful widow of Poscook Reese _are of trustworthy character, and that their statements 21. Has she remained unmarried since her soldher husband's death, and is now his widow? re entitled to full faith and bredit I do further certify that before enswering the foregoing questions, the applicant and said witnesses took the 22. What property, effects or income has the applicant, if any, and how do you know this of your knowledge? Could I Cross Morallells are the questions 2 a SK eribed, and the full text of the affidavits was read to the applicant and witnesses before the same own knowledge? don't I tron she has no huperty except am all and of homewhold offer ma min turned for taxation in her own name in 1890 23. What property, effects or income did applicant some in 1800 and 1900 and what disposition did she make of it? I dant (In our Had orone yearst small and of he of property, and in 1900 Witness my hand and official seal, they 24. Has applicant conveyed any property in last two years or given any away, if so that was it and to whom? dent them vinhim pastally to the

STATE OF GEORGIA,

STATE OF GEORGIA. County. , hereby authorize to receive and receipt for the pension paid hereon, and request that he remit same to In Witness Whereot, I have beceunto set m., hand and seal, this. day of [L. S.] Executed in presence of IDOW'S PENSIO

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ı			T.	
		he pension paid hereon,		
		at		
		I have hereuuto set my h	and and seal, this	
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	The second secon	The state of the s		
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DOW'S PENSION

BERETOFORE ALLOWED LEASEN.

WARRANT ISSUED

JOHN W. LINDSEY,

## LOW TUNISHMI MINAMA HRKRACKOKK VITOMRD LENSIONS"

STATE OF GEORGIA,	PERSONALLY COMES MRS.
	to be her be a second
	that she is a bone fide resident of said County of
State of	Scorgia, and that she has resided in said State
replace	That she is the Widow of
3 4	who was soldier in Company
	Regiment of
Venante s. that ne entire d in said regiment on or	about the month of J. UMCA
1 st & cat see cut on the Army not to Su	Men Mr. That he died
day or	IN 20.
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	ased solding during his service in the Army as a
is and the state of the second since his	death aforesaid, and that she became his wife in
1 Fe 04	Fulton.
err , each an Indigent pension as	a resident of
to the vent 1902 and not	wapply for the pension provided by law for the
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for 'en and sense their before me,	Print area
day - \$500 / 1/10/2 / 1902	2 14 2 6161
& The Collegen	# Office
	John R. Wilkinson
Fulton County.	dinary of said County, cartify that I am well, who made the above affidavit and
equanted with Mrs. C. P. C.	wno made the above affidavit and
maker shed that the facts therein stated are true,	and I know she is the individual she represents
"erese" to be and that she has continuously residen	d in this State since the
day of	
Or on and my officent stenature and soal, this t	he
Omen Del STANON	in the state of th
Seal Committee Committee	rdinary of Fulton County
NOTE All blanks must be filled.	County.
Vouchers and affidentia ment be	the data when January set you

## FUR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA	B
STATE OF GEORGIA	· · · · · · · · · · · · · · · · · · ·
County of Fulton.	- SKOVILLE
who, being sworn, se	ays on oath, that she is a bonn fide resident of said County
	State of Georgia, and that she has RESIDED in said Sta
continuously ever since 183	6
Josefali (	That she is the Widew who was a soldier in Compar
B	who was a soldier in Compar
of the	Regiment of Lyce
Volunteers, that he enlisted in and regi	iment on or about the month of McL
186 3, and served in the Army up to	Ceful 1862. That he lie
	y of18.98
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oldier, and that she has never married	I since his death aforesaid, and that she became his wife i
oldier, and that she has never married he year 18 55	I since his death aforesaid, and that she became his wife
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oldier, and that she has never married he year 18. J.J. I have been allowed an Indigent p county, under Act 1900, for the year 190	ension as a resident of
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oldier, and that she has never married the year 18. 5. 1 have been allowed an Indigent p county, under Act 1900, for the year 190 ear anding December 81, 1908.	ension as a resident of
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## POWER OF ATTORNEY. STATE OF GEORGIA. COUNTY.

to see a and recept for the pension paid berson, and request that he remit same to

IN WITNESS WHEREOF I have hereanto set my band and seal, this_
of '904



[L. S.

Executed in presence of

5)

## WIDOW'S PENSION

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 hereumto set my hand and seal, this
day of _______

POWER OF ATTORNEY.

Executed in presence of

## 1905.

For year ending Dec. 31, 1906.

alton.

WARRANT ISSUED

( 3-2)

AND HANDED TO

AND HANDED TO

1 8.

## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

The state of the s
STATE OF GEORGIA, PERSONALLY OMES MRA.  County of Fulton.  PERSONALLY OMES MRA.
who, being sworn, says on oath that she is a bora fide resident of said County of
State of Georgia, and that she has RESIDED in said State
continuo siv ever since // \/ \/
Arcefule Reese That she is the Widow of who was a goldier in Company
3 of the 3206 Regiment of Far
Volunteers, that he colisted in said regiment or or about the month of The
1863 and served in the Army up to 1865. That he died
on the Jay of 1820
770
Dependent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she mas never married since his death atcressid, and that she become his wife in
the year 18
I have been allowed an Indigent pension as a resident of ulton.
County, under act 1900, for the year 1903, and now apply for the pension provided by law for the
year ending Sec entier 31, 1904
Sworn to and subscribed before me
thys ] day of JAN 22 304 1904 2 16 ( 1101
ohn RWILKINSON Post Office
that Awil Kinson Ordinary Post Office
Fillials of Country of John St. Hothunson
State of Georgia,  Fillium, County, Ordinary of said County, certify that: am well acquainted with Mrs. Of Celes.  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 ARC C
Given under my official signature and seal, this the day of MN 22 1904 1904.
Jan Ploce Kinson
Ordinary of Fillian County

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

## LOW THRIGGEST MIDOMR HERRETOROKE WITCOMED BENSIONS

STATE OF GEORGIA.  County of Fullon (2) His Lee See
who, being sworn says or oath, that she is a bean fide resilient of said County of Fulfor.  State of Georgia, and that she has resident in said State continuously ever-since  Fourth Self Who was a soldier in Company who was a soldier in Company Segment of Ellar Gla  Volunteers, that he enlisted in said regiment on or obe in the month of 1863, and served in the Army up to Elar 2 186. To a be died on the
Deponent swears that she was the wife of said deceased soldier, during his service in the Array as a
soldier, and that she has never married since his death aforesaid, and that she became his whe in the year 18 (56)
I have been allowed on Indigent pension as a resident of
Swore to and subscribed before me.  this day of JAN 2 1905 1005  Swore to and subscribed before me.  This day of JAN 2 1905 1005  During Cillaria la
State of Georgia, County Ordinary of said County, certify that I am well acquainted with Mrs. 20 . Ale. Reere wire made the above well-there and
am satisfied that the facts therein stated are true, and Uknow she is the individual she represents
herself to be, and that she has continuously resided in this State since the Lieft life life
day of 15
Official Seal.

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

Fulton. County

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STATE OF	F GEORGIA	۸,		ļ				
			COUNTY	r. \$				
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to receive an	id receipt for	the pen	sion paid	hereou, and	d reques	t that	he remit	same to
	4 11 12							
	iess Whereof.	I have	hereunto se	et my hand	and seal	, this.		
day of			1906,					
								[L. S.]
	Executed in	presence	əf					
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			•				or one of the	e podernoveka suka suka shu
			9	County,	Jea (	Biona	906	1
<b>E</b>		3	900	3 3	Legriment	F	0	Trans
To Those Héretofore Pefd 1906.	CARING CARING	2	For year ending Dec. 31, 1906.	B	4	LINDSEY,	10	8
etofe	C. H			1	1	JOHN W. LINDSEY Commissioner of	7	Hy we resume
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g Q	No.		a a	A B	1	<b>S</b>	ARR.	2
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To			F. A.		3		-	MANAGIN
	.		" The	Widow	Co.			1

D. H. mis)

## POWER OF ATTORNEY.

STATE OF	BORGIA,	· ·
	Cour	arv. f
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and the second s	·	of
to receive and :	receipt for the pension pai	id hereon, and request that he remit same to
-	and a comment and a comment of the c	. at
In Witn	ess Whereof, I have hereus	nto set my hand and seal, this
day of	190'	7.
	,	
	,	

## To Those Heretofore Paid. 1907. 1907. INDIGENT WIBOW'S PENSION

Gra. W. Element, MATE Propriet.

JOHN W. LINDSEY,
Commissioner of Pa

WARRANT ISSUED

LANDER WITH THE THE MALES TO THE

For year ending Dec. 31, 1907.

Pariton.

## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGI	[A, ] Pr	REGNALLY COMES MRs.
County of Fulton.		, Keese
who, being sworn say	s on oath, that she is a bons	fide resident of said County of
Fulton.	State of Georgia, and that	she has RESIDED in said State
continuously ever since	elle!	That she is the Widow of
texcep Rees		ho was #7 soldier in Company
of the 3	Regiment of	Mai
Volunteers, that he enlisted in said regi	-	
186.5, and served in the Army up to	4/	
ap w		That he died on
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8178 2022	The same of the sa	A Million and the same of the
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	The state of the s	0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 -
Deponent swears that she was the wife	of said deceased soldier, duri	ng his service in the Army as a
soldier, and that she has never married	since his death aforesaid, and	that she became his wife in
the year 18.5.1		
I have been allowed an Indigen	pension as a resident of	Fulton.
County, under Act 1900, for the year 190	5, and now apply for the pe	ension provided by law for the
year ending December 31, 1906.	( )	//
Sworn to and subscribed befor	a mal	hu ()
0	1906	transfelde
Plus Kenson Ordi		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
, Ordi	nary.   Post Office	0
State of Georgia,	, ,	A Wil Kinson
Fulton. Cou		
111111111111111111111111111111111111111		
acquainted with Mrs.	M	County, certify that I am well made the above affidavit, and
•	reese, who	made the above affidavit, and
am satisfied that the facts therein stated	delete, who	made the above affidavit, and the individual she represents
•	delete, who	made the above affidavit, and the individual she represents
am satisfied that the facts therein stated herself to be and that she has continuous day of	d are true, and I know she is usly resided in this State sind	made the above affidavit, and the individual she represents
Am satisfied that the facts therein stated herself to be and that she is continuous day of Given under my official signature:	are true, and I know she is it is state single and seal, this tree	made the above affidavit, and the individual she represents the day of JAN 1 1906.
am satisfied that the facts therein stated herself to be, and that the best continuous day of	d are true, and I know she is usly resided in this State sind	made the above affidavit, and the individual she represents the day of JAN 1 1906.

NOTE.—All blanks must be filled.

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## FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, PARSONALLY COMES Mrs.
County of Fulton. S. M. Relai
who, being sworn says on oath, that she is a bone fide resident of said County o
107/
And the same is the widow of
who was a soldier in Company
of the Olive Regiment of Lea
Volounteers, that he enlisted in said regiment on or about the month of
186 and served in the Army up to wall from 186 That he died on
the day of 1891
and the same of th
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The second control of
I have been allowed an Indigent pension as a resident of Fulton.
County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the
year ending December 31, 1907.
Sworn to and subscribed before me
this day of AN 2= 1907.
John R. Wilkinson, Ordinary. Post Office
The state of the s
State of Georgia, 1. John R. Williamson.
Fulton. Comy Ordinary of said County, certify that I am well
N/ Ha / Watar
,
am satisfied that the facts therein stated are true, and I know she is the individual she represents
berself to be, and that she has continuously resided in this State since the
day of18-3-6
Given under my official signature and seal, this theday ofJAN 21907.
John R. Wilherson.
Figure 1
Ordinary of County.

| Seal Fulton. County. / Seat ) Fulton. Ordinary of Ordinary of. _County. NOTE. All blanks must be filled.

Vouchers and Affidatio must bear date after Januar, let, 1907. NOTE.—All blanks must be filed.

Vouchers and Alldavits unet bear date after January 1st, 1306.

STATE OF GEORGIA,

County.

of.

, hereby authorize

Regnes, Augus 10 Full County	Pension of 1/25 1600	¥		1, by 2	
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County Fullin Approved 1900.	mily him to the find in the			day of	and request that he remi
JOHN W. LINDSRY,  Ougstpissioner of Persions.  WARRANT HANDED TO  Gec. W. Harrison, Bate Printer, Atlanta.		i .		(L. 8.)	is name to
115 1900					

STATE OF GEORGIA, YPHICUITL. STATE OF GEORGIA Anglis & Revrs - Jol asid State and County, desiring County. to avail bimself 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: ___, hereby authorize What is your name and where do you reside? (give State, County and post office). Colanta Grogin Buttan How long and since when have you been a mesident of this State ?... to receive and receipt for the pension allowed, and request that he remit same vo-Witness my hand and seal this _day of Executed in presence of July 1861 Campul (1) 13 ga R How long did you remain in such company and regiment? 6. For how long a period did you discharge regular military duty? about 4 years When, where and under what piroumstances were you discharged from segvice? What is your present occupation? not aunthing 9. How much can you earn (gross) per annum by your own exertions or labor? 10. What has been your occupation since 1865? Methanic or 11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? QQE Forthisk 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? upon the third, state whether you are totally blind and when and where you lost your sign; ? . . . uso- duing able to do Times are allowed top age + Helsh Kety So 13. What property, effects or income do you powers, and its gross value? hour al all For I have none. 14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, did you make of same? Home-16. In what County did you reside during those years, and what property did you then rejurn for taxacion? How were you supported during the years 1898 and 1899? Challen When they word disposed to do so. 17. Ho much did your support cost for sach of those years, and what portion did you contribute therete by your own labor or income? I cloud: Know I gave nothing at all 18. What was your employment during 1898 and 1899? What pay did Jyou receive in each chief wat any for y non not all Thor/2 19. Have you a family? If so, who composes such family? Give their means of support? Have the By Thorn Sworn to and subscribed before me this the) 10 day of Acces

omamn (an anomala		WIS .	AFFIDAVIT OF
STATE OF GEORGIA,	1.,	STATE	E OF GEORGIA,
Julian COUNTY.		ACCOUNT AND ADDRESS OF THE PARTY OF THE PART	Letter COUNTY.
Indrich & Revis	aid State and County, having been presented	**************************************	,
as a witness in support of the application of		Pera	onally came before me
under Section 1254, Code, and after being duly sworn true a		TO 65 MILES	W, od, lebeldesse de D.
deposes and answers as follows:	rednich & Resoro	of said Cour	nly, who, being severally sworn, say on oat
ar Ever point In Fu	lian Co	Section 1	al examination say that his precise physical
2. Are you acomainted with a la Mean	the applicant; if so	We d	have this day In 6/15
how long have you known him? yes alone	1- 50 years on more	4.4.0	Rever & mil his
3. Where does he reside, and how low and since when has	he been a resident of this State?	Causti	Entran Caused from
4. When, where and in what company and regiment did by		no du	of chin beforing for
4 day July 1861 at griffer	- Ga Co & 13 Ga Rey 9 nos	* Hotran	there 2 Frankles 25 is
D. Were you a member of the same company and regiment	yes I has	cut a They	further sa on oath that the physical condi-
6 How long did he perform regular military duty, and who	at do you know of his service as a Confederate		calling sufficient to earn a support for him
soldier, and the time and circumstances of his discharge from	the service?	being allowed	d.  to and subscribed before me this the )
to His Carry & Elus			
at mu can go at Clas	e the war	1	May of Jan 1900.)
7. What property, effects or income has the applicant? (G		77	Ord
Thos your ar	- all the country		ORDINARY'S CI
The property, effects or income did the applicant posses	in 1896 1897 1898 and 1899 and what	STATE	
disposition, if any, did he make of same?	- 11 al	(1966)	OF GEORGIA,
and the make of value:	The state of the s	980	Treetien COUNTY.
9. Has be conveyed away any this property in the last f	our years, if so, what was it, and to whom "		Modering
$\mathcal{N}_{\boldsymbol{\theta}}$	110 110 20	h	ant At Rhu
What is the applicant's occupation and physical condition		been a bona f	de resident of this State slace the
office Sulphi Sio Physica	L is man Bar Dilect		witnesses, viz. J. 7 Rec
Is the applicant unable to support himself by labor of an	y dert, if do, why?	are of trustwo	rthy character, and that their statements are
The Beauty Hi	o will not	I furth	er certify that before answering the foregoin
12. For was he supported during the years 1898 and 1899	hos dies of for you mi	before same wa	on prescribed, and that the full text of the
12. 110w was he supported during the years 1832 and 1839 ?		14.	er certify that the tax digests of
13. What portion of his support for hese two years was derive	red from his own labor or income?		xation in his name in 1898
none that			d in 1899
14. Give a feel and complete statement of the applicant's pays under Section 1254, Code?	ical condition that entitles him top pension		pinion the foregoing claim is
it for severe years he al		Wither	my hand and seal of office, this
and his consideration is	my Raelly Broken dans	W EXIGN	CY.
15. That interest have you in the recovery of a peasion by	the applicant them		
Swora to and subscribed before me, this	A Reces	1. Before a	ny questions are answered, the Ordinary shall swear aske to each of the questions asked of you, and the
the fe day of 1900.)	Witness.	/you God." Addition	al affidavits may be attached if blank spaces are insu case the Ordinary must certify to the character of th
Ormany Ordinary.		. soi out.	ordinary must certify to the character of th

QUESTIONS FOR WITH SE

PHYSICIANS. both known to me as reputable physicians th that they have examined carefully eant for pension under Section 1254, Code, and after condition is as follows: ERTIFICATE. Ordinary in and for said County, hereny certify e entitled to full faith and credif. ing questions the applicant and each witness took affidavits was read to the applicant and witness County show that applicant made in good faith. spplicant and the witnesses in the following words: "You be evidence you shall give will be the whole truth, so help

STATE OF GEORGIA.

Courry.

hereby	authoriz

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

by

For Those Aiready Enrolled.

360

Witness my hand and seal, this

1901.

L. S.

Execute 1 in presence of

SOLDIER'S PENSION INDIGENT

1901.

IOHN W LINDSEY

WARRANT ISSUED

ST OR INVE

(FOR THOSE ALREADY ENROLLED.)

POWER OF ATTORNEY.

STATE OF GEORGIA,	}	
ACTUAL COLUMN TO A STATE OF THE	COUNTY.	
Ι,		hereby authoriz
-	of	
to receive and receipt for	the pension allowed, and request	that he remit same
	a†	
by		
WITNESS my hand an	d seal, this day of	19#:5.
	<b>A</b> .	

Executed in the presence of

INDIGENT

IER'S PENS

[L. S.]

## FOR Applicants nerecolore allowed rensions. STATE OF GEORGIA. he stone County Dersonally appears (111 Aturns of Freelow 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 23 day of Leave 1840 that he is 61 years old and by occupation a foot free that he enlisted in the military service of the Confederate States (or of the State of Lfc ) during the war between the States, and served for the term of figures in Company of , of 13 th Regiment ; that his physical condition is as to lows Grassal Kethelity that his import. These is of the following items Pollars, 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 amendato & thereof, and makes application for the pension to which he contribed for the year 1900. I have heretofore is a resident of Herettere san's been allowed a pension for the year 1 .... the st lines Swern to and subscribed before me, this the | Way Meetings C. day of free 1501 return 1 laske war ordinary STATE OF GEORGIA, County. 1. Shee Rill elkingson Grdinary of and County. Concertify and I am well acquainted with Clarks the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County Given under my official segnature and seal, this

John R Wilkinson

Note: Affidavit should not be attested before January 1st, 190

Country - Fredtone Courty

STATE OF GEORGIA. Fulton. County. Pearsonally appears Q. Q. Reenes 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 day of _______18 ____; that he is & g years old and federate States (or of the State of Slongia ) during the war between the States, and served for the term of 4 MIN in Company I of 15 th Regiment ; that his physical condition is as that his property consists of the following items : _ of the value of _____ Dollars. I am now earning, by my labor,______Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of _______ County been allowed a pension for the year 1904. Sworn to and subscribed before me, this the day of JAN 2 1905 1905. STATE OF GEORGIA. County. do certify that I am well acquainted with . . . . the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this JAN 2 1905 Ordinary Filton.

LAW WILMIAWAYO UPUBAALANDE UPPOMEN KRUSIONS

Nors.-The blank spaces must be filled.

Nors .- Affidavit should not be attested before January 1st, 1905.

STATE OF GEORGIA,

County.

Lounty.

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.

[1. S.]

Executed in presence of

SOLDIER'S PEN

1902.

INDIGENT

( FOR THOSE ALREADY ENROLLED.

Regiment 13.
Regiment 13.
Regiment 13.
WARRANT ISSUECT 10.
HIN W. LINDSBY, COMMISSION TO ARRANT HANDED TO 10.
MARRANT HANDED TO 10.

Ceever a.a.

## POWER OF ATTORNEY.

STATE OF GEORGIA,COUNTY.		
Square and a square and a square a squa	, hereby	authorize
of have the	A contrabation of the French and the	dia ma
to receive and receipt for the pension allowed, an	d request that he remit	säme to
at	A 100 A	
by		
WITNESS my hand and seal, this	day of	.1907.
<i>)</i>		_ [L. s.]
Executed in presence of		

DIBR'S PENS

NDIGENT

Trains a solid galde I From DEBIAONS

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

	GEORGIA,	
F	ulton. County.	
		El of Fulton.
		says on oath that he is a bona fide citizen
		resided in said State continuously ever
		18.40; that he is years old and
		nlisted in the military service of the Con-
by occupation a.		
federate States (or	of the State of	
	for the term of 7	in Company , of 3 th Regiment
of Ifa		_; that his physical condition is as
follows:	1 , 11 7	
	Gent disulti	lity
	1	
that has property of	onsists of the following items	
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		and the same of th
of the value of	the second secon	Dellars that he are a file hair 1
		Dollars, that by reason of his physical miself by his own exertion or labor, and
	peusion but the one herein app	
	-	its of the Act, approved December 15th,
		application for the pension to which he
		as a resident of Fulton.
	d a pension for the year 1 $9c$	
	subscribed before me, this the	A N Recues
	of JAN 13 1902 1902.	
( tomes	Willenion	Ordinary.
STATE OF C	POPCIA	
F11	ton. County.	
John B	Will.	
1,	· Milkinson	Ordinary of said County,
	m well acquainted with	
the applicant in the	foregoing affidavit, and am we	ell satisfied that the statements made by
		the individual he represents himself to
be and that he resid	les in this County.	
	Given under my official signat	ure and seal, this
~:~>	day of JAN 17 14.12	(1902 10 1 AL)
Ami )	Orto	mel Williamson
( See		Fulton
	Note -The blank spaces must be filled	County.
	Note.— The clark spaces must be filled Note.— Affidavit should not be attested	before January 1st, 1902.

State of Georgia,
Fulton County.
Personally appears A. a. Ulalel 2 of
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citi.
and resident of said County and State, and has resided in said State continuously e
since theday of18 50; that he is
and by occupation a, that he enlisted in the military corpies of the C
federate States (or of the State of State of during the war between t
States and served for the term of 1 114 in Company of 1 th Regime of 11 that his physical condition is
follows:
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that his property consists of the following items
en and depend of the continuous and the state of the stat
of the value of
of the value of Dollars. I am now earning
by my labor, Dollars per month. That by reason of h
physical condition and poverty he is unable to support himself by his own exertion 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 15t
1864, and the Acts amendatory thereof, and makes application for the pension to which i
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
Sword to and subscribed before me, this the
day of JAN 1907.   Ordinary.
July D. Ordinary.
T. P. OFF.
July D. Ordinary.
State of Georgia,  Fulton County.
State of Georgia,  Firston County.)  Jake Of White Ordinary of said County.
Ordinary.  State of Georgia,  In John County.  Ordinary of said County of certify that I am well acquainted with the statements made the applicant in the foregoing affidavit, and am well satisfied that the statements made
Ordinary.  State of Georgia,  In John County.  Ordinary of said County of certify that I am well acquainted with County of the splicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himsely
Ordinary.  State of Georgia,  I, John Ordinary of said County.  Ordinary of said County.  Ordinary of said County.  Ordinary of said County.  Affiliar  the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himselt to be, and that be resides in this County.
Ordinary.  State of Georgia,  In John County.  Ordinary of said County of certify that I am well acquainted with County of the splicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himsely

Affix your weal here Коти.—The blank spaces must be filled. Коти.—Affidavit should not be attested before January let, 1907.

STATE OF	GEORGIA.
----------	----------

County.

hereby authorize

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

DIER'S PENSI

1903

INDIGENT

Witness my hand and scal, this

day of

[L. S.]

Executed in presence of

(FOR THOSE ALREADY ENROLLED.)

INDIGENT

DIER'S PE

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

hereby authorize

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

WITNESS my hand and seal, this_

1(#)4 [L. S]

Executed in the presence of

JOHN W. LINDSEY

JOHN W. LINDSEY

WARRANT ISSUEL

CODESECTION SA (FOR THOSE ALREADY ENROLLED.

3

#### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE O	F GEORGIA,	)	,
Fu	ton. Count	v	
D		ekver of F	
	appears UUGE	of H	ulton.
and maid and of a	Georgia, who, being duly sw	orn, says on oath that he is	sa bona fide citizen
since the 23	aid County and State, and	has resided in said State	continuously ever
by occupation a	day of June	that he is_	years old and
		he enlisted in the military	
	for the term of of	during t	ie war between the
of Lyu			
		; that his phys	ical condition is as
follows:	XXX	and the second reserve to the second reserve to the second	
₩	1	The second secon	CONTRACTOR OF COMPANY OF STREET, SALES AND ADDRESS OF STREET, STREET, SALES
	the same of the sa	_	NO to the control of
that his property	consists of the following ite	ems:	
		The state of the s	
of the value of		Dollars, that by reas	on of his physical
condition and por	verty he is unable to suppor	t himself by his own exer	tion or labor, and
	o pension but the one herei		
Deponent des	sires to participate in the b	penefits of the Act, approve	d December 15th,
1894 and the Acts	s smendatory thereof, and m	akes application for the pe	nsion to which he
is entitled for the	year 1903. I have hereton	fore as a resident of	Tion.
county been allow	ed a pension for the year 1	- This	,
	subscribed before me, this tl		unis
day o	AN : 20 1003 190		
		Ordinary.	
STATE OF	GEORGIA,		
01111201	On. County.	r	
. 91	M NIC.		*
I, John Y	M. Wilkinson m well acquainted with	Ordinar Ordinar	y of said County,
him in his said offi	e foregoing affidavit, and as davit are true, and I know	he is the individual because	stements made by
be and that he resi	des in this County.	ne is the individual he rep	resents himself to
	day of AN 20 1903	gnature and seal, this	
Amx	day of	0/100	
Beal here		Jan Jan LAle	tout
		Ordinary	County.
	Nove.—The blank spaces must be attended not be attended.	illed. ested before January Let, 1908.	4.3.4

#### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

THE HEALT OF THE WORLD I WINDIAMS.
STATE OF GEORGIA,
Palton, County.
County,
Personally appears to the Recent of
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of sail County and State, and has resided in said State continuously ever
since the L v day of x 1 t 1 t 2 t 10/1 h
by occupation a that he eplisted in the military service of the Con-
federate States (or of the batte of
States and served for the term of 14402. in Company & of 3 th Regiment
of Lan Volo
follows:
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shat his
that his property consists of the following items:
-
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 16th,
1894 and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1904. I have heretofore as a resident of International
County been allowed a pension for the year 1
Sworn to and subscribed before me, this the
des) of 19(14 1904.
John Allel Newson Ordinary.
STATE OF GEORGIA,
Fulton, County.
· CI OB CHE!
do certify that I am well acquainted with A. The Records
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents his self
to be, and that he resides in this County.
Given under my official signature and seal, this
day of
Ans A Wel Kurson
here i

STATE OF GEORGIA,COUNTY.			
τ,			hereby authorize
	_of		
to receive and receipt for the pension a	llowed, and requ	est that he	e remit same to
	at		
by			
WITNESS my hand and seal, this	day of	lu s	1906.
			[L. <.]
Executed in the presence of			
A P	10	908	
ALREADY ENGLLED.  A.S.  DIGENT  R'S PENSIO  DOG.	N.	7. LINDSEY.	1
	6	gy.	2
	Kegimeut A	JOHN W. LINDSEY Commissioner of	WARRANT HANDED TO
The Almend of A State	Kegiment	7 E	HAN
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THOSE S	WAR	10E	BE 7
£ - 5 - 7	DV.	1	W

Reeves a.a.

CODY SECTION |

SOLDIER'S P

County C

Name (

	of Geor	roia.	)		
		(A)	}		
	ilion_	County	· 10		
	lly appears (	1.0		rest of_	111ton
County, State	of Georgia, who	o, being duly	sworn, says	on oath that he is	a buna fide citizes
and resident o	f said County	and State at	d has reci	and in said Ctat	
since the	day of	Ullin	1618	that he is les	4
by occupation	MALIS	1 they	he enlisted	in the military a	arvice of the Com
federate States	(or of the Star	le of		de during th	L-4 .1
States, and ser	ed for the terr	n of 4 4	In Co	mpany of	13 th Regimen
of Ga	<i>/</i> .	0		; that his physic	cal condition is as
follows:	<u> </u>	or Continue I Services			ar condition is as
Mary Access to the Assessment Control	age	and	pos	certis.	,
	6		1		
that his proper	ty consists of t	he following	teme :		-
	.,	ine tollowing	items.		
	The second secon		_		
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of the value of		<i></i>		Do!lars	am now earning
by my labor,			Dollars	per month. Tha	by reason of his
physical condit	on and povert	ty he is unab	le to suppo	ort himself by his	own exertion or
abor, and that	he receives no	pension but t	he one here	in applied for.	
, Deponen	desires to par	ticipate in the	benefits of	the Act approved	December 15th,
s entitled for	ts amendatory	thereof, and	makes appl	ication for the per	sion to which he
County, been al	lowed a pensio	n for the server	otore, as a r	esident of U	Iton
	and subscribed		1806.		( 1)
	y of JAN		is the	id w	"Keen
	JAIN		vo. )		
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STATA A	Georg	gia,	ļ		
T.			L .		
F ₁	LIVII.	County	. )		
F ₁	m. P.S	DUNIN	ns!	Ordinary	of said County
I,	melis	Dellin	ms		of said County,
I,	am well acqu	DUNIUS	2.0	L. Ree	uce
I, o certify that in	am well acquithe foregoing	usinted with affidavit, and	am well so	atisfied that the	statements made
I, o certify that I ne applicant in y him in his sa	am well acquithe foregoing	usinted with affidavit, and true, and I kn	am well so	L. Ree	statements made
I,	am well acquithe foregoing	usinted with and true, and I knows to county.	am well so	atisfied that the re	statements made

Ordinary Fulton County.

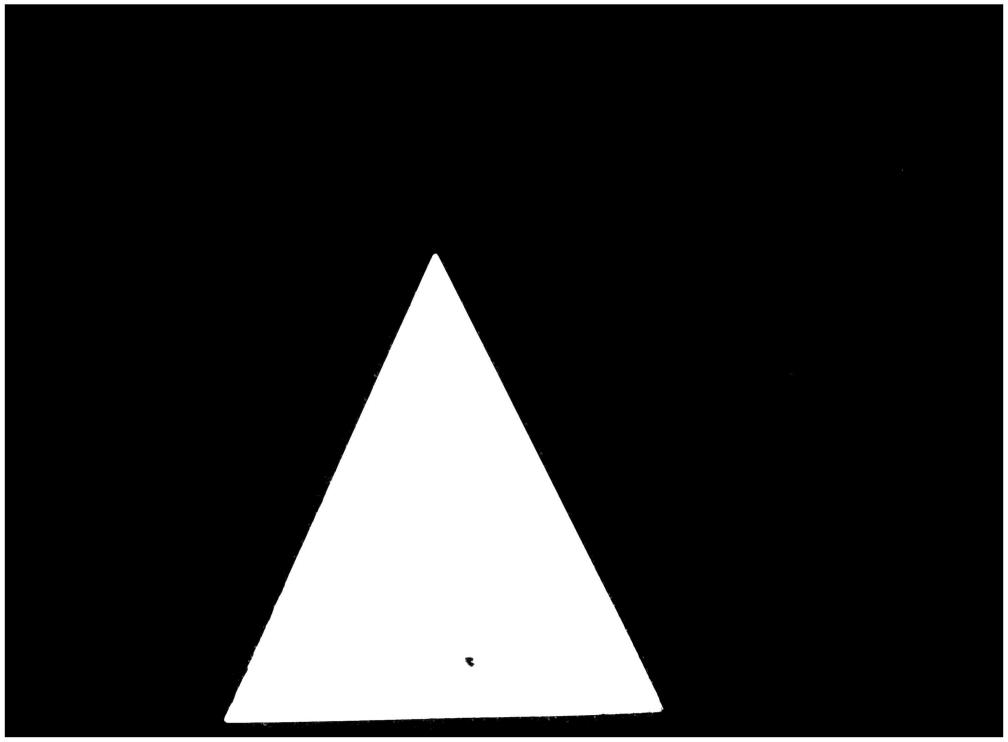
Affix your seal here

Norz.—The blank spaces must be filled.

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

Questions for Wilness Justions for applicant State of Georgis. Shate of Georgio Hullon County Hullor Courty H, a Keeves of Soit Alale and lounty Augusties a Recors of Soid Hate hoving been Bresenter as a within in and county desiling to asail himself of Support of the opplication of a Okerny the Pension al Section 1254 Code feely for Cension under section 1254 Code Submit, his Broof and after being duly and ofter being duly brown true mener Swam true answers to make to the follows following yoursline defoses and answell to move the to the following questions defroses and answers as follows what is your name and where do you 7 when and where was his Commo reside give state went and Past office ourrended appries of 17865-alaugustis a Kews atlanty for med appromador Do Hullon County Two you with it when Surrend Were you Present with congrey and Restaution it Surrence 9 was apple cont Brilled -I was not he was not of if not - Present Alale Specificly Censusting a Keepes was and clasely where you was when sent to Dow to Haspalal about cours and by what ourthorty you 14th 1864- I never dow him

I to welowed nome from Richmond any more untill about may bo about moth 41/1865 my home was 10 14864 when I got home he how a Parroll he Recent at Macon in shoulding county go and after the So we Both lived in Spoulding Surrendrop gen Lee I was ordered be macon to about the 20 of appril 1864 and there I was Parrolled and dis faryer county go F A Resney I received my Hurlow while I was at the Second for Hospilal at Keepmont to I was lent to This Haspotal by our June to Drie Dustantico Rest Physician and was age me This Ough 18-18 & There about First weeks before I was Summer of the same Occaming Freetil con sent home of don't Trow of any won that is living that was Present why I was Parolles el & Reense Sum to and on house Engen sun This Daja-19-1200 morreage Quaman Freder Ca



Minion readolar P. D. Reere, mt Post in vive, enloste Confederate

Jich 14, 1864. Perill

Soldier's Application. UNDER ACT 1910. TERED ROSTER OFFICE DERY.

Rene mt

Confederate

Confederate

What

Company

Questions for Applicants to Answer.
STATE OF CEORGIA,
Sulfage County
for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with is testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers a follows, to wit:
1. What is you, name and where do you reside? (Give County and Post-office)
2. How long sud since when have you been a continuous resident citizen of this State?
3. Did fou callet in the Army of the Confederate States or of the Organized Militia of this State
5. How long did you remain in the actual Military Service with said Company and Regiment?  Give date of disoharge. 1.2.2. 1.4. 1.5.4. 2.4. 2.2. 2.4. 2.4. 2.4. 2.4. 2.4.
Literation of Below to the said and
7. Were you actually present with your Command when it was surrendered or discharged?
9. If you were not actually present, state specifically and clearly where you were
a. Where was your Command when you left it?
b. When did you leave the Command?
c. For what cause did you leave?
d. By whose authority did you leave?
e. For how long was your leave 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 retuin?
I. Were you captured during the war?
j. If so, when, and where? In what prison were you held and when were you released?
9. 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.)
It a france peraky
and the same of th
10. What property of any kind have you disposed of and for what purpose since 4 Nov
1808. To whom and for what price?
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 its cash value? (Make itemized list)
Thater aux Cool 3800
12. What annual or monthly income or earnings of yourself and the source derived have you? House that said my his local
13. Are you drawing a pension of any amount from this State or the United States?
14. Have you ever applied for the Georgia Pension and had it refused? and for what are the
not allowed? Alo

8 worn to and support bed before me, this the

Garage County.

STATE OF GEORGIA, STATE OF GEORGIA. County. County. as a witness in support of the application of A. Requestration 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: ach 200 2. How long and since when have you kr 3. Where does he now reside, and since when has he been a bona fide continuing resident in this When and to whom was it sold or give, to?. bout I years! Been intrued and correct aded What was the price paid or stated to be paid? What relation is the party to applicant?.. 4. When, where and in what Company and Regiment did. war from 1861 to 1865? (Give date and place).

5. How did you obtain your information of this Service?

6. How long within your own personal browledge did he perform actual military service with or was it made to obtain a pension?... Sworn to and subscribed before, me, this one this company and Regiment? givedlate facly from 1864 in the Many 1865.

7. When and where was his Command surrendered or discharged (give date and place).

When a fact for the fact of the state of the fact of t Were you personally present at the Surrender? 9. If not, where were you and how came you there? STATE OF GEORGIA. 10. Was the applicant personally present with his Command at surrender? If not where was he and how came him there? 12 When did he leave his Command? said County. That I also know ... By whose authority did he leave Tax Returns of telling of all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) value for tax is in 1908 8 550. 13. In what way was he prevented from returning to his Command? Sworn under my hand and official seal of office this... How do you know? 14. What effort did he make to return to his Command and how do you know? .... NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words
"You do selemnly swear that you will true answers make to each question saked you and the evidence you
shall give shall be the whole truth; so belp you God."

Additional sffidavits may be attached if blank spaces are insufficient
All affidavits must be made before the Ordinary and certified by him.

If applicant has no property at all in his possession, use or control of self additavits of freehelders unnecessary. 15. Was applicant captured as a prisoner. . If so, when and where?. .In what prison was he held' and when released

Personelly before me comes Q Jhomas Of says that they are freeholders residing in said County and we know the applicant for pension and we know the property that is now in the use, possession and control of himself and of its cosh/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? What disposition was made of the proceeds of the sale Was the disposition of this property made in good faith and full values? ORDINARY'S CERTIFICATE. ...... Ordinary of said County, certify that I know K. I Laws for Pension is the person he represents himself to be and resides in and J.D. Thanges on do to mason ..... 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 for 1909 \$ 600. for 1911 \$ 200 for 1912 \$ 360 for 1913 \$ 260 for 1914 \$ 300 for 1915 \$ tame

P.E Reeves, A. D.

YEAR 1917 COUNTY Pulson

WHEN AND WEERE BORN?

A resident of Georgia all my life.

ENLISTED WHEN AND WHERE?

Peby. 14, 1884, Calhoum, Georgia.

RANK:

COMPANY AND RECOMENTY

Company I, 5th Georgia Regiment Cavelry

NAME OF CAPCAIN AND COLONEL?

WOUNDED?

JAITURED, WHEN AND WHERE?

WELEASED:

WHEN AND WEERE SURRENDERED?

Near Salisbury, North Carolina.

(does not state when).

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED:

WITNESSES:

Helle Logan - game command . No dat

STATE OF GEORGIA IN WITNESS WHEREOF, I have hereunte set my "Executed in the presence of

#### For Use of Applicants Who have Not Heretofore Drawn.

STATE OF GEORGIA. Gullon PERSONALLY ADDEARS & BREERS County, State of Georgia, who being due sworn says on oath that he was born on the 18 4 6, that he is a bona fide citizen and resident of Georgia, and has been continuously since the 2000 day of Fel. the military service of the Confederate States (or tile State of about 131 day of Detrice. served in Company 1/2 in 36 th Regiment of Le Brigade, and was honorably decharged on the afric 13th 1865 ; that whilst engaged in such military service, and in line of duty in the State of the state he was disabled or wounded as follows at The Callle of fore Core con shot in right thigh by wound ball wach ball Shortered the Bones soul come ihr recount to break out afresh occusionally and runs of an very humbrel ileo woulded to tack of the tolar at The same battle which would reader afflicent amable to perfere a transact later Phinters of Bone keep coming from the would in the thigh and the limb is so stuff and painted that, most on it time I can't walk about or use The limb atale, If I stand or walk on the limb for any length of times it swells up and guts so farinfull and sore that I have to lie down to get relief. This makes it impossible for me to do any kind of work that I know how to do, as I am una ble to stand or walk on the aunto long wough at a time to make my service of any value to Deponent desires to participate in the benefits of Section 1250 of the Code, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year thereunder, enough October 26th, 1893,

Sworn to and subscribed before me, this the less frewards the day of the less of the Post Office Ordinary

Some -State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claim is based on disease, give full and connected bestory of disease, tracing it directly to the service.

Nore-Do not trouble to mention wounds which do not disable

Note.—The Ordinary will see that all black spaces are filled when the affidavits are signed.

4.

Obligation appears before me, the undersigned Ordinary in and for said County C. J. Wright A. Bruce

personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say,

under outh, that they are personally and well acquainted with Greece B. Reeves whereapplication is herewith presented for a pension, that he has resided in this State continuously since the

Feb. 1846 , that he served in Company K of the

Fegunant of Curan racing's Brigade, and from our personal knowledge he

while to time of daty, was injured by the service as follows: oper tall statement, and tell in space over language when one could not the corn a happened, or the do**rsale** was contracted, and a what extent applicant is doubled from new ones.

He was shot in the right Thington, with a minue Ball, on any 31, 1864 in a Battle man Jonesborough, 92, The wound was mitte severe and applicant suffered a good deal fire it.

If late years we have seen but lette of apple. Can't as we have lived in a different hast of the state given how, out we remember that applecant was in our Regiment, and That he was worked as stated,

ire of our own knowledge, will also certify that he is disabled, from the armed above discorbed, to such an extent that he is now mable to earn a support by manual labor.

We personally know above stated facts. We were with him in the army and have known him ever since He was hope rably discharged or retired from the service on 13th day of Whool

186 5 ... Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 18 We have no interest in the recovery of a pension by him

Sworn to sad subscribed before me, this

STATE OF GEORGIA.

Fulton

PERSONALLY comes before me ... W. H. Hulery

a. H. Brantly me as reputable physicians of said County, who being severally sworn, say on oath, that they have carefully examined

Corcers B. Reaves condition of applicant is as follows: He is suffering from an constant sies of absectses in the right Thigh, with the aboundant discharge of

Pur and many spiculae of Bone, The muscles have much shown and the site of the old wound is indusated, and most of the time very sunstive. There are always from three to fine Heids or points of discharge, This as crapples applicant, that in our opinion he in maspoble of earning of living by any ordinary manual avocation

and that such condition is permanent. Said condition arises from the following facts: old greatest would of the right thigh, in which the huseles and Tendores were much torm and the Thigh Bone splintered in such a way that the Bone continues to explicit or throw off spacular It will likely continues to do so as long as he lives.

We have treated applicant professionally for.

years, and his condition, as above stated.

arise from bereditary or congenital causes, or from victous or intemperate habits

Sworn to and subscribed before me, this 30 day of 7/1- 1899.

a. N. Brantly . A. J. SPHALL MS

my their

Note 1. State fully the physical condition and especially the execut of disability. It aisability results from wound or just, state its location, character and present condition. If from disease, give its patters and character, and its causes in congru

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

STATE OF GEORGIA,

ouller County 1 moromina

do certify that I am well acquainted with

applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents himself to be resides in this County and has been a bona fide resident since the day of att Braully I also certify that the witnesses, to-wit:

& Mose less persons of respectability, that their statements are worthy of full credit and belief and that the full text of the affidavit was read to and understood by them before they

Given under my official signature and seal this 30 day of 2

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

### POWER OF ATTORNEY. STATE OF GEORGIA, ___bereby authorize to receive and receipt for the pension paid beceon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1900. _[t. s.] Executed in presence of

#### POWER OF ATTORNEY.

STATE OF GEORGIA,	
County	
I, hereby at	thorize
of	
to receive and receipt for the pension paid hereon an	d request that he remit same to
by	
at	N 141
IN WITNESS WHEREOF I have bereunto set	my hand and seal this
day of1901.	
	[L. S]

Executed in presence of

Those Already

DISABLED

SOLDIER'S PENSION

SOLDIER'S PENSION

JOHN W. LINDSEY,

places "referent Alleigna" wich

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#### For Applicants Heretofore Allowed Pensions.

to when are troposoto tripostod tourstons.
STATE OF GEORGIA,
personally appears C. B. Keanes of Jalkon
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
20 day of 766- 1846; that he enlisted it too military service of
the Confederate States for of the State of
tween the States, and served as a in Company L of 36th
the Confederate States for of the State of tween the States, and served as a Regiment of Company  Volunteers  Regiment of Company  Volunteers  Regiment of Company  To Brigade; that whilst on the State of Company  on the States of Company  Note that minimally service in Company  on the State of Company  To Brigade; that whilst on the State of Company  on the States of Company  To Brigade; that whilst on the State of Company  On the States of Company  On the
engaged in such military service in the State of Geo. on the 3/
day of 186 4, he was wounded, injured or diseased as follows
mind ball renderinging home
munic ball sendi
(un his ) and in the
Jei Jei mile
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1900. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Dollars, for the year 186 ?
Sworn to and subscribed before me, this, the land subscribed before me,
day of ALLER 1940. ) POST OFFICE
1777, 2000
Nota. State fully the nature of wound or character of disease which causes the disability and explain particularly be extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Falkon County.
1. M. St. States Ordinary of said County, do certify that I am well acquainted with C. B. Hearenthe
do certify that I am well acquainted with . A Reancethe
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this Coun'y
Given under my official signature and seal, this
Ama day of 7722-2-12 1900.
( ) There is

#### For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Juston County
Personally appears and Reavers of Juilon
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 20
day of 7th 18 4; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
P
of Maluntary Miller and I Did a series
in such military service in the State of /A , ou the 3 / day
he was wounded, injured or diseased as follows:
come et right thigh from minie
rall, rendering him simple for wor.
the second of th
Company of the second of the s
Deponent makes application for the pension to which he is entitled for year end-
ing Ogegber 26th, 1901. I have heretofore under said law as a resident of
Calllon County been allowed an invalid pension of
Dollars, for the year 1900
Sworp to and subscribed before me, this the Lo R Revage
32 day of Jany . 1901. Postoffice allanda
1001.) Postource
nu Millanon
North.—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,
Tueloro County.
I, Multiplicate in the foregoing affiduit and an well estimated that it are well acquinted with Dis Peaves the applicant in the foregoing affiduit and an well estimated that it is the foregoing affiduit and an well estimated that it is the foregoing affiduit and an well estimated that it is the foregoing affiduit and an well estimated that it is the foregoing affiduit and an well estimated that it is the foregoing affiduit and an well estimated that it is the foregoing affiduit and an well estimated that is the foregoing affiduit and an well estimated that it is the foregoing affiduit and an well estimated that it is the foregoing affiduit and an arrived that it is the foregoing affiduit and an arrived that it is the foregoing affiduit and an arrived that it is the foregoing affiduit and arrived that it is the foregoing affiduit arrived that it is th
do certify that I am well acquinted with OB Reaves the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 Jarry 1901.
man direction of the second
Grand Grand Grand County.
County.

STATE OF GEORGIA

I,

County.

hereby authorize____

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

IN WITNESS WHEREOF. I have hereunto set my hand and seal this 1902.

Executed in presence of

SOLDIER'S PEN DISABLED

THOSE ALREADY ENROLLED

Heever.

[ L. S. ]

FOR THOSE ALREADY

DISABLED

POWER OF ATTORNEY.

STATE	OF	GEORGIA,

	2100 4	(				
	County	ý				
I,		hereby	authorize			
	Company of the second s	of	HE 4400			-
o re	ceive and receipt for the pen-	sion paid hereon	and request	that h	e remit	same t
		by				
ii.						

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

...1903.

Executed in presence of

FOR APPLICANTS HERETO ORE ALLOWED PENSIONS

#### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Personally appears (County.)  Personally appears (County.)  Personally appears (County.)  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 20 day or 18/6; that he enlisted in the military service of the Confederate States (or of the State of 10 during the war between the States, and served as a 10 company of 10 of 10 th Regiment of 10 to 10 the State of 10 on the 11 day 10 of 10 the was wounded, injured or diseased as follows:    County State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of the Confederate States (or of the State of 10 during the war between the States, and served as a 10 company of 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 company of 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States, and served as a 10 during the war between the States of 10 during the war between the States, and served as a 10 during the war between the States of 10 during the war b
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 Dollars, for the year 1801.  Sworn to and subscribed before me, this the day of Dollars, for the year 1801.  Some State fully the nature of he would or character of disease which causes the disability, and explain perford of the disability resulting from the would or disease.
STATE OF GEORGIA.  In the county.  Ordinary of said County.  do certify that I am well acquainted with.  Ordinary of said County.  The applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.  Given under my official signature and seal, this.  day of JAN 13 1902 1902.  Ana 13 1902 1902.  Fultona. County.  Norn.—Fill all blaks and of Company and Rogiment.  Norn.—All rougher, and affidavite must bear date after January 1, 1902.

#### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

The state of the s
STATE OF GEORGIA,
Personally appears, ORRecess of
Personally appears, 6 BREEVER of
County, State of Georgia, who being duly sworn, says on oath that he is a tona hole citizen
and resident of said State and has resided therein continuous vever since the
day of Jillo 1846, that he enlisted in the military service of the Con-
felerate States (or of the State of
States, and served as a in Company / 1, of 36 th Regiment
of the Volunteers Torress is Broads that while
felerate States (or of the State of states, and served as a in Company of the Regiment of the Volunteers Communicated States of the State of the State of the State of the Was wounded, injured or diseased as follows.
of aug 1864 he was wounded injured at disposed as failure
Wound right Thigh
Depenent makes application for the pension to which he is entitled for the year
ending October 26th 1903. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of Dollars, for the year 1992.
* Oth 23 4
Sworn to and subscribed before me, this the day of 1903.
day of 1903. Post-office
La Collina
NOTE - State fully the nature of the wound or character of disease which causes the disability, and exponent purposal or disease.
STATE OF GEORGIA,
County.
do certify that I am well acquointed with 613 Place 1
do certify that I am well acquointed with 600 Mescre L
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidevit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this
day of 1903,
Ami
real acre County.
Norr.—Fill all blanks and of Company and Regiment.

NOTE. All vouchers and affidavits must bear date after January 1, 1903

STATE OF GEORGIA,

hereby authorize

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

IN WITNESS WHERE E. I have become set my hand and sea', this day of 1904

Excited in the present of

DISABLED

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY 1

hereby authorize

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

at.

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

Executed in the presence of

1.8

#### LAW WITPIOWNIO UEVETALAWE WPPRAKA LENSIONS STATE OF GEORGIA. Fulton. County. Personally appears & Elever of County, State of Georgia, who, being duly sworn, says on oath that he is a hona fide citizen and resident of said State, and has resided therein continuously ever since the and 187% that he enlisted in the military service of the Confederate States for of the State of ) during the war between the in Company /2, of 36 th Regiment Volunteer 4 12, 1111 1442 98 Brigade, that whilst engaged of the was wounded, injured or diseased as follows Dr. 15220. C. 20 8.61 7.62 7.6 Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1904. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of ,右京 ___ Ptilton Swarn to and subscribed before me, this the May of JAN 21 1904 1904. John Wilkinson ) Post-office STATE OF GEORGIA L' LLICH County I. John St. Welnerson. Ordinary of said County. the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents marself to be, and that he resides in this County Given under my official signature and seal, this

A Wil Kinson

Note Fill all blanks and of Company and Regiment.

Note Ail vouchers and affidavits must bear date after January, 1, 19: 4.

Fulton, County.

Pulto: COUNTY. Personally appears to the Reenies of Mit 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 call day of His Liste 18; what he enlisted in the military service of the Confederate States (or of the State of Slazgea ) during the war between the States, and served as a Dernal Tu Company ell, of 36 th Regiment of Sta. Volunteers Cumming); 's Brigade; that whilst engaged in such military service in the State of Service on the Cliff 1864 , he was woulded, injured a diseased as follows Disabled by forestione Deponent makes application for the pension to which he is entitled for the year ending October 26th. 1905. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1964. day of , JAN 2 1905. Post-office (Classe Car STATE OF GEORGIA, Fullow COUNTY. I. do certify that tam well acquainted with 12 11. Preliminary of said County. the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents him elf to be, and that he resides in this County. Given under my official signature and seal, this

STATE OF GEORGIA.

County

Note - All vouchers and affidavits must bear date after January ! 1905

Norm. - Fill all blanks and of Company and Regiment.

FOWER OF ATTOMINET.	
STATE OF GEORGIA,	
L hereby a	athorize
of	
to receive and receipt for the pension paid hereon, and request that he remix	same to
by	
at.	
IN WITNESS WHEREOF, I have hereur to set my hand and seal, this	-
day of 1906.	
	[1 8.]
Executed in the presence of	
· is to the second second	
	- 10
FOR THOSE ALREADY ENROLLED  NO. (C. 7)  DISABLED  I DOG.  ILDOG.  Regiment (E. 1)  Anternal Handen To	3
THOSE ALBEADY ENFOL  No. (407)  DISABLED  DISABLED  I BOOG.  Regiment 2011  Regiment 2011  Regiment 2011  ANGEANT HANDED THE	- 8
Sing Section 128 SE ALREADY ENG COLOR PROJECT COLORS WILLIAM CREAN THAN DECOMPOSED TO COLORS WILLIAM CREAN THAN DECOMPOSED COLORS WILLIAM THAN DEC	L. L.
	) Page
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#### POWER OF ATTORNEY.

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STATE OF G	EORGIA,	ļ	
	BORGEA,		
Ι,			hereby authorize
		cf	
to receive and	receipt for the	pension paid her	eon, and request that he remit same to
F2 5.1		by	1 -1 + w & x :
at.		- =	
IN WITNES	S WHEREOF, I ha	ve hereunto set 1	ny hand and seal, this
day of		1907	
			lı el

Executed in presence of

SOLDIER'S PENSION

JOHN W LINDSEY.

WARRANT HANDED TO

(FOR THOSE ALREADY ENROLLED)

Fulton

TON ALL BIORNE	JUDULIVIO	THE ADDOUGH DO I DINDIVING.
State of Geo	rgia,	
Fulton	_County.	
Personally appears_	6.00. Ores	ever of Fulton
County, State of Georgia, wh	no, being duly sworn,	says on oath that he is a bona fide citizen
and resident of said State, a	and has resided there	ein continuously ever since the 20
day of the	18 45 that he en	listed in the military service of the Con-
federate States, (or of the St	tate of Seo	Affact ) during the war between the
States, and served as a		Company 1 of 36 th Regiment
of Vel. Vol	unteers	's Brigade; that whilst engaged
in such military service in	the State of	on theday
of LUG.	186.4 , he was	wounded, injured or diseased as follows:
the 1/4 -	- p	
wabled	Leg.	
	0	
× ×		
		sion to which he is entitled for the year
ending October 25th, 1900	<b>4</b> 1	ore, under said law, as a resident of
Titte of		unty, been allowed an invalid pension of
- Lylly C- 2		Dollars, for the year 1905.
Sworn to and subscribe	ed before me, this th	12 / C.B. Receives
Jay of JAN	1 1906 1906.	1 /the
	Museul	Post-Office William
St. Susa fully the mature	of the wound or character	r of discase which causes the disability, and explain
particularly the extent of the disability	ty resulting from the woun	d or disease.
State of George	rgia,	
Finito	County.	
Carlo	Wilkinson	Ordinary of said County
do certify that I am well a	cquainted with	B. Reener
		well satisfied that the statements made
		he is the individual he represents himself
to be, and that he resides in		
	my official signatur	e and seal, this JAN 1 1906
day of		1906.
-		A Wilkinson

Nors.—Fill all blanks and of Company and Regiment. Nors.—All wombers and affidayits must bear date after January 14t, 1906

Hilton. County.

Affin your seal here

State of Georgia. Fulton. ACounty. Killies of Fulton Personally appears 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 alchaelife 18 ; that the enlisted in the military service of the Confederate States (or of the State of ______) during the war between the States, and served as a Paracete in Company MG, of I 6th Regiment Volunteers Communica 's Brigade; that whilst engaged in such military service in the State of Lawrence, on the 22 day Balthe of Jonestono, Sa. Disarted tex Jonestore Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1906. Sworn to and subscribed before me, this the day of JAN 2- 1907. ( La B. Recoen John R. Wilkinson. Postoffice 200 Junes of 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. John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with M. J. V. the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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-John R. Wilkinson. AMX your seal here be MEB O Project O Partition. Norg.—Fill all blanks and of Company and Regiment.

Novg.—All vouchers and affidavits must bear date after Jaquary 1st, 1937.

TAN UTT DIOUTED HOMBIALAND UPDAMED LEVOTAND

STATE OF GEORGIA. )
::
COUNTY OF FULTON. )

Personally appeared before me William Rickles.

J.R.Hadaway, and J.W.Veal, who being by me duly sworn, upon oath say, each respectively for himself, that they are each acquainted with the present physical condition of Mr C.B.Reeves, and further say that the wound in his leg is now open, much inflamed, and that he is unable by reason of his physical condition caused by his said wound, to move about save with great difficulty, and said Reeves appears at all times to be still suffering great pain. Deponent Hadaway for himself further swears that he has known said Reeves intimately for the past eight months and that the condition of said Reeves has during all that time, been about as at the present.

The Am 2-1851 - J.M. Veal

Subscribed in my presence, and sworn to

before me, this 2d day of November, 1899.

Ordinary, Fulton Co. Boorgia.

Ordinary, Fulton Co. Georgia.

The faith - co and

The diller of the faith

Pulton Application for Expenses of Last MAY 16 1995 Illness and Funeral WINDE OFFICE A. C., Elizon, Director (UNDER ACT OF 1919) Thos H Jeffries For: Mrs. Caroline Reeves
(Name of Pensioner) Death: March 15 PAID TO ORDINARY ON THIS CLAIM:

Director, Vetarass Service Office.

#### Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)

(To be disbursed by the Ordinary)

GEORGIA, Pulton County:	
Before me, the Ordinary of said County, comes Jemes J. Condon, of Brandon, Bond & Condon , of said County, who, after being duly sworm, on path.	
that he knew Mrs. Carcline B. Reeves late of said County, a Cor	ıfed-
erate pensioner, and that said person is the identical person named and described in the attac	ched
certified copy f burial certificate; and that said pensioner LEFT NO MADDILLOSS ESTAT	E of
ANY KIND OR VALUE sufficient to pay the expenses of last filness and funeral, which amou	nted
to the sum of § 316.00 , as shown by sworn statements FULLY and COMPLET	ELY
ITEMIZED, hereto attached.	
Sworn to and subscribed before me,	
this the 27 day of March 193 5.  CUI Dattuton Ordinory.	
CERTIFICATE OF THE ORDINARY	
GEORGIA, Fulton County	
James J. Condon	ale cal
to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith	
#rs. Caroline B. Reeves	
pensioner referred to in the toregoing affidavit and that said deceased was at the time of de	
regularly enrolled as a pensioner on the records of file in my office. I further certify that said ceased pensioner is the identical person named and described in the attached certified copy of bu certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expension of last illness and burial for which claim is made.	de-
Given under my hand and seal of office, this one 27 day of freh, 193	. جُ
(Seal of Ordinary) , Ordinary	ary.
	===
INSTRUCTIONS:	
let. 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 f	orn)
giving each item and the value of it, and each date.	orm,
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	
be) of, who died without owning sufficient property to pay this bill.	щау
4th. The Ordinary must see to it that each bill is perfectly legitimate in every 1 speet, and properly sworn to, all attached neatly to this blank, after this blank has been properly completed and sig we as indicated.	and
5th The completed voucner—this blank end the bills—must be sent to the Veteran state of an an an on money must be paid out until it is returned to you as your authority to make the payment.	oval
bth. 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.	

Sth. 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.

ATLANTA, GA.
AMBULANCE SERVICE

SOLD TO Mrs Pauline Belser

Thursday expense My Carrie & Reeves

3/1/405 Expense

Revises Vialse

225.00

Dress 1300 Jan Jany 2500 Janus Vady 5000

GEORGIA. FULTON COUNTY.

I hereby certify that the above account is just, true, due and unpaid. This March 27 1935.

Sworn to and subscribed before me this March 27 1935

US Ballerton

140001

sum of 600 for funeral expense of Susline 13. Keens

I further certify that this account has not been paid and is now owing to me.

This // day of May 1935.

Bruda Bond Comen

Received of Thomas H. Jeffries, Ordinary, a 150.00

to apply on account of __ Mrs. Caroline Reeves

I certify that this account has not been paid and is now owing to me.

Tais 2 day of Sep 1986.

Brandon Bond Howan

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.

I certify that this account has not been paid and is now owing to me.

This 2 day of Sep 1986.

Brandon Bond Horlow

file in my office. Signed Local Registrar V.S. Atlanta

1061 and the supplementation of the second MEDICAL CERTIFICATION OF ALL DEATH FARTICULARS

MEDICAL CERTIFICATION OF ALL DEATH surely. file in my office.

Atlanta, Ga. March 28, 1935
of a record of death on
igned Local degistrar v.s. Atlanta, Ga.

ta Ga. March 28, 1935 cor of a record of death on Local Registrar V.S. Atlanta, Ga. GEORGIA DEPOSE MENT OF PUBLIC HEALTH Bureau of Vital Statistics LATE OF DEATH 1061 Militia District (Natiser and Name) Length of residence in this city or lower  $Y(s) = Mos_{solo} \cdot Ds$  . NON-RETIDENCE (v)ISHEN MOCKETAN COT CO 17 FULL NAME STALL COLLEGE 18th and Number I colored to 1 (States in PERSONAL AND STATISTICAL PARTICULARS MEDICAL CERTIFICATE OF DEATH 

li dow Donthow 7 AC! Years Months Days II less than one day

1. rete

Olomb. Day Year)
17. I HEREBY CERTIFY, That I attended the deceased from

1/-13-15-15-35-35-

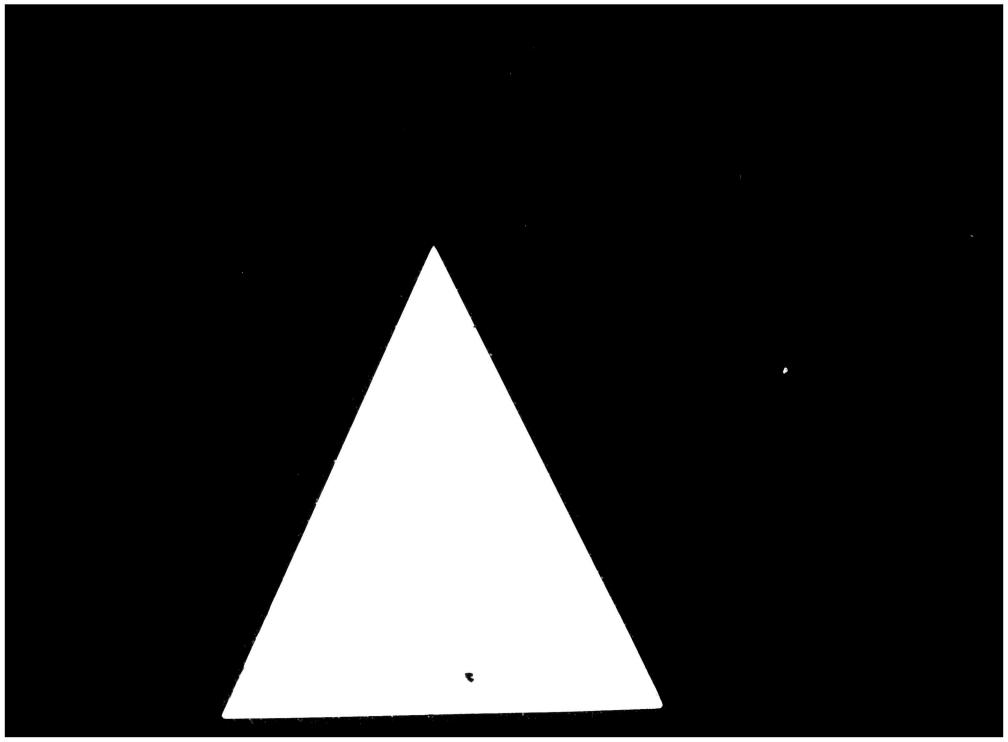
GEORGIA DEFERENCE OF PUBLIC HEALTH Bareau of Vital Statistics 1061 Militia Dietrict (Nur ier and Name) in lit duta Length of residence in this city or town. Yes Mostor Ds. NON RECEIVED INC. (Sucas) Coodwan Ger C Street and Number I I state of the State Residence (City or Town) Ellegenta PERSONAL AND STATISTICAL PARTICULARS MEDICAL CERTIFICATE OF DEATH 4. COLOR of RACE 5. Single, Married, Widowed, Divorsed (write the word) SEX 16. DATE OF JOS STATE OF STATE 1 nete Widow Dontilnow 6 DATE OF BIRTH (month, day, year) 11-18 135.10 3- 15-34. AGI Control month, day, year

AGI Year Minis Day III less than one day
Hours Minutes

Lode, pre raison of particular

Lode, pr I last saw hand alive on 1/5 3 19 death is said to have occurred on the date and hour stand above. The principal cause of death and related causes of importance in the order of one-fine duration of ejech: (b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc. (c) Date deceased last worked at this occupation (month and year) (d) Total years spent in this Other contributory carries of importance. 9. PIRTIPLACE I BIRTHELACE I CHES What test confirmed diagnosis? Tras Soudere Bolson Natural S. F. Francisco C. 10 (Sign of St. 9) Forement C. actante por

Local ac 1st ... /. .. Atlante, Ga.



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	3	H.C.	Frombisasis	6/701		in pres	Pose.			GEORGIA
	- Francisco	CEC	CALDIUD'S DI	ington.	X	ALORORO	1 for	100 01		RGIA
		ОВСП		THE TAXABLE TO SERVICE	3 34	EORGIA,	€. <b>(</b>		Coun	
٠.	5	Con	1997	•	Ex Ex	Co.1908.	4   B		unty.	* .
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,			County County	9346-		еппто	hereon	he.		
			Disability Lit Base			set m	3 g	ereby s		
	7	481	Amburt, S. LTV	4 8	8897 Ju	у пап	nd request	authori		
			7 /500	1009	F .	dand		ize		
	factory.	. 7	JOHN W. LINDS	EY,	) 1	seal th	that he			
	200000	<b>S</b>	WARRANT HANDED	70	4	is lis	remit			
	The state of the s	4	- My				защ		· 'g	
(4) 	22		E STATE OF THE STA	Mana.	а 9	<b>e</b>	2 g		-	

STATE OF GEORGIA, hereby authorize___ to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of 

SOLDIER'S PENSION

County

STATE OF GEORGIA,

Cour - State of Georgics who being that sie

Executed in presence of

( FOR THOSE ALREADY ENROLLED.

FOR APPLICANTS HERETSFORE ALLOWED PENSIONS

	POWER OF ATTORNEY.
STATE OF GE	
	County.
I,	hereby authorize
	01-
	ceipt for the pension paid hereon and request that he remit same to
	by
IN WITNES	S WHEREOF, I have hereunto set my hard and seal this.
	1908.
Executed in	,
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	9
and the second	

SOLDIER'S PENS DISABLED

COR THOSE ALREADY EI

1903.

# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF G	EORGIA,	
tullan	County.	
Personally appear	Fakeevis of The	the former
	ia, who being duly sworn, says on eath that he is	a bong fide citizen
and resident of said St	ate, and has resided therein continuously ever si	uce the
day of	1843, that he enlisted in the military s	ervice of the Con-
federate States (or of the	77.08	e war between the
States, and served as a		th Regiment
	Volunteers, Standard 's Brigade; th	
in such military service		eday
0	186 , he was wounded, injured or disease	ed as follows:
worn	wied in lugs the	1/
		on
Di to <del>di</del> nes	1,0	· · · · · · · · · · · · · · · · · · ·
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	The second secon	
Sworn to and subscription of the state of th	County, been allowed an i Dollars, for the year 1901.  The before me, this the H. R	landin E
Norn. State fully the narricularly the extent of the dis	ature of the would or character of disease which causes the cability resulting from the wound or disease.	disability, and explain
STATE OF GEOR		
1		of said County,
o certify that I am we	ell acquainted with Bours of fr	or said County
	going affidavit, and am well satisfied that the state	tements made by
im in his said affidavit	are true, and I know he is the individual he repre	esents himself to
e and that he resides in		13
Give	n under my official signature and seal, this	9
day	of 1907	· / .
your seal	( John Will	Vanna .
	Ordinary July	County.
Note.	Fill all blanks and of Company and Regiment. —All vonchers and affidayite must bear date after January 1, 18	
£.5	WIR OF MINORINE	

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, )
County.
says on oath that he is a bong hide citizen
and resident of said State, and has resided therein continuously ever since the
day of 18 43 that he enlisted in the military service of the Confederate States (or of the States)
federate States (or of the State of July during the war between the States, and served as a
of Adde Volument
in such military complex in the Change of the Brigade; that whilst engaged
of Children in the State of day
he was wounded, injured or discused as follows.
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would white vace
The same of the sa
tome or continue and a second
Addressed to the second
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1903. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1902.
4 11
Sworn to and subscribed before me, this the
day of IAN 1903. Post-office
form of the letterson
TE-State fully the nature of the wound or character of disease which causes the disability, and expunsionarily the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
County
I John Dr. 10 denian. Ordinary of said County
I, John St. Tamion. Ordinary of said County, do certify that I am well acquainted with FUREWES.
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himseif to
be and that he resides in this County.
Given under my official signature, and seal, this
day of 1903 Wiedinon
your ) soai }
County.  Note.—Fill all blanks and of Company and Regiment.
Nove.—All vouchers and affidavits must bear date after Jacuary 1, 1903.

1170

STATE OF GEORGI	Ä, )	200 S	
	COUNTY		
1,			hereby authorize
	_ of		
to receive and receipt for	r the pension paid here	on, and request th	at he remit same to
	_ by		
at			
IN WITNESS WHER	EOF, I have he:eunto set	my hand and seal,	this
day of	1904.		
Executed in the pre	esence of		

SOLDIER'S PENSION

DISABLED

1904.

Name & Cherry

Fuiton.

County Co.

Disability XIIIII

(FOR THOSE ALREADY ENROLLED.

No. //2-

Beened 7 a.

# no dota

(FOR THOSE ALREADY ENROLLED.) DISABLED No. 67

Amount, & Hat Stal

JOHN W. LINDSEY,

WARRANT HANDED TO

#### POWER OF ATTORNEY.

STATE OF GEOD	RGIA,	
maneral for the secondary to	County.	
I,		hereby authorize
Principles of the first and descriptions	_ of	ALON MARKATANIAN TOTAL TOTAL TOTAL
to receive and rece	ipt for the pension paid hereon, and req	uest that he remit same to
	by-	s s
at.		
In Witness W	EERBOF, I have hereunto set my hand an	d seal, this.
day of	1905.	
		أردا

Executed in the presence of

SOLDIER'S PENSION

1905.

no data

11. 1 Tha

17 To SLAVE

WARRANT HANDED TO

JOHN W. LINDSEY,

#### FUR APPLICANTS HERETOFORE ALLOWED PRISIONS

THE TANK AND THE PARTY OF THE P
STATE OF GEORGIA,
Fulton. County.
Personally appears f 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 18 4 %; that he collisted in the military service of the Con-
federals States for of the State of July (a) during the war between the
States, and served as a in Company of the Regiment Volunteers Volunteers Brigade; thet whilst engaged
Volunteers Volunteers Brigade; thet whilst engaged
in such military service in the State of
186 / he was wounded, injured or diseased as follows:
in which I lack
***
The second secon
Deponent makes application for the pension to which be is entitled for the year
ending October 26th. 1904. I have heretofore, under said law, as a resident of
Dollars, for the year 1903.
Sworn to and subscribed before me, this the J. A. Seccessian of JAN 21 1904 1904.  Company of JAN 21 1904 1904.  Post-office
Nets. 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, Entition. County.
1. Join K. Wilminson To Dedinary of said County.
do certify that I am well acquainted with the the the
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.  Given under my official signature and seal, this
day of

N -rg  $-Fi\theta$  all blanks and of Company and Regiment. Note —All venctors and affidavits must bear date after January, 1, 1904.

Ordinary___

Affix | Your | Seal | here

Affix your Best bere.

Ordinary

County.

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

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

	-	F GEORGIA,	Count	Y. }			
		I				ber	eby authorize
				of			
	to receive a	and receipt for	r the pensio	n paid herec	n, and reque	est that he re	emit same to
				by			
	at						
	In W	ITNESS WHER	EOF, I have l	iereunto set r	my hand and	seal, this	
	day of						
							_[L. s.]
	Exect	ated in the pre	sence of				
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			3	7 12		Change	
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nt	IV EUROL	PR	0	220 200	in the	INDSE usmoner o	I DEC
Court the	READY ENROLL	NBLED S PRI	200	ullon.	sec my	W. LINDSEY	A A A A A A A A A A A A A A A A A A A
r court	E ALREADY ENROL	SABLED	908 908	Fullon. Regiment	Saun Esc	JHN W. LINDSE	KARI HANDEL
tou court	COUR SECTION 1250 FOR THOSE ALREADY EMPOLES	DISABLED	1906	Fullon. Regiment	Disability Mellers Amonat, \$56.00	GOHN W. LINDSEY	WAEKAFI HANDED IN

#### POWER OF ATTORNEY.

And the second s	
STATE OF GEORGIA,	
COUNTY.	
I	, hereby authorize
. of	
to receive and receipt for the pension paid he	reon, and request that he remit same to
by	
at	
In Witness Whereof, I have hereumo set	my hand and seal, this
day of1907.	
	(L. <b>s</b> .)
Executed in presence of	

Fulton

County &

Reaver & G.

Cons Berron 1366

(FOR THOSE ALREADY EMOLLE)

NO. PO

DISABLED

SOLDIER'S PENSION

1907.

WARRANT BANDED TO

JOHN W. LINDSEY,

FOR APPLICANT

THE COMME TO MILE OF COMM

### FUR APPLICANTS HEBETOFORE ALLOWED PENSIONS State of Georgia. Fulton County Personally appears L. C. Reever 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 2 day of Man 1842; that the enlisted in the military service of the Confederate States. for of the State of Glangia, during the war between the States, and derved as a Regiment in Company of 18 th Regiment in such military service in the State of ______, on the ______day 1214 1864, he was wounded, injured or diseased as rollows Thousand, 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 Dollars, for the year 1905 / Sworn to and subscribed before me, this the / J. H. Keins day of JAN 1 1966 1906. Post Office State of Georgia. County.) Ordinary of said County. the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself

State of Georgia. Fulton. County. Personally appears J. a. Kleves 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 12 that be enlisted in the military service of the Confederate States for of the State of during the war between the States, and served as a Demonstruction Company of 13 th Regiment of Volunteers 's Brigade; that whilst engaged ia such military pervice in the State of _____, on the____ _____186 he was wounded, injured or diseased as follows Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1906. Sworn to and subscribed before me, this the 7 A michely 1907 Note. -State fully the nature of the wound or character of disease which causes the disability, and explosi-State of Georgia. Fulton. County. 1. John K. Wilkenson. Quality 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. Jain OR Wilkinson Nors.—Fill all blanks and of Company and Regiment. Nova.—All vouchers and affidavits must near date after January 1st, 1937.

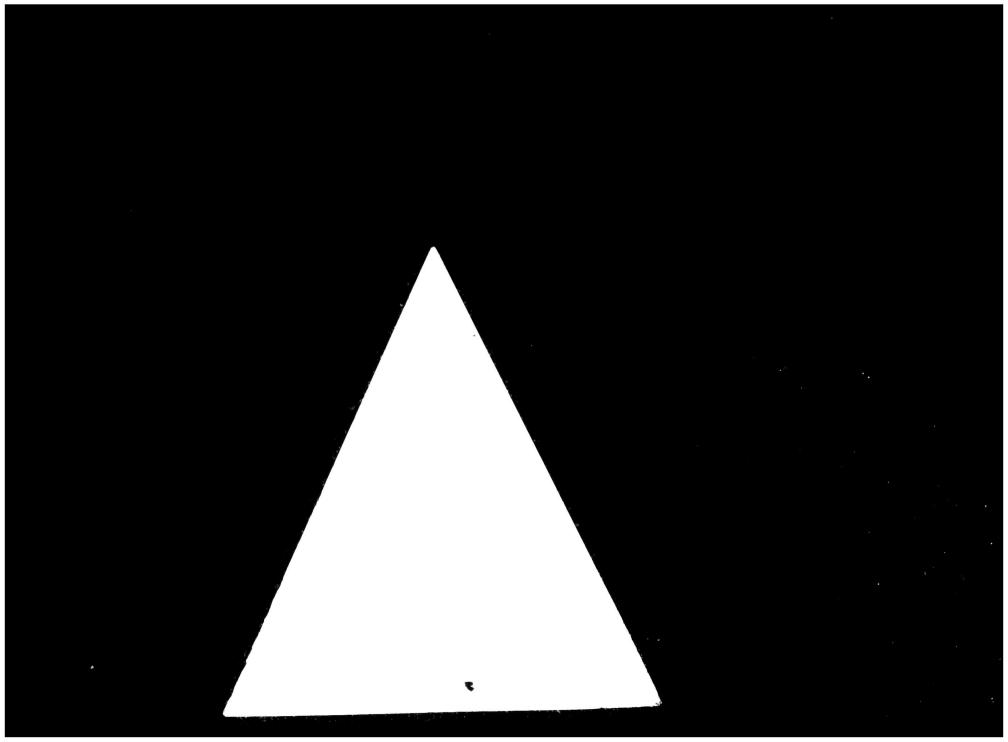
Nors.—Fill all blanks and of Company and Regiment. Nors.—All vouchers and affidavits must bear date after January 1st, 1906

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

to be, and that he resides in this County.

Neman Ga Jan. 11 th 1902 -Georgia, Cameta Camity. V. D. a. Perdiel, Ordinary in and for said Carrety, certify that 7. A. Reenes, the heaver hered? mad on the racion disabled or smalled Suldier's rall for said Carrety, and drew a sension of 5.000 for the year 1901, and has not tues dropped to the grand jung of the County server that time, This jan. 11th 1902. De Lodie-Ordinary, Cametalo Fa. Mr. Runes; Pake this certificate to ordinary Milhimon and have your mand entered for Fuctor lainty, as he draws Monday next, it will be neveragy for you to arrive to the moster today, I think this is test for you. Young Very Pruly

ORLANDO MCCLENDON,



Widow's Application

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

and the latter of latter of

Name MRS. PARKER REEVES Widow of ... James R. Baeyes.

Date of Marriage Angust Date of Husband's Death . Aug 2 . 211

County FULTON

Certificate

Jeffries,

ORDINARY)

the Ordinary shall swear applicar rs make to each of the questions

AUG 9 1939

RECEIVED

LILLIAN HENDERSON

REEVES, FARRIE, (MA) Widow's Application RECEIVED LILLIAN HENDERSON DIRECTOR Under Act of 1910—As Amende 1919, and Constitutional Am of 1920 and 1937. FULTON

### Ordinary's Certificate

STATE OF GEORGIA.

Fulton ......COUNTY

1. Thomas H. Jeffries, , Ordinary of said County, do certify
that I know. Ars. Fannie Reaves
she is the person she represents herself to be and that she has been, continuously, a bona fide resident
citizen of said State since January 1st, 1920; that I also know. Mrs. Meolla Lenons.
the witness who swears to the acrysoccof has bandon there the marriage; that both of them are now residents
of said County and were duly sworming 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 936
SEAL OF ORDINARY) Ordinary.
County.

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

5	QUESTIONS FOR APPLICANT TO ANSWER:
	Personally appears before me, Arg. Fannie Reaves of said State and County
C	ad hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the
	onstitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after
	ing duly sworn, true answers to make to the questions propounded, answers as follow, to with
	ECTION I.
	1. What is your name, and where do you reside? (Give Post Office and County)
N	rs. Fannie Seeves, 490 Elm St. H.W. Fulton County. Georgia
	<ol><li>How long and since when have you been, continuously, a bona fide resident citizen of the State</li></ol>
of	Georgia? All my life
Gi	ve date, or year, of your birth. Sept. 14, 1870
	3. (1) When, (2) where and (3) to whom were you married? (1) Aug. 1918
(	2) Atlanta, Ga. (5) James B. Reeves
	a. Have you married since the death of first and soldier husband?
l l	b. When and where did your first husband die? Ang. 21 1997. 4 = A+1 ante. Go
	and I resided with a deachter, Mrs. Beolia Lemons, in Fulton Co.  Il hot, how long had you resided apart.
	e. Are you now a widow?
	Have you or your husband heretofore been paid a pension by the State? Yes- Husband
	g. If so, when and for what cause were you or your husband placed on the roll?
SE	CTION II.
	Answer the following questions if your husband was not a pensioner:
	When, where and in what Company and Regiment did your husband enlist 2s a soldier in
Co	nfederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-
try	, Cavalry, Artillery Reserves, State Guards, State Militia or State Troops.
7	When and where did the Commands of your husband surrender or discharge from the Service?
3	. Was your husband personally present with his Command when it was surrendered or discharged?
	and the same of th
	. If he was not present, state specifically and clearly where he was?
	When did he leave the Command?
. 8	. For what cause did he leave?
· h	By whose authority did he leave?
-	For how long was his leave of absence granted? d. In what way?
	d. In what way?
e	
f.	What effort did he make to return to his Command?
g	In what way was he prevented from going back to his Community
h	The state of the state of the containers of the state of
	The state of the s
1.	and when was the need and when was the released?
S	worn to and subscribed before me, this the
-	1 Stanne (x) Rever
O	Statutore C. Ordinary 1 MM Tamme (1) Clave
	The state of the s
of	County

and assaulor

### An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,	
County of Tulton	
Before me, the Ordinary of said County, c who, after being duly sworn, deposes and says:	
1. That she is an applicant for the Geórgia	pension allowed to widows of Confederate soldiers;
<ol> <li>That her deceased husband was not a death, and, therefore, his Confederate military with an application for pension;</li> </ol>	pensioner of the State of Georgia at the time of his y service has not heretofore been proven in connection
<ol> <li>That she is unable to obtain from any party service of her deceased soldier husband;</li> </ol>	person or source evidence as to the Confederate mili-
4. Thes this efficient is below and to such	
Confederate military service as may be preserv	orize the use, as evidence, of any official record or said red either at the Capitol in Atlanta, or in the office of
Confederate military service as may be preserv	orize the use, as evidence, of any official record of said ed either at the Capitol in Atlanta, or in the office of
Confederate military service as may be preserventhe Adjutant-General, Washington, D. C	orize the use, as evidence, of any official record of said ed either at the Capitol in Atlanta, or in the office of
Confederate military service as may be preserve the Adjutant-General, Washington, D. C.  Sworn to and subscribed before me, this the	ed either at the Capitol in Atlanta, or in the office of
Confederate military service as may be preserventhe Adjutant-General, Washington, D. C	ed either at the Capitol in Atlanta, or in the office of
Confederate military service as may be preserve the Adjutant-General, Washington, D. C.  Sworn to and subscribed before me, this the	ed either at the Capitol in Atlanta, or in the office of
Confederate military service as may be preserve the Adjutant-General, Washington, D. C  Sworn to and subscribed before me, this the day of	ed either at the Capitol in Atlanta, or in the office of
Confederate military service as may be preserve the Adjutant-General, Washington, D. C.  Sworn to and subscribed before me, this the day of	ed either at the Capitol in Atlanta, or in the office of
Confederate military service as may be preservithe Adjutant-General, Washington, D. C.  Sworn to and subscribed before me, this the day of	ed either at the Capitol in Atlanta, or in the office of

Questions for Witness as to Marriage and Service of Husband.
TUTOT COUNTY.
of said State and County is hereby presented
s a witness in support of the application of Hrs. Fannie Beaves
tovided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920
nd 1077 in seld State who after below some Act of 1919 and the Constitutional Amendments of 1920
nd 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers a follows, to-wit:
i. What is your name and where do you reside? (Give Post Office and County)
rs. Meelis Lemons, 480 Ela St. H.V. Fulton County, Georgia
2. How long and since when have you known. ** Penglat Results
44 years, since 1885
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen
f this State? 480 Ela St. M.V all her life a resident of Georgia
4. When and to whom was she married? Aug
5. How long and since when did you know James R. Reeves her
usband? 59 years since 1900
6. When and where did A Bears Bears
he husband of applicant, die?August 21, 1927 in Atlanta, Georgia
7. Were the applicant and her husband living together as husband and wife at the date of his death?
He was living with several of his children and my mother, Mrs. Jannie
Reeves, was living with me in Atlanta, Ga.
O limb by by the title the second of the sec
8. If not, how long did they live apart before his death?
/ere they divorced?
If the husband of the applicant was a pensioner, DO NOT answer the following questions.
9. When, where and in what Company and regiment did enlist?
Give date and place)
10. How did you obtain your information of this service?
11. How long within your personal knowledge did he perform actual military service with this Com-
any and Regiment? (Give dates.)
2. When and where was his Command surrendered or discharged? (Give date and place.)
- Control of the cont
13. Were you personally present with this Command when it was surrendered?
not, where were you and how came you there?
and now came you there?
14. Was the husband of any Kanada and a little of the litt
14. Was the husband of applicant personally present with his Command at its surrender?
not where was he? and how came him there?
hen, where and for what cause did he leave his Command? (Give date.)
y whose authority did he leave his Command?
d how long was he granted leave?
ow do you know all that you have stated to be true? (If of your own knowledge, state clearly and speci-
ally)
7W - 12 p
15. For what cause, if you know of your own knowledge, was prevented from returning to his Com-
and?
16. What effort did he make to return to his Command and how do you know this?
Jaugah ay
17. Was he captured as a prisoner?
what prison was he held? and when released?
Sworn to and subscribed before me, this the day of Angust, 193. 9. (Witness)
Standay of August , 193.9 (Witness)
Continue Sec., Ordinary
(SEAL OF ORDINARY)
(SEAL OF ORDINARY)

数色 1.46

A. L. LOYD ORDINARY -COVINGTON, GA.

July, 27, 1939.

Mrs. Fannie Reeves, H & Slim St. A.Th.

Dear Mrs. Reeves:

I am inreceipt of your letter asking about your marraige certificate. I have looked up the marriage records and I find that the record shows that <u>I.R.Rivers</u> and Fannie English were married on The 21st day of August, 1915. I am sure that this is your marriage records but the names given is plainly J.R.Rivers instead of J.R.Reeves. The age of the parties at the time are not given on the marriage record.

I will be glad to furnish you a certified copy of this marriage, but I will have to certify the names as given on the record. The fee for a copy of the marriage record is \$1.00.

yours very truly

Ordinary 1 1 3 2.2.35

Trace Cott

Garris R. Reerio, Richall -Juien Co. sied atomirogeas ago socc. 1927

### STATE CAPITOL

ATLANTA

Judge T. H. Jeffries, Ordinary, Fulton County, Atlanta, Georgia.

WHEREAS :

MRS. PANNER REEVES. WIDOW OF JAMES R. REEVES.

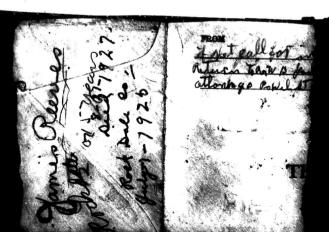
has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service, and that applicant was married 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 3sptember , 19 39 , and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 21st day of August 1989 .

STORESTON OF THE OWNER, WHEN T WALLES AND



A. L. LOYD ORDINARY COVINGTON, GA.

July, 27, 1939. offen St. M.W.

Mrs. Fannie Reeves, Atlanta, Ga.

Dear Mrs. Reeves:

I am inreceipt of your letter asking about your marraige certificate. I have looked up the marriage records and I find that the record shows that <u>J.R.Rivers</u> and Fannie English were married on She 21st day of August, 1915. I am sure that this is your marriage records but the names given is plainly J.R.Rivers instead of J.R. Reeves, The age of the parties at the time are not given on the marriage record.

I will be glad to furnish you a certified copy of this marriage, but I will have to certify the names as given on the record. The fee for a copy of the marriage record is \$1.00.

ordinary

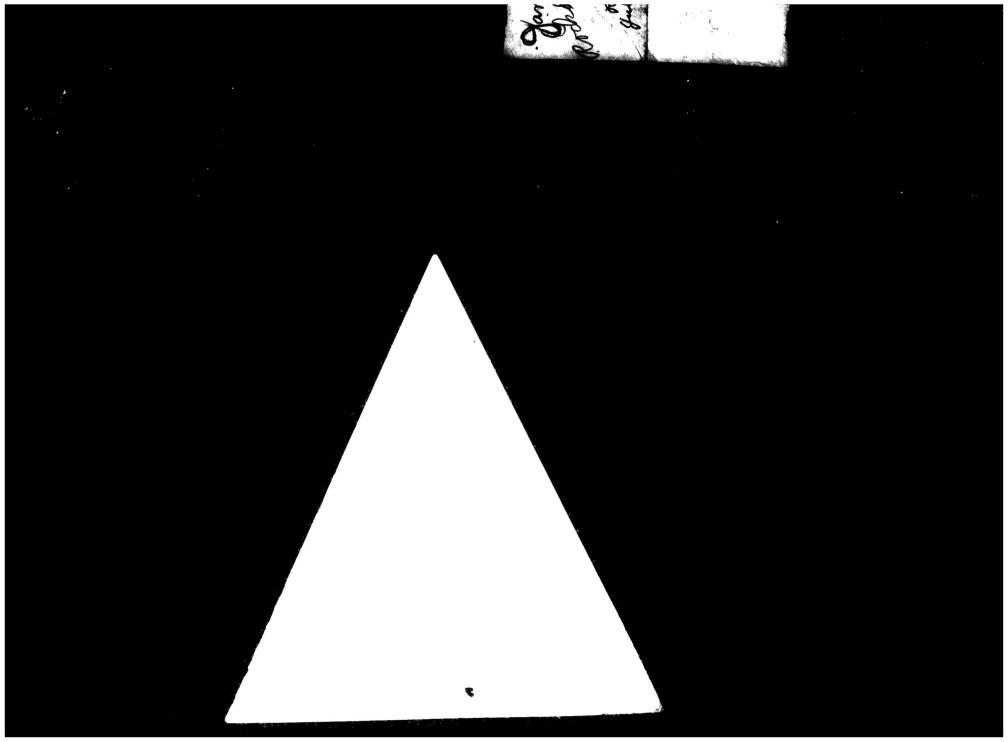
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ago 2010. 1927

Before an personally appears.

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Sarah hil Royal



THE END

# MICROFILMED FOR GA DEPT. OF ARCHIVES AND HISTORY

(PENSION APPLICATIONS OF CONFEDERATE SOLDIERS AND WIDOWS WHO APPLIED FROM GEORGIA)

Title

POPE, (MRS) ANNIE G. (ROBERT C.)

REEVES, (MRS) FANNIE

(JAMES R.)

FULTON COUNTY

Volume

FULTON COUNTY

2892 139-204

2892139

I CERTIFY I WAS THE OPERATOR WHO PHOTOGRAPHED THIS FILM.

15X - V

J. P. SURLES

DATE

MANN FILM LABORATORIES

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# END



Microfilm Publication
of the
State of Georgia
Department of Archives
and History

Ben W. Fortson, Jr.
Secretary of State
Mrs. Mary Givens Bryon
Archivist

STATE OF GEORGIA.	STATE OF GEORGIA.
Si. C. County.	County.
(all and all all all all all all all all all al	of earld State and County, having been prosented
Personally came before pro.	as a witness in support of the application of Rance A Marie for pension
Hill F. Kieco both known to me as reputable physicians	under the Act approved December 15th, 1894, and after being duly swoon true answers to make to the
i wild outney, who being severally sworn, say on each that they have examined carefully	following questions. deposes and answers as follows:  1. What is your name, and where do you reside?
A C Muchael , applicant for pension under the Act of 1894, and after	Tra Matanta, Julia Fi
nch personal examination say that his precise physical condition is as follows:	WA HARMAN
A stala 1 cus is fit I wast former 1	2. Are you acquainted with AV the applicant, is of how long-bave you known him?
ion him to the transfer tung, Canel	
ion in with the restept lune, Canel	3. Where does he reside, and now long has he been a resident of this state? Cold of the State of Sullan Cold.
y course hier or trustion of that ling	4. Do you know of his having served in the Confederate army or the Georgia militia. Atom do you
of the color Chy Visiand Couly land Standing	know this of his - Has in the same Ci
We further say on oath that the physical condition of applicant renders bem unable to labor at any	know this of from That my the same to
ork or calling sufficient to earn a support for himself, and that we have no interest in said pension being	5. When where and its want company and verificant did he entire a first
jowed / Car	Tallatto, Catill in Sunter Pratietis
Saorn to and subscribed before me, this	6. Were you a member of the same company and regiment?
Short to and subscribed before me, this  (A) (1897.)  (B) (1897.)	7. How long did he perform regular military duty, and what do on know of his service as a Confed-
Ordnary.	erate soldier, and the time and ircumstances of his discharge from the service? Alice
Ordinary.	14ans - Mara good solder was a demuch free
A	Janato in 1920 As was actable as a quite
ORDINARY'S CERTIFICATE.	8. What property, effects or income has the applicant? (Give your means of knowledge.)
- 11 as	Laving burn neighbor In wow he
TATE OF GEORGIA,	distribution of the state of th
FILLE (:- County.)	9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if
1. Zizi Zizi Cic & Zi, Ordinary in and for said County, hereby certify that	any did he make of same? In IST Taking the owner land on
e applicant 16 7 / Comment resides in said Courty, and was a bona	Miturater Course the botiling bur suit
le resident of this State on the first day of January, 1894, and that the witnesses, viz:	10. What is the applicant's occupation and physicial condition? Attaching his wife
Entrance of the think in	reading - Francal weating, has files
e of trustworthy character and that their statements are entitled to full faith and credit.	
I further certify that before answering the foregoing questions, the applicant and each witness took	11. Is the applicant unable to support himself by labor of any sort, if so, why?
coath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses	hard lodor for reasons above
I further certify that the tax dipests of Course show that applicant.	19. How was he supported during the years 189 and 1869; Hannade his
	distingen to the 1575 - Ris own ruches Calor
turned for taxation in his name in 1895, dollars dollars	13. What portion of the support for these two years was derived from his own labor or income?
property, and in 1496,	14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension
In my opinion the foregoing clain is made in good faith.	
Witness my hand and seal of office, this 2 day of 3 - 1897.	whole the Act of December 15th, 1864? He is graing ald Air
	Act of December 13th, 1864? It I graing all his
Witness my hand and seal of office, this 2 day of 2 - 1897.	ophysical dis abilities - piter ete-
Witness my hand and seal of office, this 2 day of 1897.	18. What interest have you in the recovery of a pension by this applicant? The n.
Witness my hand and seal of office, this 2 day of 1897.	ophysical dis abilities - piter ete-

### STATE OF GEORGIA.

County.

$\tilde{\mathbf{I}}_{x}$	12.0 00.00	(8)	a l	hereby authorize
	of -		- 22	
to receive and receipt for the pension ellowe	ed and request that	he remit s	ame to	
a1		, by		e e encer la w
Witness my hand and seal this	day of.		71 <del>m</del> x	1897.
Executed to presence of	5			



	STATE OF GEORGIA.
	( CT
	<b>6</b>
	- State of Said State and County, desiring
	to aveil Limself of the Pension Act approved December 15th, 1894, hereby submite his proofs and after
	being duly aworn true answers to make to the following questions, deposes and answers as follows
	1. What is your name and where do you reside? (give State, County and post office)
	2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State "
	and now long to the State of th
	3. When and where were you born? May 15, 1840 Cabo Cofia
	4. When and where and in what company and regiment did you entire or serve
	May 186; - 2m (Attental pano - Sit Ga 719
ત્રે	May 186 - 2m Catanta 11 2000 - 800 Sta regiment
ğ	0. How one did you remain it such country and regiment?
0	on accounted sing de vane - afth 5 months entitle his lighting tolland of the Boarden
R	on allowed any divare - afth 5 months entirely in stepling Chille 9th to Daller.
b	6. For how long a period did you discharge regular military duty".
ď	7. When, where and under what circumstances where you discharged from service?
1	In Upril 1865 - In Berner Co. to Sweharzed reconse The
4	8. What is your present occupation? Pladle?
0	9. How much can you earn (gross) per annum by your own exercises or labor \$1000.
Ω	9. How much can you earn (gross) per annum by your own exertions or labor \$2000.  10. What has been your occupation since 1865? Pedaling
4	What has been your occupation since 1865? Planting
'n	Upon which of the following grounds do you base your application for pension, viz a first cage and
'n	poverty, "second "infirmity and poverty" or third "blindness and poverty" (Get freethy) informate thousand 12. If upon the first ground, state how long you have been in such condition that you could not early
4	your support? If upon the second, give a full and complete history of the infirmity and its extent? If
4	men the third state whether you are totally blind and only in the state of the stat
•	has been made to make as without for 64000 - all it is it.
	The same of the sa
ď	dyeast Left lunggong - Thingl affletions landing Contact refedence
d	dyears left lungong - Things affletion landing Contant reflaing
dona	designs - left lung out - This affletion landing Contact & religion of the left the bolly work to dook - also filed from which he left 13. What property, effects or income do you possess and its gross value."
domear	hor were waste to make except for Gyari - Chiffel and have deep day and affection family and the form of the first and the first and filling familiary to form which he had the first of form which he had the property effects or income do you possess and its gross value."  13. What property, effects or income do you possess and its gross value."
מסחממח	14. What property, effects or income did you appeared in 1894 1895 and 1896 and what demonstrates
doman a	14. What property, effects or income did you appeared in 1894 1895 and 1896 and what demonstrates
donear &	14. What property, effects or income did youpossess in 1894, 1895 and 1896 and what disposition, it any, did you make of same? Love IS 94 applied bod life interest I 26 2/ allero of Sund you Fullow list her first it in a Suit at San - No Children
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	14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, it any, did you make of same? Live 1894 applies of lead life, where I 16 74. Allow of fund in his life for the first thin a suit out fan - N. o Caldred got the searce.  16. In what County did you reside during those years and what property did you there return for taxation? Allow the first lead in 1896 - 1896 The many third algorithm of the searce of the were you supported during the wears 1895 and 1896. By the own lamings within the first of the outside was 1895 and 1896. By the own lamings within the first of the outside your own labor or income? If the wears 1895 and 1896. What parties did you contribute thereto by your own labor or income? If the wear 1896. What parties did you receive in each year.  18. What was your employment daring 1898 and 1896. What parties did you receive in each year.  19. Have you a family? If so, who composes such family? Give their means of support? Here there is the parties of support? Here the parties of support is the parties of support.
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	14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, it any, did you make of same? Live 1894 Applies of bad life, where 12 12 12 (Allew of famely a hadron less the first the adverted famely). Children for the search of the search.  16. In what Courty did you reside during those years and what property did you there return for taxation?  17. In what Courty did you reside during those years and what property did you there return for taxation?  18. How were you supported during the years 1895 and 1896? By the owner lamings within the first of the wars 1895 and 1896? By the owner lamings within the first of the wars 1895 and 1896? By the owner lamings within the first of the wars 1895 and 1896? By the owner lamings within the first of the war support on those years, and what portion did you contribute thereto by your own labor or income? It to write.  18. What was your employment during 1898 and 1896? What pas did you receive in each year?  19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Also Cappalilant the wife about 11 and
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POWER OF ATTORNEY.	
TATE OF GEORGIA,	
County.	
J	hereby authorize
of	
receive and receipt for the pension allowed, and request that he	e remit same to
at	TOTAL CONTROL OF THE SECOND CONTROL OF THE S
Witness my hand and seal this day of	1899.
Executed in presence of	
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the first	

### POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

hereby authorize of. to receive and receipt for the pension allowed and request that he remit same to by 1901 Wieness my hand and seal, this

Executed in presence of

SOLDIER'S PENSION

INDIGENT

CFGr Those Aiready Enrolled.

ior Applicants Aeretofor, Allowed Penal no

### For Applicants Heretofore Allowed Pensions.

•
STATE OF GEORGIA.
FULTON County.
$\mathcal{T}$
Personally appears Louis Ctandar 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 184.7; that he is 59 years old and
by occupation a; that he enlisted in the military service of the Confed-
erate States (or of the State of) during the war between the States,
and served for the term of 3 /2 class in Company I, of 8 th Regiment of
Littine a seaso In Lay, that his physical condition is as
follows
General Delectite
7
that his property consists of the following items
tat ponowing netus
Market Market Control of the Control
of the value of
Donais, that by reason of his physical
condition and poverty he is musble to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.
Depotent degines to participate in the large for
Deponent desires to participate in the benefits of the Act, approved December 15th,
1884, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of FULTON
annutal Transit II and a second
Sworn to and subscribed before me, this, the
8 day of 4 a 1800.
Torono a Ordinary.
State of Georgia,
- · · · · · · · · · · · · · · · · · · ·
County.
I, W H HULSEY. Ordinary of said County,
do certify that I am well acquainted with coan a. U. and al the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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
Affix John De Company
(bere)
Ordinary FULTON County.
NOTE.—The blank spaces wint herellish.  NOTE.—A fildavit should not be uttested before January 1st. 1809.

For Applicants Heretofore Allowed Pensions.

Presented Presented Antoniou Tombromb.
STATE OF GEORGIA,
Julian County
personally appears Roan a Rainal of Justice
County State of Georgia who being duly and
County, State of Georgia, who being duly sworn, says on oath that he is a bona redictiven and resident of said County and State, and has resided in said State continuously ever
since the day of 18% c, that he is / years old and
by occupation a
federate States (or of the State of
federate States (or of the State of the State of the Confederate States, and served for the term of 3/4 2/2 in Company 7, of 5 th Regiment of Collactin 11 2 2 2 and this physical condition is as
of Cittainty 11 hours In Company 7, of the Regiment
General the Constitu
that his property consists of the following items.
The state of the s
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December Lith
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1901. I have heretofore as a resident of Title lo 22
county been allowed a pension for the year 1 9 6 6
Sworp to and subscribed before me, this the 127 1 1171 Ali
\(\frac{1}{2}\) day of \(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}\)\(\frac{1}\)\(\frac{1}\)\(\frac{1}{2}\)\(\frac{1}{2}\)\(\frac{1}\)\(\frac{1}{2}\)\(\frac{1}
MON WEKLUSON Ordinary
STATE OF GEORGIA,
Jul County.
1, = ) It & PREVILLE (I to sen Ordinary of said County)
do certify that I am well acquinted with Leave a have the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents houself to be
and that he regides in this Country
Given under my official signature and seal, this
day of the R Clif Kinger Counts
( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
Ofamary Miller a Count

NOTE - The clank spaces must be filled

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:ce!						and request		remit same to
v	Vitness i	my hand	and se	al, this	de	y of	***************************************	1900
	Execut	ed in pr	esence (	of	3		MTTHE SAME AND ADDRESS OF THE SAME	[L. S.
	Alterday, and property	TO COMPANY AND ADDRESS AND A SECOND S	AMERICAN STREET					
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/-			SION,		dal	1900.	I,	
'A THE CALLED	-	ENT	PENSION,	•	Candal	SSUED 1900.	NDSBY,	DED TO
	105	DIGENT	Y'S PENSION,	900.	a. Chandal	ANT ISSUED	W. LINDSBY,	W. See free, stee
(i.e. inoc Anong Ement)	NO. (05	INDIGENT	DIER'S PENSION,	1900.	ran a. Candal	WARRANT ISSUED	JOHN. W. LINDSBY,	WARRANT HANDED TO

## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
FULTON County.
personally appears to and tandal 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 1845; that he is 60 years old and
by occupation a Juddice that he enlisted in the military service of the Confed-
erate States (or of the State of La) during the war between the States,
and served for the tegin of 3/2 Has in Company F, of & th Regiment of
attance scays Ith My; that his physical condition is as
5-11
General Debility
Canal Late 1000 Colory
that his property consists of the following items.
to the second of
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
s entitled for the year 1900. I have have tofore as a resident of. FULTON
annets have allowed a marrier for the second of
Sworn to and subscribed before me, this, the
15 day of Janey 1900.
May Ordinary.
Ordinary.
Di-1. (0
State of Georgia, FULTON
County.)
I. W. H. HULSEY. Ordinary of said County,
to certify that I am well acquainted with Roan a Randal the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
$O_{\alpha}$
day of 1900.
more more more more more more more more
Ordinary FULTON County.
Nors.—The blank spaces quat be filled.

### POWER OF ATTORNEY.

County.		
1.	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,
		[t. s.]

Executed in presence of

INDIGENT

(FOR THOSE ALREADY ENROLLED.

No. . - 8

Merris 2 & D.

# SOLDIER'S PENSION 1902.

JOHN W. J.INDSEW.

COMMANDER of Partons
WARRANT HANDER TO CO Regiment She City Office of Comment States Name All forced all £ 67/5 County

POWER OF ATTORNEY.

STATE OF GEORGIA	l	1	
	COUNTY.		
I,			, hereby authorize
	. qf		
to receive and receipt for the	pension allowed, and	request that	he remit same to
	at		
hy			
WITNESS my hand add see	ol. this	day of	1907
			[1 8.
Executed in presence	of		

# SOLDIER'S PENSION 1907. INDIGENT

Copusheror 1274. (FOR THOSE ALREADY ENGILLED)

4

WARRANT ISSUED Ragiment Name . County

Commissioner of Perstons WAKRANT BANDED TO

9

JOHN W. INDSEY,

DES. W HARMON STAFF PRIBTIR, AV. ANT.

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
The state of the s
20 January 1990
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 1843; 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
federate States for of the State of
of that his physical condition is as
follows.
Grad debiciti
that his property consists of the following items
No.
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
ouncy been allowed a pension for the year I 701
Sworn to and subscribed before me, this the
. pay 90 \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
Pullymoundinary.
OTATE OF GRODEL
STATE OF GEORGIA, County. County.
County.) County.)
John St. Harrison Grand A Chilled al
and the decident and the contract with the contract of the con
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 AA 1902 Of Bil Kinson
Affix
Ordinary County.
Nors.—The blank spaces must be filled.

T. AT	WI I THOWN TO	<b>TRVDIALAUD</b>	<b>ALLUMED</b>	<b>LEUSIONS</b>	
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State of Georgia,
Fullon County.
Personally appears A. C. Marieda Egg
County, State of Ceorgia, who, being duly aworn, says ou 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 0; that he is 7 years old
and by occupation of the confined in the military service of the Confidence C
federate States (or of the State of Margia ) during the war between the
States, and served for the term of 3/2 4/18 in Company J, of th Regiment
follows: Alterniete + procests
William State Control of the Control
About the second
that his property consists of the following items:
The second secon
The state of the second control of
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
Sworn to and subscribed before me, this the
day ofJAN1907.
Line W Michigan Ordinary
Ordinary
State of Georgia,
_ }
FiltonCounty.
IOrdinary of said County,
do certify that I am well acquainted with A. C. Sandal
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 of1907.
John R. Williamson
Adia " Ordinary 4 Long County
here County

Norr.—The blank spaces thust be filled.

Norr.—Affidavit should not be attested before January 1st, 190

IER'S PEN

E cruted in the presence of

STATE OF GEORGIA

hereby authorize

STATE OF GEORGIA.

____COUNTY }

WITNESS my hand and seal(this 1111/11)

will see Gorgin. Executed in the presence of

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

hereby authorize

POWER OF ATTORNEY.

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

COUNTY.

W. TNESS my hand and seal, this day of

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

tates of Georgia,

County.

Committee the edge of the transfer of the same transfer or entry the form Personally appears

TOU WILLIAMIN BOLL	TOTODE ALLUMEN LEUGIONS.
STATE OF GEORGIA,	1
Fulion County	<b>\</b>
P Broot County	· )
Pearsonally appears It. A.	Randal ortulion
County, State of Georgia, who, being du	y sworn, says on oath that he is a hono fide citizen
	and nes resided in said State continuously ever
since the day of	18 HD; that he is 64 years old and
by occupation a	hat be collisted in the military service of the Con-
federate States or of the State of	corgia ) during the war between the
States, and served for the term of 3/12	422 in Company 7 of 8 th Regiment
of Ga, Sur.	that his physical condition is as
tolon Ingenity	und poverti
#	7
that its property consists of the following	ig items
of the value of	Dollars. I am now earning,
by my lahor,	Dollars per month. That by reason of his
physical condition and poverty he is una	ble to support himself by his own exertion or
labor, and that he receives no pension but	t the one herein applied for.
	the benefits of the Act approved December 45th,
1894, and the Acts amendatory thereof, a	and makes application for the pension to which he
is entitled for the year 1905. I have her	etofore as a resident of
County been allowed a pension for the y	ear 1904.
Sworn to and subscribed before in	e. the the Pot Kinstar
day of	1905.
	Ordinary
STATE OF GEORGIA.	<i>(</i>
County.	\
I.	Ordinary of said County,
do certify that I am well acquainted with	N. C. Randal
	and am well satisfied that the statements made
	I know he is the individual he represents himself
to be, and that he resides in this County	IAN 21 101.5
Given under my Afficial s day of	
day of	1905.
Amx	
your	OrdinaryCounty.

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

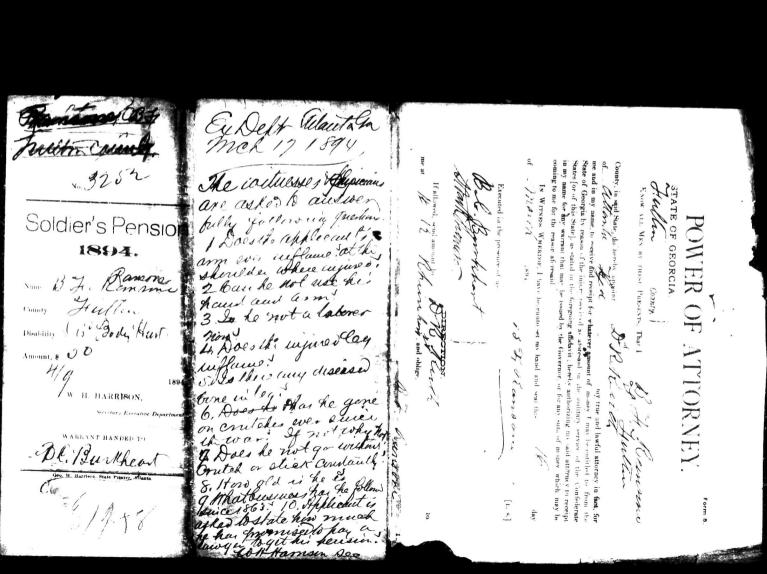
### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Fullen County.
Personally appears A. Callandali
County, State of Georgia, who, being July sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since theday of18\(\frac{1}{2}\ell_{}\); that he is \(\frac{1}{2}\ell_{\text{veats old and}}\)
by occupation a, that he enlisted in the military service of the Con-
federate States (or of the State of Slar Tra) during the war between the
States, and served for the term of 12 fr. in Company 7, of & th Regiment
of that his physical condition is as
follows: Infirmity and poverty.
NAME I
that his property consists of the following items.
e e é tre e
W 1 1 MM 10 0 0 1 1 1 0 W MA 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
of the value of Doilars. I am now earning
by my labor, Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1906. I have heretofore, as a resident of
County been allowed a pension for the year 1905.
Sworn to and subscribed before me, this the
day of 1906. Surson Ordinary.
State of Georgia,
County.
I Parkery
y didnay of said County.
do certify that I am well acquainted with Ilaudal
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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
In A Westerner
your }
here County.

Norm.—Affidavit should not be attested before January lat, 1906.

india Come in prombefore all of whom are Known to me as reportable Citizens of Daid Ceruty Who bring Duralle Dum, Day on outh that they have Knum R. a. Randall of Daid Comby fricty to be diseased and the Suffirm from his offliction manis from informand fuble, and anable to Edm his own linny Ma han Deen from try to buston manual labor, and on account of his offlictions by marche Ho do the work and was found Whom that said Roudell has kind from any Jonnes, and is definitual on hot tamil and what he can Earn Afun Giddling for Dripping Hoursell to Duffont finised from his own Exertimes Winter to from Which 5 7898

es popula NOTE STEER *



# POWER OF ATTORNEY STATE OF GEORGIA dullin County, in said State, do hereby appears me and in my name, to receive and receipt for whatever amount of money I may be enutled to from the State of George by reason. Use money is even a storesard in the antitary service of the Confederate States for of this State, is stated in the foregoing affeliavit, hereby authorizing my said attorney to a reip. in me name for any warrant that may be issued by the invertible of Grain sum of money which may be coming to me for the reason dieresaid IN WITNESS Wastern I have be contract my hard and sai this 2 2 1 1 [SVI 18 1, 18 anson. Bolo Borrishant Hallowing wind am and by Decrease and adding oldier's Pens

### AFFIDAVIT FOR WITNESSES.

STATE OF GEORGIA.

Personality appears before me, the undersigned Orderers in and tor said County of St. Robbing W. S. Charteller and tor said County of St. Robbing W. S. Charteller and torselve the said county of the said

whose application is ner with presented for a pension,

and that they served with him in the army, and from an personal knowledge to was injured by the service au follow . See Nove While in a inach 3- fine 1777 to a from? I'm of a corner of the bully brown a bridge the hide bill be send from team of ad Land down Typling it mr Ranne & swierd other some insumed offer Runson was so hally houst in Whoalder arm & thin & I'm the locales or him lift time that he was thechould some survive the normal area stery white of me have strough him and fine I have that is a serious the influences as statut that he is partially parallin in shoulder or and by we throw him to be make to per from 114 annual Cont that his infinies, 2 mole - hide and shoulast life ender to be the declining were

We personally know above scated facts. We were with him in the many and may known him ever since. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 18 \( \begin{align*} 3 \). We have no interest in the receivery of a pension by him.

Sworn to and subscribed before on this 1913 day of March 1891.

J. S. Nobbins J. W. Rabbins

Note - The Ordinary will see that the full text of the Adidavitis understood by the software and that tony are legally qualified to the same.

2. Witnesses.

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

* Norm—drive full statement, and tell in your own language how bartly applicant is doubled from work. If we look any labor, or can do any, state what

### Physician's Affidavit.

Hallin county.

PERSONALIA comes before me 770 & loathing a Ordinary of said County, from L. Newton and J. ale. Mc Daniel, both known to

me as reputable physicians of said County, who being severally sworn, say on oath that they have carefully

examined B. Fl. Rounson and after such personal examination

say that the applicant has been injured as follows:

ine and deflow dispersation that The applicant I It Handone two meetine of Clauteal, and Partial Ruterion distocation of left Shoulder fount. Comerny Concederatels interclosis on Atypores of the foints to smuch solfflier . I look were it in forwards and repended in ortweeds and - Award Mustern I tainly of found and londidera lale, atras hind Applicant also not Considerable authoris of left Knee fourt Coul for Ludicel to Legarmentum pabellas - Londering lifter and mable to tell on extend legicalor has bornflett and required herman seit sid - Upplicant . Communently and practically sinable for the penformance on the ordenary munual advocations of life We have treated applicant professionally for Heren Treatades applicant

Swern to and subscribed before me this )

day of I bank 1894.1 m. Z. Couch mi

Note.-The physicians will state fully the extent of the wound, and then give facts to show the extent of the disainly resulting therefrom, and state fully the extent of the disability.

NOTE 2.—If claim is for disability resulting from disease, state A

STATE OF GEORGIA

Hardler county

mx. Colhoun

.O'rdinary of said County do certify that I am well acquainted with B. F. Kamonhanson

C 3 Paganilles

applicant in the foregoing affidavit, and am well spisfied 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 vitnesses are persons of respectability and that their statements are worthy of full credit and belief.

Given under my official signature and seal this 17 day of Mean 1894.

mx. & alhum

Free County!

For Use of Addicants Who Have Not Heretofore Drawn.

STATE OF GEORGIA. Hellan County.

B. A. Ranson of Faither

day of Alltonh Georgia, and has been continuously since the

18 2 2, that he collisted in the military service of the Confederate States (or of the State of

for Monipolar confidence the war between the States, and served as a figurate in Company H, of 88 th Regiment of Groupen Volunteers

Brigader that whilst engaged in such military service, at the battle of Bulla Bulland Bullang in the State of Lynnight, on the rof 1863, he was disabled as follows: peliting was front chows while Crogsin, a fridge below downship The budy full in + will spell in Horses + all I was hunt left Knin bing discours hupt shoulder him also crusher of also mes hightened of whime injures from the lies I was rendered muchle to pe manual luly + cyme a partiel paralini I am & havely rind ing the substantially siselves in

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 26th, 1894.

Sworn to and subscribed before me this the

day of march 1894. In Loachim

B. J. Kanne

- muneral baban

Norm.—State fully nature of wound or character of disease, which causes the disability, and applets particularly the aztent of the disability. If claim is based on disease, give full and amberied history of disease, tracing it directly to the service.

### For Applicants Heretofore Allowed Pensions.

Betechalty appears

STATE OF GEORGIA, 1)

county, State of	Georgia, do hereb	y appoint				
·£				my true i	and lawful a	ttorney in fact, for
State of Georgia b States (or of this S n my name for an se coming to me for	y reason of an injutate) as stated in	ury received the foregoing may be issue said.	as aforesaid affidavit; h d by the Go	in the milita ereby authorize overnor, or for	ary service of ing my said any sum of	ntitled to from the of the Confederate Attorney to receipt money which his
lay of						f. 1
Executes	l in presence of us		î			[L. s.]
			./			
			)			
		1110	ECTIONS	۵		
Send money t	o me as follows, i.		DC 11011			
	7 - 7 - 7 - 7		, to,			
		Count	y, Jeargia,			
					grant a	1
T 4						
(For Those Already Enrolled.) No. 125	SOLDIER'S PENSION.		County Fulton O Deabling I sole soly nutt.	Education 18 1 7 7 1 1805	RICHARD JOHNSON, Secretary Executive Department.	WAREANT HAUPD TO

LOL Madelland i formation and action of the

		fled.)		SIO
2.5	0	For Those Aiready Enrolled.	5	PENS
2	42	ose Airead	10	S'S
2	7	r These	No.	IER'S
B	3%	E		
3	1	8		50

[L. 5]

Executed in presence of us

County.

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

STATE OF GEORGIA.

KNOW ALL MEN BY THESE PRESENTS, That I,...

POWER OF ATTORNEY.

STATE OF GEORGIA.

POWER OF ATTORNEY.

### For Applicants Heretofore Allowed Pensions.

County. State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
County. State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
County. State of Georgia, who being duly sworn, says on oath that he is a bona fide civizen
and resident of said State, and has resided therein continuously ever since the 2th
day of September 18 32; that he enlisted in the military service of the Con-
federate States (or of the State of ) during the war between the
federate States (or of the State of  States, and served as a Drivete in Compens on States, and served as a Drivete in Compens on States, and Served as a Drivete in Compens of States, and Served as a Drivete in Compens of States, and Served as a Drivete state of States, and States are a Drivete states and States and States and States are a Drivete states and States and States are a Drivete states and States are a Dri
s Digade; that whilst engaged in
such military service at the battle of Tortion Littiry at savethan on in the State
of -ourses , on the 15th day of June :86 3, he was
wounded as follows: Oct. bloner was front river of one cannon and while
orbalias lerite below savenual the oringe fell in horses and all was bort
one was nort ,1-ft knee indicates and loft shoulder pound also crushed and
iso ass rectured and coincidenced, from which injury I was rendered unable
to entire or inerviewed eleparent caused a profit perhlisis
of our and leg thereby remaining them casenfielly and substantially useless
in deriormance of manual labor
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 Pity dollars, for the year 189 1
Sworn to and subscribed before me, this, the B H Ranson
day of Variab :895.
Mr. Louchmin Doding,
Notz State fully the nature of wound or charact r of disease which causes the disability and contain neutral nature of wound or charact r of disease which causes the disability and contain neutral nature of wound or charact r of disease which causes the disability and contain neutral nature of wound or charact r of disease which causes the disability and contain neutral nature of wound or charact r of disease which causes the disability and contain neutral nature of wound or charact r of disease which causes the disability and contain neutral n
of the disability, resulting from the wound or disease.
OTATE OF SECRET
STATE OF CEORGIA,
Tulton County.
I, Ordinary of said County,
do certify that I am well acquainted with 8.F.Ranson the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 Yarch1895.
(Affix)
Jally out of Lloalhman
Ordinary Fulton County.

## For Applicants Heretofore Allowed Pensions.

STATE OF	GEORGIA,
r init na	

Fu <b>ltón</b> az	County.	ſ		
Personally appears_	B.F.Ranson	of	Fulton	
County, State of Georgia, wh	o being duly sworn	, says on oath the	the is a bona fide ci	rizen
and resident of said State, an				ot h
day of ceptember			tary service of the	Con-
federate States (or of the State				
States, and served as a	private	in Company	ring the war betwee ons Artillery a , of Sth Regi	ment
of_ GeorgiaVolum	Lenetin teers,		de; that whilst eng	
in such military service in t	he State of	Conpris	on the 15th	dav
of June 186 petitioner was front	he was wounded river of one	injured or diseas	ed as follows:	iige palo
gaveroah the bridge	tell in horses	and all was no	rt keft knes .1.	doc:tel
and left shoulder be	aing also crushe	d and also rup	tuted and spine	infored
from which injury !	the party of the same of the s			
ani caused a priial				ther assa
ti 11v and substant	-	. ш 1 . д оп	toby Isbacitag	O II C.I.
ti ily and supstant	raily diels			
dollars, for the year 189 5.  Sworn to and subscribed  (10) day of February of West Common of the Alashility, resulting from the wound  STATE OF GEO	g October 28th, 1 hty been allowed a per before me, this, the 1896 d or character of disease and or disease.	896. I have her ension of.	-	ent of
	ounty.			
I, M.L.Calhoun		P.Remson	Ordinary of said Co	unty
do certify that I am well acqui	ainted with			the
applicant in the foregoing aff				
in his said affidavit are true,		he individual he	represents himself	to be
and that he resides in this Co			1, 9	
Given day of	under my official si Peby	gnature and seal, 1896.	this 16	
ACIX FOUT and bers.	my	back	ruen'	
T _i	Ordinary	Pulton	Co	ounty.

### POWER OF ATTORNEY.

STATE OF GEORGIA,

hereby authorize

to receive and receipt for the persion paid hereon and request that he recut same to

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

I accured an presence of

SOLDIER'S PENSION

INVALID

POWER OF ATTORNEY.

STATE OF GEORGIA,	}
Ι,	hereby authorize
	of
to receive and receipt for the	e pension paid hereon and request that he remit same to
	by.
at.	
IN WITNESS WHERE	BOF, I have hereunto set my hand and seal, this
day of	topo

Executed in presence of

[L. S.]

SOLDIER'S

RICHARD JOHNSON,

### For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
personally appears Lit Converse & Rallon
County. State of Georgia, who being duly sworn, says on eath that he is a home fide citizen
and resolute of and State, and has resided therein continuously ever since the
day of Share A from the consisted in the military service of the Con-
The state of the s
States, and served as a fire one to in Contrain of the Regiment
in such aniltany service in the State of Property of the first day
of Militie 1463, he was wounded, injured or discused as follows
with lace and weath while
Charles my broke which feel in
die Shaulday Cowhich & wether by
Heretery net &
Depotent desires to participate in the benefits of the Act approved October 24th, 1887,
and the standard thereof and makes application for the pension to which he is
entitled for the year goding October 26th, 1817. I have heret fore under said line as a
resident at Acce County been allowed an insa'd pension of
Sworm to an a subscribed before me, fins, the
day of - c 5 1897   POST OFFICE
7
Note State to Auto-course of a color of section (
tie disability recorder the would or disease
STATE OF GEORGIA,
Ractions County.
do certify that I am well acquainted with 27. Collin Versit the
applicant is the foresting of the state of t
applicant in the foregoing affidavit, and am well satisfied that the statements made by nim in his said affidavit are true, and I know he is the indi-idual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of 1897.
pan, 1
Affix Jour Mail
Ordinary County
Ordinary County.

### For Applicants Heretofore Allowed Pensions.

1 of hippinodisco florecorore announced tomprosto.
STATE OF GEORGIA,
Fullar County
Dersonally appears J. F. Carrion of Fellin
County, State of Georgia, who being duly sworn, says on oath that he is a coma fine citizen
and resident of said State, and has resided therein continuously ever since the
lay of Sept - 1822; 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 first of in Company of, of 28 th Regiment Hard Than from dunteers, of the Brigade; that whilst engaged
186.3, he was wounded injured or diseased as follows:
The distocated in section them.
The widge nin it in meach
should and wonder and
Chine mucha
No. of the control of
The state of the s
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887,
nd the acts amendatory thereof, and makes application for the pension to which he is
ntitled for the year ending October 26th, 1898. I have heretofore under said law as a
esident of , Gulfon county been allowed an invalid pension of
Dollars, for the year 1897.
Sworn to and subscribed before me, this, the
day of 1898, Post-office
2 2 2 1 State of the state of t
Co 11 1 tourney
Nork-State fully the nature of wound or character of disease which causes the disability, said explain particularly the extent (the disability, resulting from the wound or disease.
STATE OF GEORGIA,
Julian County.
1, JA Jaulsly Ordinary of said County.
o certify that I am well acquainted with 10 6 , candon the
pplicant in the foregoing affidavit, and am well satisfied that the statements made by him
n his said affidavit are true, and I know he is the individual he represents himself to be
nd that he resides in this County.
Given under my official signature and seel, this
day of
(ABL)
(your )

### POWER OF ATTORNEY.

STATE OF GEORGIA, County. hereby suthorize___ to receive and receipt for the pension paid hereon and request that he remit same to II WITNESS WHEREOF I have hereunto set my hand and seal, this_ day of 1899. I. S.]

Executed in presence of

# SOLDIER'S PENSION INVALID

1899

ARRANT HANDED

POWER OF ATTORNEY.

	County. S
I,	hereby authorize
	of
to receive and receipt	for the pension paid hereon and request that he remit same to
	i
	by
at	·
at	HERROF, I have hereunto set my hand and seal, this
in witness w	HERROF, I have hereunto set my hand and seal, this

SOLDIER'S PENSIO INVALID

JOHN W. LINDSEY,

### For Applicants Heretofore Allowed Densions

t or whitegues tierecolore with the Lensions.
STATE OF GEORGIA.
Fulion County
personally appears of Cansonic of Lucion
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 the State o
States, and served as a Private in Company F of 38 th Regiment
Volunteers, the Frigade; that whilst engaged
in such military service in the State of Teorgia on the day
of 1863, he was wounded, injured or diseased as follows:
intered in Spine & ruftweel
the they will be they will
from the falling in a a bridge
the second second
Depotent makes application for the pension to which he is entitled for the year end-
ing October 26th, 1899. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Doilars, for the year 1898
Swern to and subscribed before me, this, the . B. F. Rassam
day of Cameley 1499. POST OFFICE
1111112000
Note State fully the nature of wound or character of disease which causes the disability and explain particularly the count of the disability resulting from the wound or decide
STATE OF GEORGIA,
Sulon County
: of Mulsey and Ordinary of said County.
do certify that I am well acquainted with 1997. Uccans one the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
Given under my official signature and seal, this

## For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Julion County.
personally appears A. F. Canson, 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 County, and has resided therein continuously ever since the
day of Sept 1822; that he enlisted in the military service of
the Confederate States (or of the State of) during the war be-
tween the States, and served as a Private in Company , of 98 th
Regiment of Maria Adams Voinnerers Charles is Brigade, that while
engaged in such military service in the State of Configuration, on the
day of186 Z, he was wounded, injured or diseased as follows:
Hounded in Kee
(NC)
the formations with a first transfer and the second
State of the state
The state of the s
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1900. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Dollars, for the year 1899.
Sworn to and subscribed before me, this, the
day of February 1900. POST OFFICE
22-26 V F
To Raielsay
Note.—State fully the nature of wound or character disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
± ./-
- Voulty.)
I, Mystulacy Ordinary of said County,
do certify that I am well acquainted with B. Cansont the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 Fabruary 1900.
my lenge
Ordinary Fulton Conner
County.

STATE OF GEORGIA, County Ι. hereby authorize to receive and receipt for the pension paid hereon and request that he remit same to at 1.7 WITNESS WHEREOF, I have hereunto set my hand and sea! this 1901. day oi. [L S.]

POWER OF ATTORNEY.

Executed in presence of

SOLDIER'S PENSION

DISABLED

**DIER'S PENSION** DISABLED

B. A. Gausson 1902

JOHN W. LINDSEY

L. S.

POWER OF ATTORNEY.

-			
STATE	OF	GEORGIA	

					C	County.	ſ						
	I,							her	eby a	uthorize			
								of _					
to	receiv	e and	receip	for	the	pension	paid	hereon	and	request	that	he remit	same
								by.					
at													
	IN V	VITN	ESS W	НЕ	REC	OF, I ha	ve her	eunto s	et my	hand ar	id sea	l this	

day of

Executed in presence of

( FOR THOSE ALREADY ENROLLED.

### For Applicants Heretofore Allowed Pensions.

CM A MT OF GEODESIA	
STATE OF GEORGIA,	
(uffin County.)	
Personally appears DA Raissonie Fullo	n
County, State of Georgia, who being duly sworn, says on oath that he is a home fide	citizen
and acsident of said State, and has resided therein continuously ever since the	
div of 187 187 that he collisted in the military service of the federate States (or of the State of 161) during the war between	e Con-
States, and served as a Private in Company 9, of 38 th Res	gimer t
of Mountage Wolunteers, (176 's Brigade; that whilst or	gaged
States, and served as a Herman Company of 38 th Reg of Me exposition in the State of State of the State of th	day
of 186 2, he was wounded, injured or diseased as follows	
Commerce in Kaice	
*	
Deponent makes application for the pension to which he is entitled for year	end
ing October 26t), 1901. I have heretofore under sain law as a resider	
County been allowed an invalid pens  Dollars, for the year 19(X).	ion of
Sword to and subscribed before me, this the	
day of 1901. Postoffice Warde &	71
will Oxtxiinon	
Now. State fully the nature of the wound or character if disease which causes the costability and explain new theoretical distribution for the wound in disease.	partic-
CTATE OF CROPAL	
STATE OF GEORGIA, County.	
Devillacion Ordinary of said Co	
do certify that Van well acquinted with A Marisonel	unty.
applicant in the foregoing affidavit, and am well satisfied that the statements made by	_ the
in his said affidavit are true, and I know he is the individual he represents nimself it	o be
and that he resides in this County.	
Given under my official signature and scal, this	
day of John R Wilk wison Ordinary & Wilk wison	
19 Wilkinson	C.
Ordinary Tully Co	unty.

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Will sales a series of the control o
STATE OF GEORGIA.
Fulton County.
Personally appears B. F. Rausone 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 1827; that he enlisted in the military service of the Con-
federate States (or of the State of the State of during the war between the
States, and served as a free cite _ in Company & , of &8 th Regiment
federate States (or of the State of July ) during the war between the States, and served as a free all in Company , of I the Regiment of July Volunteers, Monthly is Brigade; that whist ergaged
in such military service in the State of on the day
cf 186 27, he was wounded, injured or diseased as follows
Wounded in Mill
SA STREET SW VIFERIE
7 · · · · · · · · · · · · · · · · · · ·
The second of th
Deponent makes application for the pension to which he is entitled for the year
ending Occober 26th. 1902. Linave, heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1001.
Sworn to and subscribed before me, this the 1 2 Maile 1011
IAM I'm tang
day of 13 19041902. Post-office
2110/101
North-State fully the nature of the routed of changes of disease which causes the disability, and explain particularly the extent of the state of the disability resulting the world of the exe.
STATE OF GEORGIA,
County. Of Allelan
GI OR YOU
do certify that I am well acquainted with
the applicant in the foregoing affidavit, and an well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this
CONTRACTOR OF THE STATE OF THE

Given under my official signature and seal, this

Review

AN 13 191

Ordinary

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

POV	VE	R OF	'ATT	ORN	EY.				
STATE OF GEORGIA,		1							
Coun	ity.	Ì							
I.			hereby	suthorize	е .				
SI S Designation of the second			of					(max)	
to receive and receipt for the	e pens	ion pai	d hereon	and req	uest th	iat he	remit	same to	
			by						
at									
IN WITNESS WHERE	OF, I	have ha	ereunto se	t my har	nd and	seal th	115		
day of	190								
								.[ L. S.]	
Executed in presence of	ſ							1	
			3		1903	ms.			
PENSIO		1	18	37		LINDSEY.		ANTA	
N D	8	non.	w,	n	Î	SEY	J.	W. HARPISON, STATE PRINTER, ATLANTA	
OSE ALREADY EN COSE ALREADY EN		1,	Regiment	- 3		LINDSEY	WAPRANT HANDED TO	RINTE	A
REAL S	$\bigcirc$	000	Fgin	130	31	-	HAA	A STE	13
S S		10	* *	210		JOHN W	TANT	180N. 8T	In di
	NAME OF THE OWNER, OWNE	13		6		NH(	VAPS	TARRIS	3
(FOR THOSE ALREADY ENROLLED.) No. 7 9 DISABLED  OLDIER'S PENSIO		1	1	Disability (LT out 1 to		7		3	
		Name	County Co.	Disability Amount,	1 1			O.S.	
		Z e	0 0	Q <	- 7		11	11	

		POWE	ER OF ATTOR	RNEY.
	STATE OF	FORGIA,	1	
			COUNTY.	
		I,		hereby authorize
		CONTRACTOR	of .	
	to receive and	receipt for the p	ension paid hereon, and	I request that he remit same to
		1000	_ by.	
	at			
	In Withi	ess Wherrof, 11	nave hereunto set my has	nd and sea', this
	day of		1904	
		* 8		[L. S.]
	Execured	in the presence of		
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				The state of the s
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4	_ <u></u>	5	1 01,0	190 sions.
श	ENROLLED	20	3 704	Pensions
3	. <b>E</b>		7 8 3	JOHN W. LINDSEY, Communicationer of P WARRANT HANDED TO
싫	E ALREADY E	DISABLE	Regiment Regiment	JOHN W. LINDSEY Commissioner Commissioner Commissioner Commissioner Commissioner Commissioner American American American Commissioner C
ال	ALREADY	A S	Ree .	State HH
3	SE AL	$\mathbf{z}$		N N N N N N N N N N N N N N N N N N N
2	HOS		# 60 M	JOH JOH
7	E *		TO A CT	Hg, 18
7	FOR	2	Parmi Parmi	Amount,
Show	ada contrata bearen	CONTRACTOR STATE		1 <b>4</b>

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

THE THE TAXABLE PARTY OF THE PA
STATE OF GEORGIA,
County
Personally appears, A. F. Museum 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 Sift 1822 that he enlisted in the military service of the Con-
federate States for of the State of Juning the war between the States, and served as a friction of Juning the war between the in Company F, of 38 th Regiment of Juning the war between the States, and served as a friction of Juning the war between the States, and served as a friction of Juning the war between the States, and served as a friction of Juning the war between the States, and served as a friction of Juning the war between the States, and served as a friction of the States of the Conference of the Conf
Volunteers Hourstand 's Brigade; that whilst engaged
on theday
of the vas wounded, injured or diseased as follows:
Mountal in King
and the Kill
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1903. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1902.
Sworn to and subscribed before me, this the day of 1903.
La de de la
yette. State fully the nature of the would for character of disease which causes the disability, and explain pure theoretic the extent of the disability resulting from the we and or disease.
STATE OF GEORGIA,
County
Q
Ordinary of said County,
to certify that I am well acquainted with B & Ranson
the applicant in the foregoing aridavit, and am well satisfied that the statements made by
has in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this
day of 1903
James J. El Cerplectors
here County.

NOTE .- Fill all blanks and of Company and Regiment

NOTE. All vonchers and affidavits must bear date after January 1, 1993

STATE OF GEORGIA,

Fulton. County.

Personally appears B Page 2016

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 5 C, 2 = 1822; 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 first of in Company of the Regiment of Volunteers Therefore Brigade that whilst engaged in such military service in the State of out the day 18". ... , he was wounded, injured or diseased as follows would an bece Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1904. I have heretofore, under said law, as a resident of Fulton. County, been allowed an invalid pension of Sworn to and subscribed before me, this the STATE OF GEORGIA. Hititol Quaty. do certify that I am well acquainted with I The County. the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal, this ... n A Wie Kinson Amx your Seal here

Norm - Fill all blanks and of Company and Regiment.

Norm.--All vouchers and affidevits must bear date after January, 1, 184.

### POWER OF ATTORNEY.

STAT	EOF	GEORGIA		OUNTY.							
		I,						b	ereby	authorize	
					. of_						
to rece	eive and	receipt for	the pe	ension pa	id hereon	, and i	equest	t that h	e rem	it same to	
	-				_by						
at.											
18	WITNE	Br WHELEO	, I hav	e hereun	to set my	hand	and s	al, thi	4.		
day of				1905.							
	Execut	ted in the p	resence	e of						.[ L. 8.]	
(FOR THOSE ALREADY ENROLLED.)	La Calle 6. 1406	SOLDIER'S PENSION	1905.	(2)	Co. J. Reginal Star Les.	Amount, s.D.C. 20	9/1/	JOHN W LINDSEY, Oranissianer of Persons.	WARRANT HANDED TO	The formers formered and formers or Annex.  One of Naviers, Mandair, and Erra formers.	master

THE REPORT OF THE PROPERTY OF

### STATE OF GEORGIA. Fulton. COUNTY

Personally appears B. F. Raisson of Fulton. County, State of Georgia, who, being duly sworn, says on oath that he is a bona hde citizen and resident of said State, and has resided therein continuously ever since the day of his like ; that he enlisted in the military service of the Coufederate States (or of the State of Alasma ) during the war between the States, and served as a Private In Company 7, of 38 th Regiment Volunteers ...'s Brigade; that whilst engaged ir such military service in the State of Blangia, on the W day Jan he was wounded, injured or diseased as follows

Disabled body; Savannah, la.

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

day of , will 1905.

Post-office Citianta

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.

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

Given under my official signature and seal, this JAN 2 1915 day of.

Ordinary .

County

Nors. | Fill all blanks and of Company and Regiment Nors. All vouchers and affidavits must bear dats after January 1, 1905.

Hulten to In he BA Romine - Georgia Chy hadren for pension Greation Greened by W.J. Cimietine A.S. Robbin + Wo Robbins restrice in alow Caro Of plicant during l'Areclo hat lanon The Justion a He for lever Promise 2nd He can not fine from & home Eny Longer day thing to get hird the that neguin to lift her Finding the is 42 years ale 114 Barnises Com the min it up will he ye year ald this year 1894 32 No is not a haborer 4: His lef in flames that is son Smouth and selected 03 F Ranword Outre me. Marche Si the do not Know 2001894 6 Ne dow shot go on Evelite mx decretion ibil unes thick · Corcura I no he does not go without his state 8. The do not in his ago but Know he is unold man gth no busines as he is amuble to wirth fris family have supporter him worn to My ampisted + March 20 1994 OS. Robbins Ordina,

Allanta, Ja. I De de ma moin transfel saves chouldes were in come out it is over obseriou that it order some some ob a lever of orather to in in the country on and, The forearm I ate was now stay when examined is energy in a man whom the dam me which we consider to be made, messoon is soon and in a still in a tit limit 8. Ha clarine to be in his centry account war my many manyon much will and all i was not to in a me o hands and in akking to be about that aid 9. We do not survey but swednity he have · · · · · · · · · · · · · · · · · · now in his now hat the and the way to the use it was the chow that mak been a soloner from condition of remain and muche as before stated ..... som not we that it in , and les of mondorange The such the interest to me J. L. ne & daniel to in sometile in a round in our organism inflower in it is now to a we the sund in the wind in incommend but him is one a ilon arm for seen going 6. It do nich inow but in his foresund com man wine thou more are extended the down

April 3th 1894

April 3th 1894

Alo MB, H. Harson Societings

pleas Send my Pension to

me. by B. C. Burkheart

very Right

B. J. Ransone

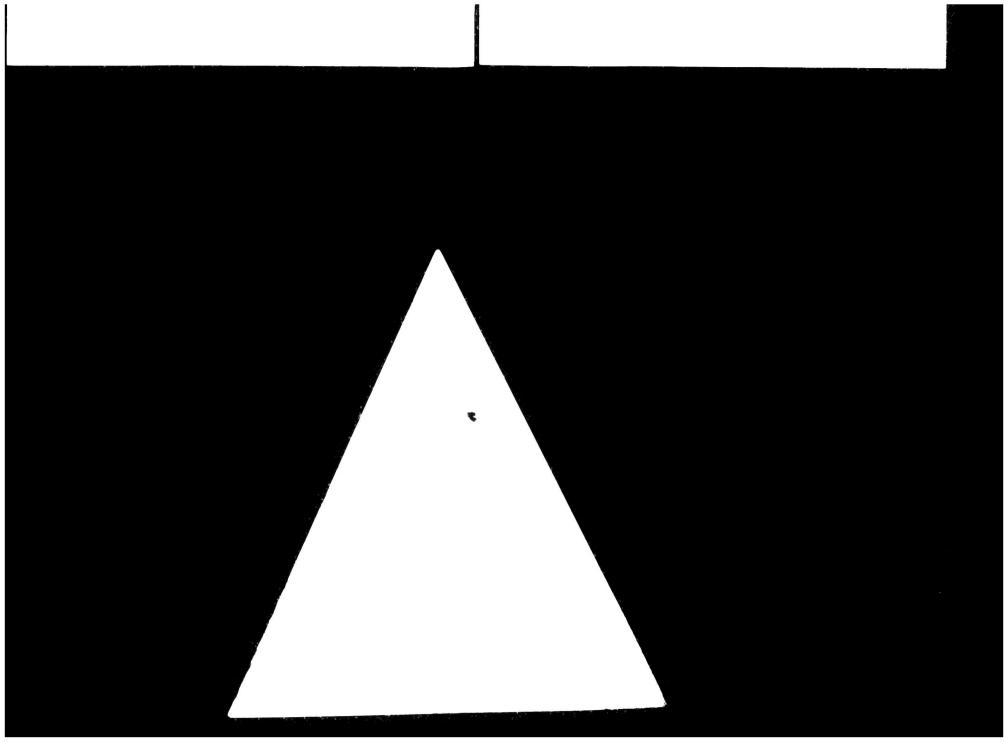
W. J. 3 & W. J. Ly

1 De de una "come tran électiones chouldes then in come out it is one observer that it vould regume som able so leveron or or when to i. in the remarks a ser, the some a despetite i sur on them in down much is shown in al a maria out the limite motion of a horner much will mak ada I will the me and many I've do mon now in his how hat the inche we inches it and inour that - in count we put in me and lig Tue in he are and in the touth to way the morning of in formachly in a mile in our afficion inflores in the same in a in the man - in the intergral but the is no stometing in seen going It do nich inour buch in this go would conmin he so - or with out another it he does

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Gensia Supplemental dia Tulin to Inthe B. H. Romanno application for periodice Gustina Gravered by W.J. Constine A.S. Robbins & Sackobbins witnesse. in about caro 1. not lo not tonow 2nd He cannot dere com & some in the the megnin to lift her Can he vain is up 3º He is not a baborer 4th His les in flames that in some all the thin & to when I would 5. We do not know 61 He does shot go on Eville Tout unes - Phills I no he does not go without his then I' The do not whow his yo hat know gh no busines as he is amable to Hunte, His family have Lathertine him is worn to 12 I ampisted + S.S. Robbins March 20 1994 m L. bachmo J.M. Koboms Ordinary



# POWER OF ATTORNEY.

The state of the s				
No 500 1900		\$	3   B 700	STATE
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JOHN W. LINDSRY, Commissions of Pauline			TO by	Mu
WARRANT HANDED TO			San in	
Ordinary will entite Name of Applicant, Compared Regiment on book as indicated above.			1503 2003	bereby B
10/10/20	Ĭ.		A 200	ulborize

QUESTIONS FOR APPLICANT. STATE OF GEORGIA. Lartin & Hould of Allante Ger COUNTY. George R Ranson of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby aubmits his procfs, and after being duly sworn true answers to make to the following questions, deposee and answers as follows: What is your name and where do you reside? (give State, County and post-office) to receive and receipt for the pension sliowed and request that he ranit same to Aut. witness my hand and sent, thes day of CT 1908.

GR REVIEW 7.64 How long and since when have you been a resident of this State?

Surce 1884-19 Search

When and where were you born? Thank 436/844 - South Countries. When and where and in what company and regiment did you callet or serve?

May 1864- fran South Carelin - frank as a Mecrell. Executed in the presence of ER Dillinghour NP Southern Lea Lyn Company B. YE North Carolinas Regul How long did you remain in such company and regiment? Little There 1865- Whout this life your the thing taken a friend the thing the country wear Goldsborro 100 while stilling 6. When and where was your company and regiment sucremiered and discharged? Ten to Paraled after Gul Johnson & Sundand Were you present with your company and regiment when it was surrendered * 12 - In lunca to if not present, state specifically and clearly where you were, when you left vour command, for what cause and by whose authority? Mas Cafitured a free ilay before The Surveylor kind was be fuscil at durante How much cea you earn (gross) per annum by your own exertions or labor? May 63012 \$25
What has been your occupation sines 1865? See 12011 - May Roble Mero Upon the first ground, state bow 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? It upon the third, state yhether you are totally blind and when and where you lost your sight. But a 3 from Since all to part or Support 1 here ( all the support of him and belief at any distance - Contracoquire a grand or more unless bent 13. What property, real and personal, or income, do you possess, and its gross value? 14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made f same? 122 15. In what County did you reside during those years, and what property did you 'en return for taxation' Haberstian , and Juitar Counting 10 How were you supported during the years 1899, 1900, 1901 and 1902? By sury sailly failly

17. How much did your support, cost for each of those years, and what portion did you soutribute thereto by
your own labor or income? Alacts 7 ASV - Carthelitte furlate B25

18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? Have you a family? If so, who composes such family? Give their means of support? Have they a stead, or other property? Their ages and how employed? Mix 6 \$ 3 Minta & Chililital Getted, or other property! and agent 17-15-512 a sail to Care Startly Sinfa!

Getter of the first factory sickly to care Startly Sinfa!

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

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

Part 21. Have you ever made an application for pension before? 22. How many applications have you ever made and under what class? 2- In walist class Kanson worn to and subscribed before me this the -Ordinary,

AFFIDAVIT OF PHYSICIANS.					
STATE OF GEORGIA,					
Fullote County.					
Personally cano betere me A. I Cassler					
both known to me as reputable physicians					
I said County, who, being severally secon, say on oath that they have examined carefully					
LI . La . Le applicant for pension under Section 1254, Code, and after					
such personal examination say that his procise physical condition is at follows:					
in it he suffered with chance.					
shirt matis we we as though					
Mille have disentable to fine.					
in a comble ich int the land					
and that we have no interest in sail person being allowed tractic to the factor and					
Sworm to and subscribed before me, that the 1 C Y land I will My is					
C 2 day of 1903 1					
John M. Orlhuson Ordinary					
ORDINARY'S CERTIFICATE					
STATE OF GEORGIA.					
COUNTY Colons of County, in and for saic County, hereby certify					
1. 1. 12 dr 2. C. 2. Ordinary, in and for said County, hereby certify					
resulter the application of the country and the					
well a some fishe reministrate this State along the sound that the windows of Johns House Sund					
and firmtwom by character, and that the statements are entitled to full faith and credit					
• I turther certify that before answering the foregoing questions the applicant and each witness took the oath					
horson prescribed, and that the full text of the affidavita was read to the applicant and witness before same was eigned.					
I first ter cortify that the tax digest of					
property, and in 1900 Dollars of property, in 1901					
property, and in 1900  Dellars of property, in 1901  Dellars of property, in 1902					
Dollars of property					
In my spirion the foregoing claim is made in good fagth.					
Witness my hand and scal of office, this 4 day of 20 1903.					
- in Thomas a Ordinary.					
County.					

MOTE 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 taked 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.
Al- +
2 6 1 -1
Jalu Languerul of said State and County, having been presented
as a winess in support of the application of Starge A Mail Land tor pension
under section 1254, Code, and after being duly swore true answers to make to the following questions, deposes and suswers as follows:
1. What is your name and where do you reside?
Flat Cocio- Mail Comilly Di
2. Are you acquainted with General Man Court the applicant, if so how
long have you known him? Alex Co. 12 C.4-
3. Where does he reside, and how long and since when has he been a resident of this State?
4. When, where and in what company and regiment did he collect and how do you know?
4. When, where and in what company and regiment did he college, and how do you know?
5. Were you a member of the same company and regiment? 200-6:11/2 /14 (any)
6. How long did be perform regular military ducy? Less the is periodicy trefair Surveyly
7 When and where was his command surrendered? Level 12 Carry 17 C.
Acc 626 21865
d. Were you present when it surrendered
9. Was applicant present for 1000 111 112011
10 If he was not present, where was he? Lite Alice to
When did he leave his command ? ( Lagraf Antic 18/16) For what cause ! Lift to let
By what authority he left ? L'Africa Left How do you know all of the?
Visit 1 111 - All A Chillie to a land
11. What property, effects or income has the applicant? (Give your means of knowledge.)
11. What property, effects or income has the applicant? (Give your means of knowledge.)
12. What property, effects or income did the applicant possess in 1896, 1897, 1896, 1899, 1900, 1901 and 1902.
and what disposition, if any, did he make of same? at the
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
13:12
14. What is the applicant's occupation and physical condition? Fifthe items to the applicant's occupation and physical condition?
Had measely clumy the care- Settled in egest grow
10.000 all the timb- Care See but little-
15. Is the applicant unable to support aimself by labor of any wirt, if we why if 100 = 0 2000 cm 2 of Mesica (a legist - 2000), letter of 1000
Because of Mheinalizari- and blending
Can Del but very lille-
10. How was he supported during he years 1898, 1899, 1900, 1901 and 1902 1 1 10 12 12 12
10. How was he supported during the years 1898, 1898, 1900, 1901 and 1902? La flee tack!  Children freefr & Allender they are all stoking land they are will stoking land the same they was was derived from his own lebor or income?
17. What portion of his support for these four years was derived from his own leber or income?
Nat more than \$125 feet legis the full that in the a pension under
Section 1254, Code? Il 1800 Relieu to the physical continuous that entities nim to a pension under
blind - Cout Set home to want
13 Wh C. 31-9 Wint bench - 9 (W.11)
Wife + The sugar Churchen - Children - 27
With walk Joseph - Silkly - hardly dill to Support
20. What interest have you in the recovery of a pension by this applicant? . I d ( L C
Sworn to and subscribed before me, this the
day of CI 1903.) Witness
In Thornes ordinary.

STATE OF GEORGIA,	
Fullow County.	
John Wilkinson	Ordinary, in and for said County, hereby certify
that the Applicant Sporge Raise	resides in said County, and has
been a bean fide resident of this State since the	day of Jule 1884
and that the witnesser, viz	
are of triatworthy character, and that their statements are an	titled to full faith and credit.
· further certify that before answering the foregoing q	uescions the applicant and each witness took the oath
bereen prescribed and that the fall text of the affidavics was re-	ad to the applicant and witness before same was signed
I further certify that the tax digest of Fitter	on
ecurned for taxation in his name in 1892	Dollars of
reject, and in 1900	Dollars of property, in 1901
	Lollars of property, in 1902
	Dollars of property
In my apinion the foregoing claim is	made in good faith.
Witte-we my hand and seal of office, this is the full	Weison Ordinary.
Note	County

 before any questions are answered, the Ordinary small 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 100 Shall true answers linke to each of the questions asked of you, and the ended of you and the ended of you and the ended of the man are the ended of the short true so help you God."

2. Additional affidarits may be attached if binnk spaces are insufficient.

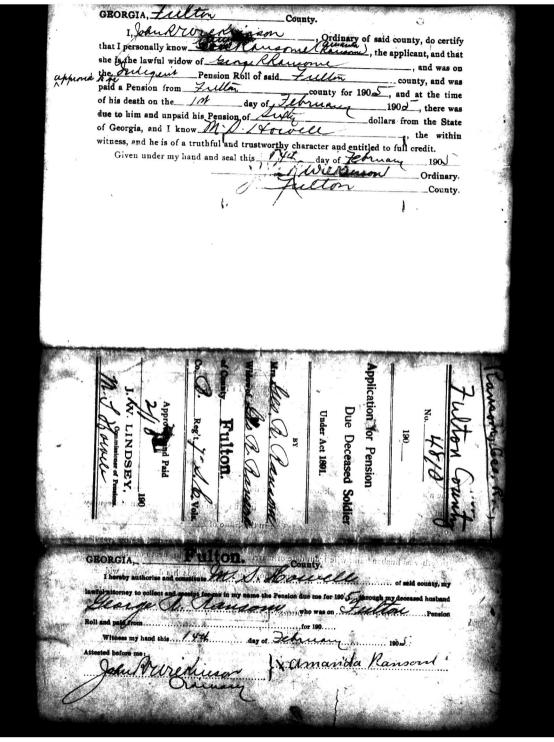
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof.

Greenville of said State and County, having been presented as a witness in support of the application of CALG. A. EALL-ALL for the pation under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and What is your name and where do you reside? Commence Court & 4 2. Are you acquainted with Lon R Hitugain , the applicant, if so, how long have you known him? Au : Clo UM y / 2 64

8. Where does he reside, and how long and since when her he been a resident of this State? Stranta Ga= When, where and in what company and regiment did he enlist, and how do you know? May 1864- Reconiffranco 6. 60 B- 7th S. C. hoper Were you present when it surrendered? Was applicant present? No Mas in LALIZAIL 10. If he was not present, where was be? In first are Hast here captioned When did be leave his command ? Cleary / 2 Miller L. S. For what cause & Cafe tricel By what authority he left? Washturell I For what cause I How do you know I was Think - amounter of Secret Co 11. What property, effects or income has the applicant? (Give your means of knowledge.) 12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902. and what disposition, if any, did he make of same? he conveyed away any of his property in the last four years, if se, what was it, and to whom? What is the applicant's occupation and physical condition ? 15 the applicant unable to support himself by labor of any sort, if so, why? 16. How was he supported during the years 1838, 1899, 1900, 1901 and 1902? 17. Wast 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 bigs to a pepsion under Section 1254, Code? It is Roders a local Land Colin Col Who composes family? What property have they? Children's age and their earring capacity? Davit Rivare 20 What interest have you in the recovery of a pension by this applicant? 1 2 1 Sworn to and subscribed before me, this the Suchet Juste relate and was waiting of welling John Lorandell

**OUESTIONS FOR WITNESS** 

STATE OF



### APPLICATION FOR PENSIONS DUE DECEASED SOLDIER.

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Fulton. County.
Personally before me come Mrs. Slo. O. Canson, of said county,
after being duly sworn, on oath says that she is the widow of Me. R. Consou
who was duly enrolled as a marginh Pensioner from the county
of Taulton and was paid a Pension of
Dollars fromcounty for 190, and that the said
Les R. Ransoy died in Baldwin county on
the day of Fluxury 1905, and at the time of his death a
Pension of \$60,00 was due him from Tulter county
and unpaid for 1900. Applicant further swears that she married the said.
R. Clauson on the 21 day of chorden be
1813, in Anderson County and State of South (and organd resided with him from date of marriage to his death as his lawful wife, and is now his
dependant widow and she asks that the Pension so due and unpaid be paid to her.
Sworn to and subscribed before me this / 4 day of Allere we work
County. \ County. \ \ County. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
( Manoa Manon [L.S.]
County.)
AFFIDAVIT OF WITNESS.
AFFIDAVIT OF WITNESS.  GEORGIA Fulton.
AFFIDAVIT OF WITNESS.  GEORGIA, Fulton. County.
GEORGIA. Fulton.  County Louis Lawrence who
Personally before me come In Says le while in life
AFFIDAVIT OF WITNESS.  GEORGIA, Fulton.  Personally before me come. M. S. Hourelle, who on oath says that he knew Llo, D. Rayson while in life and that he knows.  Mrs. Llo R Rayson
AFFIDAVIT OF WITNESS.  GEORGIA, Fulton.  Personally before me come At S. Hourelle, who on oath says that he knew Llo, D. Rayson while in life and that he knows  Mrs. Llo D. Rayson  the above applicant; that he knows that the said Llo. R. Rayson
AFFIDAVIT OF WITNESS.  GEORGIA, Fulton.  Personally before me come. At South le personally before me come. At South le personally before me come. At South le personally while in life and that he knows.  Mrs. Leo C. Canson while in life and that he knows that the said Leo. R. Ranson and Mrs. Soo R. Ranson were in due form of lay married in the county.
AFFIDAVIT OF WITNESS.  GEORGIA, Fulton.  Personally before me come In Sales and while in life and that he knows that he knows that he said Slo. Ranson the above applicant; that he knows that the said Slo. Ranson and Mars Seo A. Ranson were in due form of lay married in the country of District of Authority were in due form of lay married in the country of District of Authority were in due form of lay married in the country of District of Authority were in due form of lay married in the country of District of Authority were indeed.
AFFIDAVIT OF WITNESS.  GEORGIA, Fulton.  County.  Personally before me come. In Source County.  Who on oath says that he knew Lee. Rays on while in life and that he knows.  Mrs. Lee County.  While in life and that he knows that the said Lee. Remains and Mrs. Lee County.  The above applicant; that he knows that the said Lee. Remains of Lancons.  The above applicant; that he knows that the said Lee. Remains of Lancons.  The above applicant; that he knows that the said Lee. Remains on the Lee of Lancons.  The above applicant; that he knows that the said Lee. Remains on the Lancons.  The above applicant; that he knows that the said Lee. Remains and the said Lee of Lancons.  The above applicant; that he knows that the said Lee of Lancons.  The above applicant; that he knows that the said Lee of Lancons.  The above applicant; that he knows that the said Lee of Lancons.  The above applicant; that he knows that the said Lee of Lancons.  The above applicant; that he knows that the said Lee of Lancons.  The above applicant; that he knows that the said Lee of Lancons.  The above applicant; that he knows that the said Lee of Lancons.  The above applicant; that he knows that the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The above applicant is the said Lee of Lancons.  The ab
AFFIDAVIT OF WITNESS.  GEORGIA. Fulton.  County
AFFIDAVIT OF WITNESS.  GEORGIA. Fulton.  Personally before me come M. Mariell , who on oath says that he knew Mrs. Mrs. Mrs. Mrs. Mrs. Mrs. Mrs. Mrs.
AFFIDAVIT OF WITNESS.  GEORGIA. Fulton.  County



T.O. POWELL. SUPERINTENDENT AND RESIDENT PHYSICIAN

NO VISITING ALLOWED ON SUNDAYS

Hilledgeville Ga. 2/3/05

Mrs. G. R. Ransom,

74 Berean Ave.

Atlanta, Ga.

Dear Mrs Ransom:-

Mr Ransom died late Wednesday afternoon. His strength failed alowly for several weeks, and in death was not unexpected. He

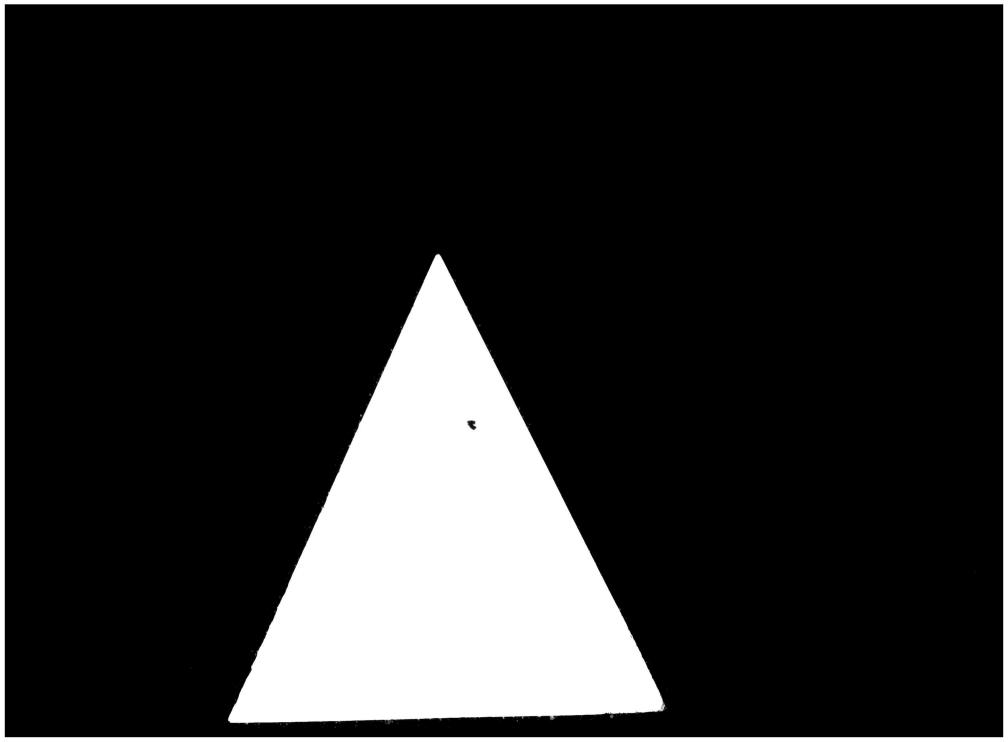
developed a obrance elarchosa soon after he came here, and this was the cause of his death. His mind never improved at all, and he did not

We forwarded the remains to Atlanta this

You have our deep sympathy in your affliction.

Very truly yours. Ac

realize his condition in any degree. morning, and trust they arrived safely.



### POWER OF ATTORNEY.

## STATE OF GEORGIA

Ground

Lug 1 1896 RICHARD JOHNSON,

STATE OF GEORGIA, County. hereby authorize 1 - receive and receipt for the pension allowed and request that as remit same to Witness to a total and sed the Executed in presence of

### STATE OF GEORGIA,

Gordan D. Runsonx to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

- 1. What is your name and where do you reside? (give State, County and post office) Lordan D Ranson attanta Hutton court of 2. Where did you regide on January 1st, 1894, and how long have you been a resident of this State? attanta La Sixty years
- 3. When and where were you born" Nancock County Sa. 15th Oct, 1834
- 4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate Co
- 5. When and where did you enlist? Landrange Sa. march 4918 62
- 6. Is what company and regiment did you enlist? Ever havy 6. 41 sa. This 7. How long did you remain in that company and regiment Mentill surremen 1864
- 8. If you were discharged from same and joined another, or if you were transferred to snother, give an acrount of discharge or transfer " Remained with same Company
- 9. For how long a period did you discharge regular military duty " Curr thill years
- 10. When, where and under what circumstances were you discharged from service . Gischarged at the surrender
- 11 What is your present occupation " totlector when able to work
- 12. How much can you earn per annum by your own exertions or labor? see thereop
- 13. What has been your occupation since 1865 heichant's Street Car driver.
- 11. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto cither in labor or income. They (10) dollars for months nothing
- 15. What is your present physical condition and how long have you been in such condition? Thaty unable to work have been so for suchal years.
- 16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and pe verty," second "infirmity and poverty" or third "blindness and poverty"? Infurnity V Toverty 17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? Have been in bad health or reince the war on account of coporeure.
- 18. What property, effects or income do you possess hour
- 19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same?
- 20. In why County did you reside during these years and what properly did you then return for taxation?

  Pullan County Welling to Millions to Millions

  21. How were you supported during the years 1893 and 1894? By friends
- 22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Do not know hothing
- 23. What was your employment during 1893 and 1894? What may did you receive in each year? unable to work
- 24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? Jes, twife living, four Children and all girle. 15-20- 13426no means of support

Sworn to and subscribed before me this the	-,
Applicant.	
M.L. Copy of In 22 Ordinary	
of Counts	
QUESTIONS FOR WITNESS.	
STATE OF GEORGIA,	
Courty Court State and Court Institute from	
as a witness in suspect of the application of	•
under the Act approved December 15th, 1894, and after being duly second true unswers to make to the following questions, deposes and answers as follows:	
1. What is voye name and where do you reside?	
2. Are you acquainted with 9. C. Aus the applicant if so	
how long have you known him	
Who re does he reside, and how bony has he been a resident of this State ( Cleve and )	
I Do ve know of his having served in the Confederate army of the Georgia militia. How do you	
& Magisewell Co El at 184 ta C.S.	
When, where and in what company and regiment did he enlist? Mech if The 1862 Coff of age of the Coff is the Called of the Called	
6 Were you a member of the same company and regiment?	
7. Yow long did be perform regular multiary duty, and what do you know of his service as a Confed- sate solder, and the time of commistances of his discharge from the service?	
He made a good sold the The war closed	
What property, effects or reconcerns the applicant? Give your means of knowledge)	_
<ol> <li>What property, effects or mesume did the applicant possess in 1863 and 1894 and what disposition.</li> </ol>	*
nx, lid bemake at son. Nothing	
What is the appropriate occupation and physical concerns. No occupation	
Thysical Condition bad.	
1. Is the applicant unable to support, blosself my labor of any sort, if so, why? " " " " " " " " " " " " " " " " " " "	
Long Continue bad hatthe.	
7	
other people.	
: What portion This support for these two years was derived from his own labor or income?	
4. Give a full and complete statement of the applicant's physical condition that entitles him to a pension	
Chrown he has seen in back	
, walth for years -	
What interest have you in the recovery of a pension by this applicant?	N.
Sworn to and subscribed before me, the	
M. Locehman	

Fulton John W. Nolms , both known to me as reputable physicianof said county, who being severally sworn, say on oath that they have examined carefully & & Ramon , applicant for pension under the Act c. 1894, and after such personal examination, say that his precise physical condition is as follows He is very weak in able to performs distant of Kidneys & Bladder which have drawind his agatemor weaked him down may love, Them heated him for several years We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sefficient to earn a support for himself, and that we have no interest in seid pension being allowed. W Comith M. D. ORDINARY'S CERTIFICATE STATE OF GEORGIA, Fullin County 1. W. Z. Cock Chrism Ordinary in and for said County, hereby cortiny that the applicant of D. N. Ottes ore resides in sail County, and was a book The resident of this State on the first day of January, 1894, and that the witnesses, six of first and, IV. la Smith of John Mr. A almost are of trestworthy 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 bereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same were signed. terila I further certify that the lax digests of Dock my returned for taxation in its name in 1893, of property, and in 1834 Withers my band and seal of office, this 8' day of May of mit to alprin Ordinary Fretten) County

STATE OF GEORGIA.

NOTE.

Before any questions are ans vered, the Ordinary shall awear 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 find "."

### 

INDIGENT

Soldier's

### POWER OF ATTORNEY.

	5			11.	
State of Ge		}			
I,	——— Count		y authorize		
* * *		of			
to receive and re	eceipt for the pens	ion paid her	eon and requ	est that he	remit same to
_			by		
	<b>B</b> 00	made pin son.			
day of	ESS WHEREOF,		nto set my ha	and and seal,	this
	, all parameters (Later). Annual	1898.			
Execute	ed in presence of		* 2 3 1 * ******************************		[L. S.]
	•	)			
		/			
				*	
II ii	• 1				
$\hat{}$	O	7		-1898.	
oiled	S.	8 .		N,	T. Lami
Z E		3 13	SUE	OHNSON	ALCANORD TO ALCA STANDER ATTAN
iready 3/		03 3	RANT ISSUE	HOI.	S. C. C.
Those Afready Enroited,		34	BAN	HARD	ARANT CARSON, 87A
of NO.		A .3	/AR	THY.	LARIA S

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, Queltone County. personally appears De Cancon of Xulton County State of Georgia, who being duly swern, says on oath that he is a borne fide citizen and resident of said County and State, and has resided in said State continously ever since 1837; that he is 63 years old and the day of by occupation a Merchant; that he enlisted in the military service of the Confederate States (or of the State of Georgea ) during the war between the States, in Company E, of 41 th Regiment of and see sed for the term of follows Midney + bladder Trouble Melking that his property consists of the following items of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of X a Close county been allowed a pension for the year 189_ Affices - Ordinary. STATE OF GEORGIA. Fultar County. Ordinary of said County do certify that I am well acquainted with applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this day of Lance 4 1897.

Nors-The blanks spaces must be filled

### For Applicants Heretofore Allowed Pensions.

- K K					
STATE OF GEORGIA,	tv.}				
	ins on Los Fullen				
	foru, says on oath that he is a hona fide citizen				
	has resided in said State continuously ever				
since the day of	18.27; that he is 6 4 years old and -				
by occupation a Muchan 6; that he	enlisted in the military service of the Confed-				
	lia ) during the war between the States,				
and served for the term of	in Company & , of 4/ th Regiment of				
Seorgia	; that his physical condition is as				
follows:	2 11 1-				
General Clebility	ladder cronicio				
that his property consists of the following ite	ms				
of the value of	D. Herry Above by				
	Dollars, that by reason of his physical				
that he receives no pension but the one herein	ort himself by his own exertion or labor, and				
1894 and the nate amondates the	benefits of the Act, approved December 15th,				
	nakes application for the pension to which he				
is entitled for the year 1898. I have beretofe					
county been allowed a pension for the year 18					
Sworn to and subscribed before me, this, the day of fand win					
moderny	Ordit .ry.				
State of Georgia,					
Entlan   County.					
1, It I sulsey	Ordinary of said County,				
do certify that I am well acquainted with	D. Canson the				
applicant in the foregoing affidavit, and on w	ell satisfied that the statements made by him				
in his said affidavit are true, and I know he i					
and that he resides in this County.					
	ial signature and seal, this /2 44-				
day of	1898,				
\(\begin{align*} \text{Amix} \end{align*}					
your soal here.	Motorica				
Oro	dinary Free Chart				

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··.. 2.0312

### POWER OF ATTORNEY.

STATE OF GEORGIA,	)	
County.	}	
I		, hereby authorize
	ef .	manager of the second second second second
to receive and receipt for the pension	allowed, and request that	he remit same to
	at	
by a		
Witness my hand and seal this.	day of	1899.
Executed in presence of	Č	(L. S.)

INDIGENT

No. 6-62

SOLDIER'S PENSION,

1899.

Name J. B. County FULTON

RICHARD JOHNSON,

WARRANT ISSUED

### For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, FULTON County	,,}
	anses of FULTON
County, State of Georgia, who being duly	worn, says on oath that he is a bond fide citizen
and resident of said County and State an	d has resided in said State continuously ever
since the day of	1837; that he is 25 years old and
	enlisted in the military service of the Confed-
erate States (or of the State of	
and served for the term of	) during the war between the States,
//	in Company , of the Regiment of
Glorgia	; that his physical condition is as
Teidney be	adder trouble
that his property consists of the following	items
v = 0	
of the value of	Dollars, that by reason of his physical
condition and poverty he is unable to supp	ort himself by his own exertion or labor, and
that he receives no pension but the one here	in applied for
Depone it desires to participate in the	benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and	makes application for the pension to which he
is entitled for the year 1899. I have heretof	ore as a resident of FULTON
county been allowed a pension for the year I	89
C	a Cron
day of funds	go lanson
day of the	1899.)
L'all Doce,	Ordinary.
State of Georgia,	
FULTON County.	
I, W. H. HULSEY,	Ordinary of a 11 O
do certify that I am well acquainted with	Ordinary of said County,
	vell satisfied that the statements made by him
in his said affidavit are true, and I know he	is the individual he represents himself to be
and that he resides in this County.	is the individual he represents himself to be
	cial signature and scal, this
day of 1	1899.
day of A	LOND,
your (	Jona 12- Jakobara
	FILL
Note.—The blank spaces must be filled.	Ordinary FULTON County.
NOTE - Affidavit should not be attended before families int	1600

the Code to the ruine for 1900. 12 this Cone to the ruine for 1900.

APPLICATION FOR PENSION DUE DECEASED SOLDIER

NAME Ranson, Jordan D.

WHEN AND WHERE BORN? Hencek County Co. October 15. 1854.

ENLISTED WHEN AND WHERE? LaGrange, Ca. March 4th. 1848.

COMPANY AND REGIMENT? Cc. E. 41st. Cc. Regt.

NAME OF CAPTAIN AND COLOREL?

Have been in bad health since the war from exposure. WOUNDED?

CAPTURED, WHEN AND WHERE

RELEASED.

1865 WHEN AND WHERE CURRENIERED?

IF NOT PRESENT AT SULRENDER, SHEAR TERE INT

DIED, WHEN AND WHERE:

BURIED,

A.J. West. No data. NITHERRES.

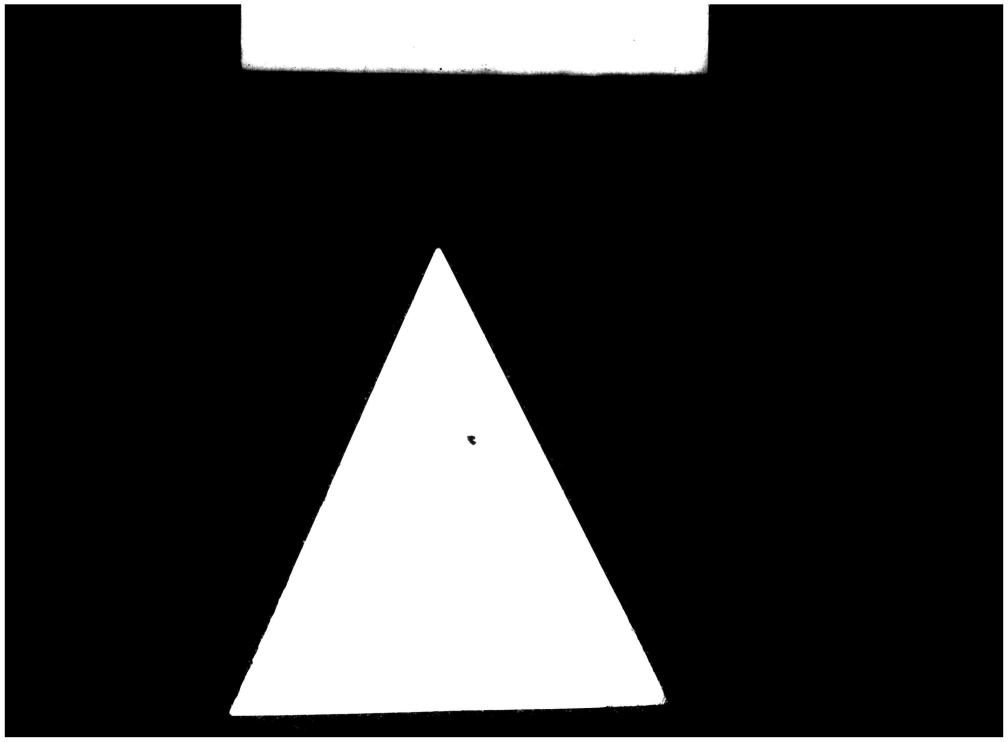
P.O.

Falton County,

COUNTY.

JWT

APPLICATIONS FOR PENSIONS DUE DECEASED SOLDIERS. Under Act Approved October 9, 1891. STATE OF GEORGIA. COUNTY OF JULION Personally appears before me Mrs. Fr. J. Rausonial County of Kullore of said County of. State of Georgia, who, being duly sworn, says on oath that she is the widow of for don & Russon who was a disabled Confederate soldier, and whose name had been duly enrolled as entitled to a pension Dixing ... ordan I Rangon the State of Georgia. That said. died on the Vullan County and that at his death, his right to said pension for the year ending to tober 36, 3900 had accrued, but had not been paid to him for the send pension year. Applicant, as his widow, applies for the amount which would have been pold him had be lived to this time Sworn to and subscribed before me, this ) 2 . Jan Let. Jay of Gan 1900 77 83 Kenley Ordinary or waldwell It allowed, I authorize to receive and receipt for the amount. A Janvenn Tr Bo Reclay STATE OF GEORGIA. 7. J. Rausin that I am personally acquainted with Mrs. that I know personally, or from swown testimony of witnesses before me that she is the widow of German & Russian of deceased Confederate soldier, who has been allowed a pension under the law on account of disability proven, and that at the date of his death his right to a pension had accused but had not been paid for the current pension year. Given under my official signature and seal, this No Kenlaz linary SEAL.



## POWER OF ATTORNEY.

		7		
Fulton Court				
07 DEC. 16, 1901. # 1 3 Max	F	*	to recen	STAT
Pac. 10, 1901.	ecuted	Witness m	ben ov	(S 3)
No	Executed in presence of	y aspd	receipt f	3 3 3
WIDOW'S PENSION,	nce of	my hand and seal, this	roceive and receipt for the pension	STATE OF GEORGIA,
190			n allowed and	CODNTY.
Marion .		day of	d request the	
Widow of Berry F. Rauson			request that he remit same to	
Warrant issued		.9	and to	
and handed to				
J. W. LINDSEY, Commissioner of Pensions,		190		bereby suthor
		p i		r uthor

### POWER OF ATTORNEY.

STATE OF GEORGIA, .	· ·	
Coun	ry.	
I	And the second of the second o	hereby authorize
2	of	
to receive and receipt for the pension allow	red and request that he remit same to	
at		2.70 m ; m mm mm ; m m m m m m m m m m m m
Witness my hand and seal, this	day of	190
		[SBAI.]
Executed in presence of		

# J. W. LINDSEY,

### WIDOW'S AFFIDAVIT.

STATE OF GEORGIA, Personally came Mrs. Mrs In Janson
Course tullon
widow of Mr. Berg Franklin Randons to whom, in the County of
distribution of the state of th
14 day of Catalana 1958, that she remained his wife up to the
day of Haves . Les 1907, at which time he fiel, and that she has not since married.
At the time of his death he was a resident of Architoc. County, in said State of
Georgia, and was on the Confession to Soldiers, pension roll of the State of Georgia, having been allowed
a pension of 3 ST P per annum on account of being a soldier in Company
38ett Regiment. You Volunteers or State 1 francisco
What affliction have you and how does it affect you? I have there are time in song
limbound joints was topina wiften story & know
Widowy trouble Con thold truy 16 ) who have protessin fell a . That y with thousand the flace you are with the thought the wind the three your and the three your and the three your and the three true of the three true of the true of true of the true of true of the true of the true of the true of true of the true of true of the true of true
make quitted lear Selling the covered to a select
What property or effects had you on lat January 1600 - 2002 - Cage beat to head
and a very few wearing Chother
With have you acquired since, and what income have you now? I to the any
What disposition have you made of any preperty since 1st January, 1950, and at what price and or what
purpose? ) Lore -
Deponent further says that she is now a resident of Hatton County and has contin-
y, and all contain
younly resided in the State of Georgia since the formula of the state
30 × 0 × 0 × 0
190 d
mis many by Rausum
John William John John County
Nora.—All blank spaces must be filled before signing.

### KULINATII LAU TUUDU MIIMPOODO.

STATE OF GEORGIA, Perponally on me.  COUNTY OF Julian: J. Curmisterial and S. C. Anown to me to be reputable and truthful person, who says
who made the feregoing affidays, is the widow of Benjamin Frankin Randon who died in Fretter County and State is Georgia
Il day of November 1607, and that she has not since married; that she became his wife on the 154, day of October 1855, and so remained up to the time of his death,
with what affliction does she suffer? There restieven, the colony trombles and
Files. Kut a but cough land see is Is lanuary 1900 2 2000

What has she in her possession a, 4 control now "

nothing.

How was strongered in 1800 and 1901 13 24 for any quantite superioral

Selling their cased by the help of his himband during fishing

Thave no personal interest in the considerated in S. V. and minorial

Ordinary Total Par County, Georgia

### PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA. physicians, who say on seth that they personally know the roll whey have the Randons mentioned in the foregoing affidavit, that she is permanently afflicted with state disease and how it trevents her carning a support Humanitation of the Lucia a field to for a time Extent that the ac bordening or to. Bright Sicen Assonin the line cately land wellstocated to melder ukson Sworn to and subscribed before me, this 20th y of Dellute 100

### WERTHINATE OF UNDINAKT OF THE COUNTY OF APPLICANT'S RESIDENCE

STATE OF GEORGIA,		Ordinary.
COUNTY OF	in and for said County of	
tate of Georgia, hereby certify that I am acqua	inted with Mrs.	, , , , , , , , , , , , , , , , , , ,
e applicant for a pension in this case, and kn	now from my own knowledge (or fro	om positive proof presented to
by reputable witnesses) that she resides in d		
mously since the		, and has not lived out
the State since that date. I also certify that the		
	and	
nose restimony she presents to sustain her claim, a	are known to me to be truthed no	fuces and and the fill fresh
d credit as such, and that the full text of the ac		
med I am fully satisfied that this claim is r		
thesses to read or hear read the proofs they some	marie in grant lands, and I have a	sused the applicant and the
In Vitness Whereof, I have hercurte set ny	1	
y of190	nabel and amxed the scaled my s	tlice this the
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		Ordinary.
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### NOTES.

The Pension is only payable to those widows whose husbands were or Pension Roll at the time of death. The matriage must have existed at the time husband was a soldler, and the widow must have remained unmarried since the castle of such husband. There of marriage is assential and must be submitted. Proofs by one witness and two physicians will be accepted when it is shown that the same cannot be furnished but the proof of accession will be required, and it is incumbent on the applicant to make our a deer case of the district must be made in presence of the Ordinary.

### APPIDAVIT FOR THREE WITHESSES. STATE, OF GEORGIA, COUNTY OF The on oath that from his own personal knowledge Mrs. Muru Jame Randon who made the foregoing affidavit, is the widow of who died in witten County and State of George day of november 1607, and that she has not since married; that she became his wife on the 14 day of Setatur 1857, and so remained up to the time of his death. What property or income had she on 1st January, 1900? What has she in her possession and control now? ..... How was she supported in 1900 and 1901? By I have no personal interest in the pension asked for Sworn to and subscribed before me, this ..... PHYSICIANS' APPIDAVIT.

STATE OF GEORGIA,	Personally came before me
COUNTY OF Fulton	- Sr Ja Been
and It Vining w. 2	, both of whom are known to me to be reputable
physicians, who say on eath that they personally	know these Mary June Randons
mentioned in the foregoing affidavit, that she	is purchased afflicted with Chies disease and how it prevents her
earning a support) Ichesand	Valency affected to the
Extent that the bo	den you to to night I was Derining
an already let - 8	1. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
dil a little made	wist and his self of the Rock Ho
Survey and	DOWN TOWN
Sworn to and subscribed before me, this	0344 1747 17
	Ordinary of County

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

STATE OF GEORGIA,	I, Ordinary.
, and	and for said County of
State of Georgia, hereby certify that I um acquain	, , , , , , , , , , , , , , , , , , ,
	from my own knowledge (or from positive proof presented to
me by reputable witnesses) that she resides in this	County, and that she has resided in the State of Georgia con-
tinuously since the day of	18, and has not lived out
of the State since that date. I also certify that the	vitnemes, to-wit:
44	and
whose testimony she presents to sustain her claim, are	known to me to be truthful witnesses, entitled to full faith
and credit as such, and that the full text of the affici	lavit was read to and understood by them before same was
signed. I am fully satisfied that this claim is ma	de in good faith, and I have caused the applicant and the
witnesses to read or hear read the proofs they sign.	
In Witness Whereof, I have hereunto set my h	and and affixed the seal of my office, this the
day of190	
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	X 11. 11.
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The Pennion is only payable to those values the resolutions were on Pennion Roll at the time of death. The death of such humband. Using of marriage is not to the state of the payable of such humband. Using of marriage is not to the payable of such humband. Using of marriage is not to the payable of the pa

Amderite must be made in presence of the Ordinary.

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CONFEDERATE SOLDIER'S APPLICATION Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920. County Fulton Name H.T. Ranson Regiment/si S' 6 Regt Our Ryles Approved. and f the Average word JOHN W. CLARK, Commissioner of Pensions.

Ordinary's Certificate

nts himself to be, and that no

. Ordinary of said County, certify that I know

ars to the service, that both of their are now residents of said County and January 1st, 1920, that I also

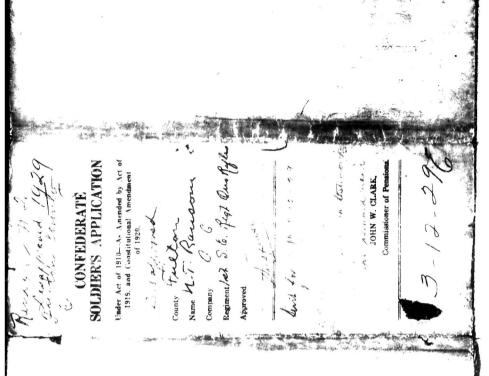
atements are entitled to full faith and credit.

before signing the

HATE SHALL SWEAR Applicant and the witness in the following inspects make to each of the questions asked you and the evidence

SEAL OF ORDINARY

by a first server of the form of the art of the ordinary of the form y in where the art has been been as the ordinary of the form y in where the art has the ordinary of the form y in which the art has a first art of the art of the



Ordinary's Certificate

Ordinary of said County, certify that I know

the applicant for pension; that he is the person

he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920, that I also know E. L. Lunium and I , the witness, who swears to the service, that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and they are truthful and trustworthy and their statements are entitled to full faith and credit

Ordinary. County

(SEAL OF ORDINALY.)

Instructions

Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
 "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. So help you God:
 Additional amidavits may be attached if blank spaces are immufficient.
 All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and

4 Fill out the back of the application carefully

### APPLICATION FOR PENSION BY A SOLDIER

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

### QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA.

FULTON

COUNTY.

M. T. Ranson Personally appears before me. County, and nereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, and submits testimony to support the same and after being duly sworn true answers to make to the questions propounded, answers as follows, to

- 1. What is your name and where do you reside? (Give County and Fost Office)
- H. T. Ransem, 67 Wetherby, S. E., Atlanta, Pulton Co., Ga.
- 2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? Since 1887
- 3. Did you enlist in the Army of the Confederate States, or in the organized minuta, of this State from 1861 to 1865? enlisted in Army of Conf. States in 1863
- 4. When and where, and in what Company and Regiment did you enlist: State the arm and class of service, and give name of Coionel and Captain.) 1863, at Culpepper Court House Yas Co. C. Cras Reg. of Rifles, Col. Geo. M. Miller, Capt. Leonard Mogers
- 5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) to the battle Spettaylyania Court House May 12, 1864, later transferred to Co.A. Reserves of Home Guard Cart. has McGill when and where was your Company and Regiment surrendered or discharged from the Service' May 5, 1865, near Greensbore, M. C.
  - 7. Were you personally present with your Command when it was surrendered or discharged?
  - 8. If you were not actually present, state specifically and clearly where you were
  - a. Where was your Command when you left it? Hear Greensboro, M. C.
  - b When did you leave the Command?
  - c. For what cause did you leave? were disbanded
  - d. By whose authority did you leave? Col. C. Enddon
  - e. For how long was your leave of absence granted? In what way
  - f. Why did you not return to your Command after leave expired?
  - g. In what way were you prevented?
  - h. What effort did you make to return?
  - i. Were you captured by the enemy at any time?
  - j. If so, when, and where? In what prison were you held and when were you released
  - 9. Are you drawing a pension of any amount from this State or the United States?
  - 10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was it not allowed?

Sworn to and subscribed before me, this the

County

(SEAL OF OPDINARY

W J Kanson

### Questions of Witness as to Service

STAT	10	OF	:FC	RC:	IA

Fulton

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E. I. Summerell	
of said state and County is hereby presented	
as a witness in support of the application of <b>B. T. KABBOR</b> for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of	
1920, in said State who, after being sworn true answers to make to the questions propounded,	
answers as follows, to-wit:	
1 What is your name and where do you reside? B. L. Summerell,	
Hapaville, Sa.	
2 How long and since when have you known E. L. Summerell the applicant?	
for over sixty years	
3. Where does he now reside and since when has he been, continuously, a bona fide resident of	
this State, and how do you know? 6? Wetherby S. B. Atlanta, Ga. since 1913	
of my own knowledge	
4 When, where and in what Company and Regiment did . 7. Lancom enlist?	
(Give date and place) 1863 at Culpepper Court House, Co. E. of Orrs Hegt.	
5. How did you obtain your information of this Service? I served in Co. A of the	
came Regt. was already in servine when he enlisted	
6. How long within your own personal knowledge did he perform actual military service with	
this Company and Regiment (Give dates.)	
ration at Spettsvylvania Court House May, 1864, but was not discharg	•4
7 When and where was his Command surrendered or discharged? (Give date and place.)	
3. Were you personally present when it was surrendered . Ros with his Co. but was	
9. If not, where were you? # P. T. A. A. A. Apparenties Court and too	
came you there? Serving with my company	
10. Was the applicant personally present with his Command when it was surrendered?	
11. If not, where was he	
e-Tatana	Tallian Tallian
12. When, where and for what cause did he leave his Command? (Give date.)	
By whose authority did he leave his Command? ##24. 15 Charge	爛
and how long was he granted leave?	
know all that you have stated to be true? If of your own knowledge, state clearly and specifically of my own knowledge	<b>/</b>
13. In what way, if you know of your own knowledge, was he prevented from returning to his	
Command? (State clearly and specifically.)	
14. What effort did he make to return to his Command and how do you know this?	E.
1.22	2
15. Was applicant captured as a prisoner? <b>50 to my kinds</b> if so, when and where?	
in what prison was he held?and	
when released?	
Sworn to and subscribed before me, this the	
11th day of March 1929 Witness	
Bulleton Wilness:	
of Mrs. L. D. Partwood	
(SEAL OF ORDINARY.)	

### Questions of Witness as to Service

STATE OF GEORGIA,
FULTON CGUNTY.
R. C. Pressly of said State and County is hereby presented
as a witness in support of the application of N. T. Ransom
provided by the Act of 1910, as amended by the Act of 1915 and the Constitutional Amendment of
1920, in said State, who, after being sworn true answers to make to the questions propounded,
answers as follows, to-wit:
1. What is your name and where do you reside? R. C. Pressly, Soldler's Home,
Atlants, Fulton County, Ga.
2 How long and since when have you known N. T. Ransom the applicant?
Have known applicant since we were in the war
3. Where does he now reside, and since when has he been, continuously, a bona fide resident of
this State, and how do you know? ## 67 Weatherby St. S.E., Atlanta, Ga.
has resided here since 1881
4. When, where and in what Company and Regiment did . N. T. Ransom enlist?
(Give date and place). I do not know exact date, but near the beginning of
5. How did you obtain your information of this Service? Visiting with my brother
E. Pressly, who was in the same Co. with Mr. dansom. I hoing to Co.
How long within your own personal knowledge did he perform actual military service with
this Company and Regiment? (Give dates.) from enlistment until discharge
and the second s
7. When and where was his Command surrendered or discharged? (Give date and place.)
At close of war, near Greensboro, N. C.
8. Were you personally present when it was surrendered? I was in another Co. See #5. Ot
9. If not, where were you? I was captured and was in prison in Johnson's Island, and how
came you there? Was captured by the ebemy
10. Was the applicant personally present with his Command when it was surrendered? he was not
II. If not, where was he? At nome in S. and how came him there? He was injured in
bautle and sent home.
12. When, where and for what cause did he leave his Command? (Give date.) I do not know batt
he was injured in, somewhere in South Carolina,
By whose authority did ne leave his Command Injured and sent home by commander in the
and how long was he granted leave? Discharged from service on a/c injuries the de you
know all that you have stated to be true? If of your own knowledge, state clearly and specifically
From personal visits and correspondence
18. In what way, if you know of your own knowledge, was he prevented from returning to his
Command? (State clearly and specifically.) On account of injuries received
14. What effort did he make to return to his Command and how do you know this?
He was never able to return
15. Was applicant captured as a prisoner?
when released?
Sworn to and subscribed before me, this the

Witness.

of Fulton

(SEAL OF ORDINARY.)

The records show that John C. Mannes, Co. C. lat(Our's) South Carolina Rifles, C. S. A., enlisted Mar. 1, 1864 at Columbia, S. C.

Muster roll for Nov. & Dec. 1864(latest on file)shows him absent. Taken prisoner May 20, 1864, a private. Prisoner of War records show that he was captured May 21, 1864 at Spottsylvania, Court House, Va., and released June 21, 1865 at Elmira, F. Y., on taking the oath of allegiance to the United States, a private. (Washington Resord)

March 26, 1985

Hon. Thos. R. Jeffries, Ordinary of Pulton County, Atlanta. Ga.

ity door dudge:

I have not been able to approve the application of N. T. Rensen for meither the applicant per his witness are found on the rolls of Go'  $G_r$  ist (Gyr's) South Carolina Rifles.

With kinderogards, Very truly yours,

Commissioner of Pensions

March 22nd, 1953.

Judgo Thomas H. Joffries, Ordinary, Fulton County, Atlanta, Georgia.

### Dear Judge:

Mr. John W. Dyer, 476 Simpson St., N.-W., Atlanta, Ga., who is a pensioner of Fulton County, salled at the office this morning, and stated that he could supply some a vidence with which to amend the application for pension made by Mr. N. T. Ransom, of Fulton County, which was disapproved in the year 1929.

Mr. Ransom's application appears to have been disapproved for lack of evidence to support the statements made by him. No official record of his service could be found anywhere, and the witness, Mr. ". L. Summerell, was not himself a pensioner, and seemed unable to supply the necessary evidence from his own personal knowledge of the service claimed by the applicant.

I will be glad to consider anything Mr. Dyer may submit, through your office, but, from his statements to me, I fear that he, like Mr. Summerell, had no personal knowledge of the service claimed.

may make auch investigation as for all the proper; and then accept Mr. Byer's tendingly if you consider it of value to Mr. Renects.

With kindest regards,

Yours very truly,

DIRECTOR,

Comy to

Hr. John W. Dyer, 476 Simpson St., N.-W., Atlante, Georgia. (COPY)

War Department, The Adjutant General's Office Washington, Apr. 6, 1954.

Respectfully returned to the Veterans Service Office, State Capitol, Atlanta, Ga.

The name Nick T. Ransom has not been found on the muster rolls on file in this office of Company H, 2c Regiment S. C. Rifles, C. S. A., which rolls sever the period from May 1, 1868 to Feb. 26, 1865, nor has any record been found of his service, capture or parole as of that organization, nor of any C.S. A. organization from that State.

(Signed) James F. Mckinler, Major General, The Adjutant General.

We are the state of South Carolina C. S. Army.

Hor has any record bean found of his service, sapture or parole as of Co. C. let(Orr's)South Carolina Rifles, the rolls of which cover the period from July 20, 1861 to Dec. 31, 1864.

Co. A. Reserves of Home Guards (Capt. Dan. McGill) has not been identified. (Washington Record)

co 7/21 Reg 8. C Reflect

STATE OF GEORGIA )

County of Fulton )

Before the undersigned officer duly authorized to administer caths personally came E. H. Summerall who on eath says:

I live at 213 Fullian "treet, in the city of Atlanta, I am now 86 years on age and will be 87 years on the 28th day of Hovember, next.

I have known Hick T. Ramesm practically all of my life. We were boys together in South Carelina at the time the Civil War bogan. We were living neighbors at the time the war began. I was about fifteen years all at the time and he was mear my age. We want to different years and he was mear my age. We want to different years and the same of t

We served together in this Company until it surrendered at or near the state of the served in this company continually through the war and we served in this company continually through out the entire war and surrendered together.

Seem after the war Ranson married a young lady living in the semunity who was a neighbor, a Miss Mary Mitchell, and he lived with her until his death. His wife is still living and I have mown them cince we were all neighbor up in Seuth "arclima. They lived mear femmes at the time of their parriage and I lived mear that place.

Bill McGill and John Askew were in the same Company with us, Capt, Garber's Company was in Orr's Regiment throughout the War and Capt, Garber was in command at the time the transfer of the War and Capt,

E. V. Summer live

Sworn to and subscribed before me this earch 24th, 1934 By his mark Section School Sch

Witnesses to signature of affiant by

Enu tias Johnson.

GEORGIA, FULTON COUNTY.

Personally appeared John W. Dyer, who states that he was attached to the 18th Ga. Regt. Co. K. and detached at Lanville, Va. at Lee's surrender and he further states of his own knowledge N. T. Ransom, an applicant to be placed on the pension roll was present at Greensboro, N. C. in the month of April, 1835, when three or four car-loads of whiskey was cerried along the R. R. track and poured out upon the ground and in talking with Mr. Ransom later I found that he was there and also knew of the circumstances that followed, and that Mr. Ransom was on his way to Johnson's Army which was stationed at the railroad shops about twenty miles from Greensboro.

He further states that he personally knew Mr. Ransom for more than twenty years and believes that he did service as set out in his petition.

John M.D.

Sworn to and subscribed before me, this 8th day of May, 1985. 1933.

John R. Marlout

C. C. ORDINARY.

GEORGIA. FULTON COUNTY.

Personally appeared M. T. Ransom, who on eath deposes and says that is Grrs Regt. he was known J. C. Ransom, but that his real name is M. T. Ransom, he states that his name may be listed either as W.T. kansom or "Little J. C. Ransom".

7. I Ranson

Sworn to and subscribed before me, this 11 theday of March, 1939.

Chilling market

N. J. Ranson 67 Howard, St. 4.8, Aslanda



## VETERANS SERVICE OFFICE

SUCCEEDING TO THE DUTIES PORMERLY DEVOLVING UPON

THE PENSION COMMISSION THE ROSTER COMMISSION THE VETERANS SERVICE OFFICE

STATE CAPITOL

AT!ANTA

MEMORANDIN:

A L TENGON DIFECTOR

IN RE: N. T. Ransom, Fulton County:

Application filed in 1929.

"ember of a South Carolina command.

Report from Adjutant-General's Office:

"N. T. Pansom not found on any muster rolls of any organization State of South Caroline, Confederate States Army, nor has any record of his service, capture or perole as of Company C, lst (Orr's) South Caroline Rifles, the rolls of which cover the period from July 20, 1861 to December 31, 1864. Company A, Reserves of Home Guards (Captain Dan McBill) has not been indeptified."

"The records show that John C. Ransom, Company C, lst (Orr's) South Cerolina Rifles, Confederate States Army, enlisted March 1, 1864 at Columbia, S. C. Muster rolls for November and December, 1864 (latest on file) show him absent. Taken prisoner, May 29, 1864, a private. Prisoner of War records show that he was captured May 21, 1864 at Spottsylvania Courthouse, Virginia, and released June 21, 1864 at Elmira, N. Y., on taking the oath of allegiance to the U.S., a private."

Applicant makes separate affidavit that as a member of Orr's Regiment he was known as J. C. Ranson, but that his real name is N. T. Ransom, and that his name may be listed "... either as N. T. Ransom or "Little J. C. Ransom." THERE IS NO PROOF SUBMITTED TO CORROBERATE THIS AFFIDAVIT.

Applicant states he was enlisted at Culpeper Court-house, Virginia, in 1863, and that he was discharged, with his Company, May 5, 1865, near Greensboro, N. C., the Company having been disbanded at that time and place.

E. L. Summerell, not on Georgia pension roll, but a citizen of Fulton County, testified that he served in Company & of Orr's Regiment, and that applicant was already in service, in Company C, of the same Regiment, when witness enlisted. They were separated at Spottsylvanis Courthouse, Virginia, May, 1864, and that witness was not with applicant at Surrender, but was at appomentax Courthouse, Virginia.





A L HENSON, DIRECT

## VETERANS SERVICE OFFICE

SUCCEEDING TO THE DUTIES FORMERLY DEVOLVING HOOM

THE PENSION COMMISSION
THE ROSTER COMMISSION
THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

2.

witness testifies, however, that applicant did surrender in 1865 near Greensboro, North Carolina.

R. C. Pressly, an inmate of the Soldiers' Home, is now offering testimony in behalf on applicant. He states that applicant was in the same Company with his (Pressley's) brother and that knowledge of applicant's service was obtained from witness's brother. Pressley awears that applicant was injured, somewhere in South Carolina, and discharged and sent home on account of injuries, by "commander in charge."

Even if it had been proven that applicant served under the assumed name of <u>J. C.</u> Ransom, the record of John C. Ransom who <u>did</u> serve with Crr's Rifles cannot be the record of applicant.

If  $\Xi$ . L. Summerell was a Confederate soldier, and was Surrendered with Lee at Appomatto., why is he not a pensioner?

The testimony of applicant and his witnesses do not coincide. Applicant swears he was with his Company when it disbanded, at Greensboro, N. C. Summerell swears that applicant was with his Company when it disbanded, at Greensboro, N. C., but he himself having been with a command that was surrendered at Appomattox, could not have known, of his own personal knowledge, as to that. Pressly swears that he himself was captured and was in prison at Johnson's Island, Ohio, when the Surrender took place, and his testimony that applicant was injured and discharged on account of such injury is, therefore, hearsay.

Nothing except hearsay testimony has been submitted to prove the statements made by applicant as to his service. except Summerell's testimony as to the first part of applicant's service, and this testimony is made by a man who is not on the pension roll of Georgia.

April 25, 1988.

Hon. Thomas H. Jeffries, Ordinary, Fulton County Cour? House, Atlanta, Georgia,

In Re: Application for Pension for No. T. Ransem, Fulton County, Georgia.

Dear Judge:

I have carefully reviewed the evidence in this case including the supplemental affidavit of Mr. R. C. Fressley. It appears that this office has made an extensive effort to obtain the military record of the applicant. In view of the affidavit of applicant dated March 11, 1929, and appearing in the record stating that his service was under the name of J. C. Ranson, an effort was made to locate a service record in that name which would check with the date and place of enliatment given by the applicant. No record in that name can be found. Insemmen as the statute (Gode Section 1482 (5)) requires that applicant's statement be corroborated by at least one witness, or other satisfactory evidence, we seek to find the records so that we can dispense with the testimony of a courage.

The affidavit of R. C. Pressley recently submitted is without probative value for the reason that it is based on the knewledge of E. Pressley rather than on the knewledge of the person making the affidavit. It is, therefore, hearsay.

Mr. E. L. Summerall, one of the supporting witnesses, seems to be without a service record himself. The record does not disclose his age or his means of knowing the facts about which he testifies. Mr. Summerall stated that he was with his company at Appearation Court House when that organization surrendered. Heccessarily he would have no means of knowing whether applicant was with his (applicant's) company or not since they were separated at Spettsylvania Court House. In view of the statute (Section 1482 (2)) which makes it entirely necessary for the applicant to prove not only his enlistment but his honorable separation by being present when his command surrendered or otherwise account-

Page #2, Hom. Thes. H. Jeffries, Ordinary. 4/25/35.

ing for himself, it occurs to me that it will be necessary for him to subwit an affidavit from some person who has personal knowledge as to the cirsumstances under which he was separated from the service. This will, of necessity, have to come from some person who was present with him when he surremised or some record showing that he was absent by having been captured or furleughed for some legitimate reason and could not, on that account, be present at the time his organisation surremdered.

Even though Mr. Summerall has no military record appearing in the archives of confederate records I shall accept his affidavit showing enlistment and the only point that must be elegred up is evidence of probative value showing his honorable separation in the manner pointed out.

The John C. Runsom, of whom we have a record, salisted March 1, 1864, at Columbia, S. C. This could not be the applicant because he states that he enlisted in 1867 at Culpepper Court House in Virginia.

This letter will indicate to you what additional proofs are necessary in order to entitle the application to favorable consideration. I am placing the application in the suspense file in the hope that Mr. Rensom will be able to supply the necessary evidence.

Yours very truly,

Director.

ALH · LE

May 16, 1985.

Home Thomas H. Seffrice, Ordinary, Pulton Southy Court House, Atlanta, Seeggle.

> In Not Applifection for Peculon for H. S., Sandon Petton County, Coordin.

Dear Andges

¥ .. "

This file has been supplemented by the affi-fewit of Er. John W. Byer.

Hr. Dyer's affider is shown by 16°s resided this the information which he purposes to give was obtained in talking with itr. Reason long after April 1805. On that date Mr. Dyer testifies to an conservate Three or four our lands of whickey was carried along the relivent trust and powed out upon the ground access, that he (apon) was precent and more all of the eliganetaneos that followed and that Mr. Reason was on his way to chimically large residents any restiment at the Railroad Shape tensity milits from Greenstern.

To 44d not see Mr. Reason there for he states in his actions to have been been been been and did not been acquainted with the Amoun midd making failing allow the committee of the been action that the been most of missingly to be an incoming.

It is my opinion therefore that Nr. Sports affiducib is parameter and would come life to believe that Nr. Reason the there jut it finite the short of the testimony required by stiffalls.

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personality and would study like to justice was in, image the ware jet \$1 \$416 for shart of the testings regularlily statistic. 

# POWER OF

STATE OF GEORGIA,

NO. 1824

CODE 8E0, 1254.

(For Those Already Enrolled.)

INDIGENT SOLDIER'S PENSION,

1900.

County

WARRANT ISSUED

JOHN. W. LINDSEY,

Commissioner of Pensions

# For Applicants Heretofore Allowed Pensions.

CTAMP OF GRODAL	
STATE OF GEORGIA,	
FULTON County.	
MM71 (7) EILL TON	
County, State of Georgia, who being duly sworu, 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 7th day of Dee- 1888; that he is 55 years old and	
by occupation a that he enlisted in the military service of the Confed-	
erate States (or of the State of La- ) during the war between the States,	
and served for the term of 3 class in Company, of th Regiment of	
Le 20 o legement - S.C. ; that his physical condition is as	
follows:	
for the same of th	
General Chelicity	
that his property consists of the following items.	
of the value of Dollars that by reason of his physical	
of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and	
that he receives no pension but the one herein applied for.	
Deponent desires to participate in the benefits of the Act, approved December 15th,	
1894, and the Acts amendatory thereof, and makes application for the pension to which he	
is entitled for the year 1900. I have heretofore as a resident of FULTON	
Sworn to and subscribed before me, this, the Wass & Ras Son	3
1000	11
White ordinary.	
Orginary.	
State of Georgia	
State of Georgia, FULTON County.	5
	1
I, W. H. HULSEY, Ordinary of said County, do certify that I am well acquainted with Man Rouson the	
do certify that I am well acquainted with MMM Kanson the	1
applicant in the foregoing affidavit, and am well satisfied that the statements made by him	
in his said affidavit are true, and I know he is the individual he represents himself to be	
and that he resides in this County.	1
Given under my official signature and seal, this	
day of Jany 1900.	
your	
BOW TON	10
Ordinary FULTON County.	

Norn.—A fidevit abould not be attacted before January 1st, 19

#### POWER OF ATTORNEY

STATE OF GEORGIA

County

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day of

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INDIGENT

SOLDIER'S PENSION

OHN W. LINDSEY

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**DIER'S PENS** INDIGENT

Fulton

JOHN W. LINDSEY, Commissioner o

POWER OF ATTORNEY.

STATE OF GEORGIA,COUNTY.		
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to receive and receipt for the pension allowed, and request that	he remain	same to
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b <b>y</b>		
WITNESS my hand and seal, this day of		1907
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Executed in presence of

For Those Already Enroiled.

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# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
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personally appears	21) of 11/1/2.
County, State of Georgia, who being duly sworn	says on oath that he is a hona fide citizen
and resident of said County and State, and has	resided in said State continuously or a
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tederate States on of the State of	) during the was between the
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STATE OF GEORGIA,	
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1, 968 W. Chin o o .	Ordinary of said County,
applicant in the foregoving affidavit, and am well sati	ished that the statements made by him
in his said affidavit are true, and I know he is the i	individual ne represents himself to be
and that he resides in this County	1
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The simulate should not be arrested senire January 1st. 19	500

LAN	GILHAMIA	Devetalar	ALLUWED	PENSIONS
	to of Coon		_	~ 24101011D

Fulton County.
Personally appears Mil. 11. Maneroxos
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 1855; that he is 63 years old and by occupation a Fall Paper, that he onlisted in the military service of the Con-
and by occupation a Fall Park, that he enlisted in the military service of the Con-
ourne the states (or of the State of) ourne the
States, and served for the term of 4 4 th in Company of the Deciment
of 1224, Vi (C), that his physical condition is as
of Lers, Seller porcerty; that his physical condition is as follows:
that his property consists of the following items: Ac freefer 24.
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
John R. Willisson. Ordinary. 11 111 / 1818
State of Georgia,
County. )
1, John D. Williamsong Ordinary of said County,
do certify that I am well acquainted with Hall, He accepted
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual be represents himself
to be, and that he resides in this County.
Given under my official signature and seal this
day of JAN 2 1907.
John C. Y. San
Affix Jour Ordinary County
here
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## POWER OF ATTORNEY.

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Executed in presence of

STATE OF GEORGIA.

SOLDIER'S PENSION

( FOR THOSE ALREADY ENROLLED.)

WARRANT ISSUED

FARRANT HANDED TO

JOHN W. LINDSEY

(4.14

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE O	F GEORGIA,	)
· * L		y.\
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County, State of	Georgia, who, being duly sw	orn, says on oath that he is a bona fide citizen
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	ed a pension for the year 1	Whit A Kanson
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		Ordinary.
STATE OF	GEORGIA,	
	County.	
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do certify that I as	m well acquainted with	Ver Manager of said County,
		well satisfied that the statements made by
		e is the individual he represents himself to
be and that he resi	des in this County.	
	Given under my official sig	
( Amr )	day of 31 20 19415	1903.
/ your / Neal   brre /	****	
	0	Ordinary County.
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# FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.	
Fulton. County.	
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s entitled for the year 1904. I have heretofore as	s a resident of
County been allowed a pension for the year 1	Fulton.
Sworn to and subscribed before me, this the	1 4.5
Jon & Williamon	ordinary.
STATE OF GEORGIA,	
Fulton, county.	
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certify that I am well acquainted wit	Ordinary of and County.
e applicant in the foregoing affidavit, an	Satisfied that the state
him in his said affidavit are true, and I know h	e is the individual he tener out him it
be, and that he resides in this County.	and the feet escales in escale
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Nors -- Affiducit should not be attented before January 1st 1981,

## POWER OF ATTORNEY.

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	POWER OF ATTORNEY.
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	Executed in the presence of

SOLDIER'S PENSION 1906.

CODE SECTION 12%.
(FOR THOSE ALREADY ENROLLED.)

No. 319

Namo IM. Ily. Dace con

JOHN W. LINDSKY.

WARRANT HANDED TO

V.

LAU ALLIMANIO UD	VETALARE VITAMEN LEUSIO	NS.
STATE OF GEORGI	IA.	
ulton. Cou	(	
2./		
Fearsonally appears 24 221	La Manson Fullon.	
County State of Georgia, who, being	g duly sworn, says on eath that he is a bona nide cit	tizen
and resident of said County and St.	ate, and has resided in said State continuously	ever
since the cay of	18; that he isyears old	
by occupation a	_, that he endisted in the military service of the (	
federate States or of the State of Z	during the war between	ı the
States and served for the term of C	If in Company of the Regin	nent
m says. J. de	, ; that his physical condition ;	8 88
follows Alfirmaty	and poverty	
<i>y</i> -		
that has property consists of the follo	owing items :	
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of the value of		
by my labor	Dollars. I am now carni	0
	Dollars per month That by reason of unable to support himself by his own exertion	his
labor, and that he receives no pension	but the one herein applied for	or
Deponent desires to participate	e in the benefits of the Act approved Dember 18	5+h
1864, and the Acts amendatory there-	of, 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	e rear 1905	
Sworn to and subscribed before	e me, this the property of Ro	1115
Aug of	1905.	
,	Ordinary.	
STATE OF GROBOL		
STATE OF GEORGIA	A. (	
FUNC Coun	ty. )	
L	Ordinary of said Coun	2.5
do certify that I am well acquainted w		
the applicant in the foregoing affidav	vit and am well satisfied that the statements ma and I know he is the individual he represents hims	ade
to be, and that he resides in this Cour		sel:
	al signature and seal, this	
day of_	1905.	
quest y	1905.	
your year	Ordinary CountyCounty.	

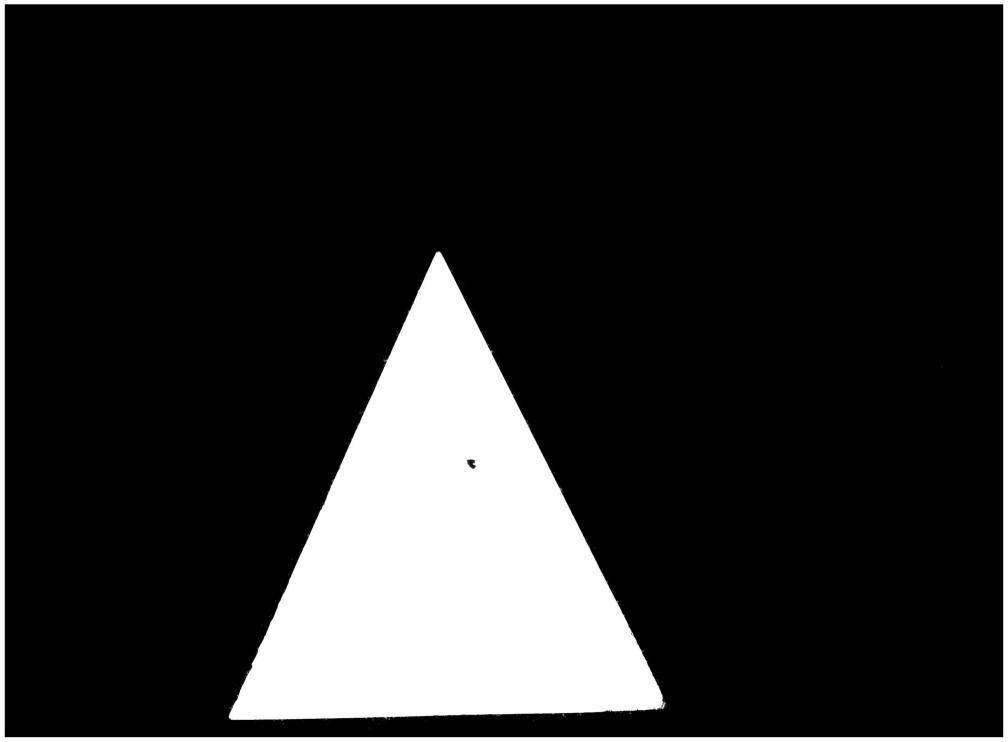
Note. - The blank spaces must be filled.

OTE. - Affidavit should not be attested before January 1st, 1905.

111

Personally appears Mills He Mansond of Jacob County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever __day of ______18 18; that he is ______years old and by occupation a Melaul, that he extisted in the military service of the Con-States, and served for the term of 3 1/2 in Company to, of th Regiment Infirmity and foresty. that his property consists of the following items: Dollars. I am now earning Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or of the value of. labor, and that he receives no pension but the one herein applied for by my laber, 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 1908. I have heretofore, as a resident of sworn to and subscribed before me, this the County, been allowed a pension for the year 1805. Jun A. Milhiered Ordinary State of Georgia, Ordinary of said County, do certify that I am well acquainted with Him. W. the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself Given under my official signature and se ', this to be, and that he resides in this County. Ordinary_ Nova.—The blank spaces must be filled. Nova.—A fildavit should not be attested before January 1st, 1906.

IN THE MATTE OF OFFICE OF SHERIFF FULTON COUNTY JOHN W. NELMS, SHERIFF. A. J. Shropshire, L. P. Thomas, N. A. Chastain, W. G. Tolbert, Jno. T. Jones, J. M. Goldsmith Hon John W. Imdsey. Come of Tensions ATLANTA, GA.... Sear sir I certify that the bearer of this letter is Min A Ransom & non.



Julton Cos 19 No. 558 Application for Allowance Mig it Ann disabled Applicant It Al Kary Amount &V Date of Warrant Ufl. 14/88 Entered on Record, apl 18 138 TH H Secretary Executive Department.

Application for Allowance

No. 888

Application for Allowance

FOR

Applicant W Kell Kary

County Steeller

Amount & V

Date of Warrunt M. 1488

Entered on Record.

M. 18

W. 18

W. 18

Entered on Record.

Secretar Electron Disactions

Secretar Electron Disactions

M. 18

M.

STATE OF GEORGIA, (

Personal I. I. appears WM Rary of Fullow county.

State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said

State, and has been such since the day of Tovensber 1865; that he
enlisted in the military service of the Confederate States (or of the States of

during the war between the States, and served as a Poiroale in Company &, of

#2 th Regiment of I. Volunteers Markins 's Brigade; that
whilst engaged in such military service, at the battle of Petersburg in
the State of Oringmia on the 24 day of Cark 1864, he was
wounded as follows in the light am between the Store

and Rish by Traving arms borne free thicker

Dependent desires, o participate in the beautits of the Act, approved October 24, 1887, and makes application for the allowance to which be is entitled thereunder.

Sworn to and subscribed before me, this one

1st day of Filty 1888

WM + Kary

W 6 Horton JP

Note. State fully nature of wound or character of disease which causes the disability, and aplane particular is the extent

## COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA.

Personally came before me	For Sin	Vieles.	10	of the county
OI CX DE L L	State of Ger	win, who, bei	ing duly sworn,	says that he was
a commissioned officer in Company 4	, of	42.	Regiment of	A. Good.
Voiunteers, and that deponent knows	ir , m.	Kay.	and that he rece	ived the wounds
(or contracted the disease) in the military	service us sta	ted in his forest	oing affidants -	
(or disease) permanently disables the said	1-p	17		
affidavit. Deponent further states that sai	d //	. In Re	ing	ma bona fide
affidavit. Deponent further states that sai citizen of this State, and resides in	Davis	coun	ity. Indi	*
Sworn to and subscribed before me, this	a,h	ay of LAC	liel	188 8
M.R.Ellis, K. 9.			4. De	

The foregoing affidavit, changed to suit the facts, should be made by a commissioned officer of the Company or Regiment.

If the affidavit of such an officer is not obtainable, the following affidavit of three responsible citizens should be furnished:

STA	$\rm FE$	Ú٢	GEORGIA,		
				County	

PERSONALLY came

citizens of

county, in said State,

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

and know that he received the wounds (or contracted the

diseases in the inilitary service, as stated by him in the foregoing affidavit, that said wounds for disease a comanients, disables applicant, as stated by nim; that said applicant is a bina fide citizen of this State, and results in County, and we are well's tisfied that are the state-

ments in his aibidevit are true

Sworn to and subscribed before me, this

STATE OF GEORGIA. Freserie County.

Personally comes before me W. Lauchner Ordinary of said county. Mr. A le halolis and N. Q. Dofe both known to

ine as reputable physicians of said County who, being severally sworn, say on oath that they have arctuily examined Mills Ray and after such examination say that the

appacani bas been injured as tollows from the torner through The wylet formore distributing The

West and rendering the right have

Sworn to and subscribed before me, this My A bhildray M. D.

25 day of Frete

M'L Louelin

NOTE - Dic physicians will state fully the extent of the wound and the disability resulting therefore

STATE OF GEORGIA Freelow County

m. L. Lachen

Ordinary of said county. do certify that I am well acquainted with W. M. . Range

applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this county. Lake certify that the ferrigoing witnesses are persons of respectability, and that their statements are worths of full credit and belief

I further certify that W. Lo. Ho win before whom the foregoing affidavits were made and power of attorney was signed, in a . F. F. of said county, and that the said affidavits and signatures thereto are gengine

Given under my official signature and scal, this // day of March 1888 mo to de allum

Ordinary Franklin County

POWER OF ATTORNEY

#### STATE OF GEORGIA

County.

Know all men by these presents, That I

county, in said State, do hereby appoint

my true and lawful attorney in fact, for me and in my name to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confed erate States (or of this States, 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

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

money which may be coming to me for the reason aforesaid

Executed in the presence of us

L. S.

APPLICATION FOR ALLOWANCE
ON THE ROOM OF 20. 20. 18. 1825

Amount of Warran. Hely Exp
Entered on Record.

BOCHERANY EXPORTING DER MATEUR.

MATEUR OF SESSET.

BOCHERANY EXPORTING DER MATEUR.

STATE OF GEORGIA.

PERSONALIV appears W. M. Mary of Multon county,
State of Georgia, who, being duly, sworm says on oath that he is a bona fide citizen and resident of said State, and has been such continuously since the Movelluber in 1865; that he enlisted in the military service of the Confederate

States (or of the State of Morth Carolina ) during the war between the States, and served as a friends (in Company & of 42 in Regiment of Worth Carolina Yolunteers Waltering is Brigade: that whilst engaged in such military service.

State of Virginia on the 44th day of Charlest 1864, he was wounded as follows: A bis Carolina Shell Monet his right arm between the states of the said of the said

Deponent desires to participate in the benefits of the art, approved October 24, 188, and the Act amendatory thereof, approved Dec 24, 1888, and makes application for the allowance to which he is entitled for the year ending Oct. 20, 1880

the day of Francy 1889 milian in Sirry,

NOTE. State fully nature of wound or character of disase which sauses the describing and explain particularly the extent of the disability.

#### STATE OF GEORGIA,

Francis County.

PERSONALLY comes before me county, Dr. MEAL Popel and Dr. M.A. Children, both known to me as reputable physicians of said county, who, being so rerally sworn, say on oath that they have carefully examined W. M. Mary and after such examination say that the applicant has been injured as follows:

The property and distributed with the form the bring form and the said the said the said that the first that the said the said that the said the said that the said the said that the said that the said the said that the said that the said that the said the said that the said that

Sworn to and subscribed before me, this facial & long the D. had a day of Free 1889 Wood, Children of the D. W. L. Co. australian Ordinary.

Norm.—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,	) :	MEMORIA.	STATE OF
Hallon (	ounty.		7 4
1 m. L. 6	alkin	هينينهم 🔆 🔾	of said county,
do certify that I am well acquainted	with more	Me. The	or said county,
applicant in the foregoing affidavit, a	ind am well satisfie	d that the stateme	nts mad 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 t		sides in this count	y. I also certify
that the foregoing witnesses, co-wit:	7	2) 33 9.00	fe onge
m. M. lohen	dip		2 " . Y . J . To go .
****	***	h	
are persons of respectability, and that	t their statements a		credit and belief.
I further certify that		before who	m the foregoing
athdavits were made and power of atte	orney was signed, i	s a.	100 Table 10
of said county, and that the said affid  Given under my official signature	avits and signature	s thereto are geny	ijaye.
conventing of the signature		day of Fin	
		•	_,_,
	Ordinary	Freie	County.
			)
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POWER	OF ATTORI	NEY.	,
STATE OF GEORGIA,	ř		
( 6	ounty.		
KNOW ALL MEN BY THESE PRES	SPATS That I		
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county, in said State de hereby appo	int		
of	my true	and lawful ation	ney in fact, for
ms and in my name, to receive and rec	eipt for whatever a	mount of money I	may be entitled
to from the State of Georgia by reason	of the injury receiv	ed as aforesaid in t	he military ser-
vice of the Confederate States (or of the	nis State), as stated	in the foregoing a	ffidavit; hereby
authorizing my said atterney to rectip	t in my name for a	by Warrant that m	ay be issued by
In witness whereof I have herean	to set my hand an	ing to me for the r	eason atoresaid.
day of	-00	a adei, ciris	a where the state of
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	County, Geo		
War Draw Same Committee on	County, Geo	Bulle 1 - and an any	OFF HT - ATOM

#### NOTES.

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

2. The law makes no allowance for an arm or leg, unless the arm or leg has been ren-

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

3. It will not answer to say that an arm is "substantially uscless 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 uscless."

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 uscless."

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

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

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

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

#### STATE OF GEORGIA, Fullin County

or L. 10 alpm Ordinary of said county. do certify that I am well acquainted with Jon ile, Ran. applicant in the foregoing affidavit, and am well satisfied that the statements mad by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

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

signatures thereto are genuine

Given under my official signature and seal, this day of Federal 1890

Ordinary Bucken

applicant in the foregoing affidavit and am well satisfied that the statements made in 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 nimself 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 signatures thereto are genuine

STATE OF GEORGIA.

Fuller County

Given under my official signature and seal, this 4 day of Fred 1801

mx le cuisson Ordinary The delia

m Llo outher Ordinary of said County,

do certify that I am well acquainted with Brestern de, Rang the

of said County, and the said affidavits and

10 1001 H3

FOR Applicants Heretolore Allow	ved Pensions.	ror applicants he
STATE OF GEORGIA,	* t	STATE OF GEORGIA,
<b>6</b>	100	Fuller Count
Frellow County.	a	Personally appears Will a
Personally appears mule. Rang of State of Georgia, who, being duly sworn, says on oath that	Thullow county,	County, State of Georgia, who, being d
State of Georgia, who, being duly sworn, says on oath that	the is a bona fide citizen and	resident of said State, and has resided th
resident of said State, and has been such continually since the		day of Mrselin 186
		federate States (or of the State of
federate States (as of the State of	) during the war between the	States, and served as a Down
States, and served as a Private in Company	, of 42 th Regiment	of Volunteers
of Northbarlow Volunteers Warting 's	Brigade; that whilst engaged	in such military service at the battle of
in such military service, at the battle of Peterstern of Va on the day of Ser	in the State	of va on the
wounded as follows: See What Commend	1864, he was	wounded as follows: Com al
woulded as lollows:	at make	anne Charles
arma rendering the stem	mendel	and grandal
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Deponent desires to participate in the benefits of the Ac-	t approved October at 1885	Deponent desires to participate in and the acts amendatory thereof, and ma
Deponent desires to participate in the benefits of the Acand the acts amendatory thereof, and makes application for entitled for the year ending October 46, 4890. I have heret	the allowance to which he is	for the year ending October 26, 1891. I
of dollars.	piore been allowed a pension	teff-
Sworn to and subscribed before me, this the	Me Ray	Sworn to and subscribed before me,
day of / Less and 189 b	mina	In day of Face.
() r. L. Lachelan		melecula
NOTEState fully nature of product constructor of disease which causes the disability	said explain particularly the extent of	Note. State fully nature of wound or character of the disability, resulting from the wound or disease.
		the discounty, resulting from the wound or discase.
POWER OF ATTOR	RNEY.	POWER
STATE OF GEORGIA		STATE OF GEORGIA,
County.		
KNOW ALL MEN BY THESE PRESENTS, That I,	!	County
of	1	Know all Men by these Pres
county, in said State, do hereby appoint	<b>!</b>	OI
	d lawful attorney in fact, for	of
me and in my name, to receive and receipt for what ever amount	t of money I may be envitled	me and in my name, to receive and receip
to from the State of Georgia by reason of the injury received service of the Confederate States (or of this State), as state	d in the forestolist wasdaust.	to from the State of Georgia by reason of of the Confederate States (or of this State
hereby authorizing my said attorney to receipt in my name friested by the Governor, or for any sum of money which may be	or any Warrant that may be	ing my said attorney to receipt in my nam
aloresaid.		nor, or for any sum of money which may  IN WITNESS WHEREOF. 1
IN WITNESS WHEREOF, I have hereunto set	my hand and seal, this	day of
day of	189	day of
Parametria de minera de	[L. B.]	Executed in the presence of us:
Executed in the presence of us:		F. 33. 42.
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Soud money in me as follows, by		Send money to me as lonows, by
,to	P. O.	Ex Colorado

County, Georgia.

eretofore Allowed Pensions. in Me. Rargos Thelon duly sworn, says on oath that he is a bona fide citizen and herein continuously ever since the 22~ f that he enlisted in the military service of the Conduring the war between the in Company 8, of 42th Regiment s Brigade; that whilst engaged Springage that whist engaged in the State left day of legand 1864 he was here wind through upon the state with the was the state with the was the state with the benefits of the Act, approved October 24, 1387, akes application for the allowance to which he is entitled have heretofore been allowed a pension of are diese of disease which causes the destility, and explain particularly the extent of OF ATTORNEY. ents, That I. ... County, State of Georgia, do hereby appoint my true and lawful attorney in fact, for pt for whatever amount of money I may be entitled the injury received as aforesaid in the military service e), as stated in the foregoing affidavit; hereby authorizne for any Warrant that may be sued by the Goverbe coming to me for the reason aforesaid. have hereunto set my hand and seal, this County, Georgia.

STATE OF GEORGIA. Hullon-Countr. m. C. Couchning Ordinary of said county. do certify that I am well acquainted with muo. Run, applicant in the foregoing affiliavit, and am well satisfied that the statements made by him in his and affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he repesents himself to be, and that he resides in this county. Given under my official signature and seal, this for any of ellound 1892 Ordinary Andin County.

# For Applicants Heretofore Allowed Pensions. STATE OFICEORGIA. 1

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from the Sta	y home, to receive a te of Georgia by rea rate States (or of this rney to receipt in my of money which may	son of the initial	matever amount	of money I ma	y be enti
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* **				< 1	syr or a
1000 1000 1000 1000 1000 1000 1000 100	No. 123 C. Proplication for Allow	For the Van Engine Oceans 24, 1989.	Applicant, Maller Nowborg	Entered on record, J. V.	WARRANT HANDED TO
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POWER OF ATTORNEY. STATE OF GEORGIA, )

For Applicants Heretotore Allowed F	ensions.
STATE OF GEORGIA,	
Personally appears 12 22 4	
or Staff 2 11 County, State of Georgia, who, being	du'y sworn, says
on oath that he is a bona fide itizen and resident of Georgia and has been	such continuously
	that he enlisted
in the military service of the Confederate States for of the State of during the war between the States, and served as a service of the States of the States and served as a service of the States of the States and served as a service of the States of th	(ب
during the war between the States, and served as a	in Company Z.
of ~ _ the Regiment of _ / . Volunteers Sen _ /	Marken 's
Brigade that whilst engaged in such military service at the battle of	
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in the state of the state of the same	yar cler
December 1 in a control of a co	
Deponent desires to participate in the benefits of the Act of proved Octol the acts amendatory thereof and makes application for the a lower or to which	when a marisha i for
the year ending October 26, 1802. I have heretofere been allow Carpension a	et
1 12 Dollars for 1891	
Swor to and subscribed before me this the? Or ((C)	0.
Swor to and satisfactions before me this the? Or. (1654)	7)
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POWER OF ATTORNEY	
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STATE OF GEORGIA.	
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Know all Men by these Presents That i	
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County, in said State do hereby appoint	
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one and in my name, to receive and receipt not whatever amount of money I it is the State of Georgia by reason of the higher received as atmessaid in the	n litary cornice of
tac Confederate States (or of this State), as stated in the foregoing affidavit. I	creby authorizing
my said attorney to receipt a my name for any Warrana that may be issued or for any sum or noney which may be coming to me for the reason aforesaid	by the Governor,
IN THINE S WHEREOF, I have hercunto set my hand and seal this	
day of (892	
	[' 8 ]
Executed in the presence of us	
DIRECTION.	
Send money to me as follows, by	
to	P O

-County, Georgia.

# For Applicants Heretofore Allowed Pensions. STATE OFGEORGIA.

Fuller County.		
PERSONALLY appears It. M. Rany	of F1	allen
County, State of Georgia, who, being duly sworn, s	Tre on oath that he is - /	AUW.
resident of said State, and has resided therein contin	uously ever since the	201
day of Aovember 1865; that he	enlisted in the military	service of the C
federate States (or of the State of	during th	ne war between the
States, and served as a	in Company To	c Mand .
Villagrana Volunteers // Ct	hi 's Brigade; the	it whilst engaged in
such minutary service at the battle of		in the State
of Pinging, on the 24	day of Proper	186%, he was
wounded as follows: an Aight and	as almost	losning
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(U)Deponent design to anti-		
Deponent desires to praticipate in the benefits of the acts amendatory thereof, and makes application	of the Act, approved Octo	ber 24th, 1887, and
the acts amendatory thereof, and makes application the year ending October 26, 1893. I have heretofor	re been allowed a pension	n of.
Jarry dollars (	or/892 A	
Sworn to and subscribed before me, this, the	mul Ro	(Am
day of March 1893.	much	1)
m. L. Le ailma Con	Leice	
Note.—State fully nature of wound or character of disease which ca disability, resulting from the wound or disease.	uses the disability, and emplain par	Moniarly the extent of the
	*	
STATE OF GEORGIA,		
Frankler Gowerty, }		
1. H. L. Calkon	Ordina	ry of said County
lo certify that I am well acquainted with	16 Ran	the
applicant in the foregoing affidavit, and am well satisf		
said affidavit are true, and that he is disabled, to the e		now he is the in-
lividual he represents himself to be, and that he resid	es in this County.	
I further certify that	. '1	
my said atterney to recelle a my mane to my way	nd power of attorney	was signed, is a
the Confidence of the confiden	afsaid County, and the	said affidavits and
Boance december & Bearing.		for the second
Given under my official signature and seal, this	150 day of Mary	JE PILIVE.
One and the second seco		
and the second s	D. do que	ary tolore " "
Ordingry	Fullon	County.
		,
STATE OF GRORGIA ) 👵 🙄		
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## POWER OF ATTORNEY.

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CCUNTY

Know all Men by these Presents. That I.

County, State of Georgia, do hereby app	mint	* * * * * * * * * * * * * * * * * * *
of .		and lawful attorney in fact, fo
me and in my name, to receive and rece State of Georgia by reason of an injury	received as aforesaid in the milita	ry service of the Confedera
States (or of this State,) as stated in ney to receipt in my name for any Warr which may be coming to me for the reas	ant that may be issued by the Gove	
IN WITNESS WHEREOF, I ha	we hereunto set roy hand and seal,	this.

day of

189

Executed in the presence of us

DIRECTIONS

Sent money to me as follows, by

to

.P. O.

County, Georgia.

Soldigr's PRESIDE.

Soldigr's PRESIDE.

Soldigr's PRESIDE.

Soldigr's PRESIDE.

Sording Particle Inspectional.

W. H. HARRISON.

Sording Executive Inspectional.

WARRANT RATICED TO

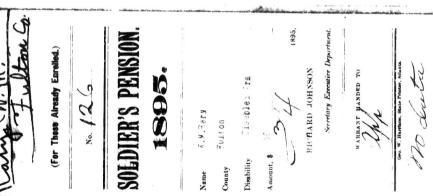
WARRANT RATICED TO

WARRANT RATICED.

On W. Marrian Reservant, America.

## POWER OF ATTORNEY.

STATE OF GEORGIA,		
C	County, S	
KNOW ALL MEN BY TH	IESE PRESENTS, That I,	(M. 7)
Bernard Bernard Art and Branch Bernard	of.	
County, State of Georgia, do he		
of		by true and lawful attorney in fact, for
State of Georgia by reason of an States (or of this State) as stated in my name for any Warrrant the be coming to me for the reason a	injury received as aforesaid in the in the foregoing affidavit; hereby at may be issued by the Governo	f money I may be entitled to from the ne military service of the Confederate authorizing my said Attorney to receipt or, or for any sum of aroney which may and seal, this
dey of	1895.	
Executed in presence o	of us	[L. 4.]
and the second s	)	
	)	
en:		
	DIRECTIONS.	
6		
Send money to me as follows		
Send money to me as follow.	to County, Georgia.	P.O.



1

## For Applicants Heretofore Allowed Pensions.

of	Fulton
orn, says on oath that he is a	
entisted in the military ser	vice of the Con-
) during the	war between the
	43md Regiment
*tin 's Brigade; that wl	nilst engaged in
	in the State
	1
est losing the use of	san 9
fits of the Act, approved Oct	tober 24th, 1887.
pplication for the allowand	e to which he is
I have heretofore been allo	wed a pension of
s, for the year 189	
he lon las	() ()
14.	1000
7,47.	" /
mary)	
which causes the disability and explain	particularly the extent
P	
	orn, says on oath that he is a rein continuously ever sinc endsted in the military ser

STATE OF GEORGIA. Filton County.

day of

W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with WaMsRary applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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

Affix / your seal bers

M. L. Calhan

Ordinary

County.

# For Applicants Heretofore Allowed Pensions.

,	
STATE OF GEORGIA,	
Fulton County.	
Personally appears W.M.Rary of Wulton	
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citize and resident of said State, and has resided therein continuously ever since the lay of November 18 65; that he culisted in the multitary service of the County of t	n
federate States (or of the State of ) during the war between the	ne.
States, and served as a Private in Company 3, of 10 nch Regimer	n f
of North Carolina Volumteers, Wartin 's Brigade, that whilst engaged i	
such military service at the battle of in the Star	
Catho Ingrid	
	as
wounded as follows: In right are symbol 1081ng the deep of ame	
Deponent desires to participate in the benefits of the Act, approved October 24th, 1885 and the acts amendatory thereof, and makes application for the allowance to which he mutitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of Fifty dollars, for the year 180 ⁴ Sworn to and subscribed before me, this, the day of varch 1895.  Act of the year of year of year of year of the year of disease which catsor the disability and explain participants, the sale	is
f the disability, resulting from the wound or disease.	int
STATE OF GEORGIA, Pulton County.	
I, W.L.Calhoun Orc.nary of said Count	ν.
W M Port	ne
applicant in the foregoing affidavit, and am well satisfied that the statements made by his	
n his said affidavit are true, and I know he is the individual he represents himself to	
and that he resides in this County.	e.
Given under my official signature and seal, this 123 day of 1895.	
Afix Jour Sun Dr. L. Louch	

Ordinary____

County.

POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA, STATE OF GEORGIA, County. County hereby authorize. _hereby authorize_ of of... to receive and receipt for the pension paid hereon and request that he remit same to to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day ef 1896 day of 1.8.1 [L. S.] Executed in presence of us Executed in presence of 1330101 Fuiton

# For Applicants Heretofore Allowed Pensions.

STATE OF GEO	RGIA,	)	
Fulton	County.	Ì	
personally appears	W.W.Rarv	of.	Fulton
County, State of Georgia, wh	o being duly sworn		a bona Sde citizen
and resident of said State, an	d has resided there	in continuously ever si	nce the 20th
day of "Cvember	1855 ; that he en	nlisted in the military se	ervice of the Con-
federate States (or of the Stat	e of		he war between the
States, and served as a	Private Warbi	in Company , o	f th Regiment
· Oranic	cers,	_s Brigade; th	at whilst engaged
in such military service in the	ic State of	, on the	e dav
in right ru lmost asi	ne use of same	injured or diseased as f	ollows ·
Deponent desires to parti	ornote in the best		
and the acts amendatory there	cipate in the sener.	discretion for the panels	ctober 24th, 1887,
entitled for the year ending	October 26th, 18	196. I have heretofore	as a resident of
	y been allowed a per		Fifty
dollars, for the year 189 .		6	
Sworn to and subscribed t	pefore me, this, the	1 Willet &	)
16 day or *** DV	1896.	mart	( )
M. L. Coucher	in Ord.		
Note-State fully the nature of wound of the disrbility, resulting from the wound of	or character of disease which i disease.	rauses the disability, and explain	particularly 'ne extent
STATE OF GEOF	RGIA,		
Fulton	ounty. I		
I.L.Jalhoun		_Ordinary	of said County,
do certify that I am well acquain		F.W.Parv	the
applicant in the foregoing affid	avit, and am well sa	atisfied that the stateme	nts made by him
in his said affidavit are true, and and that he resides in this Cou	id I know he is the	individual he represen	ats himself to be
		nature and seal, this	262.
day of	nebv	1896.	
After	(7- (	2	
your (	1. K	Louch	· · · 1

County.

# For Applicants, Heretofore Allowed Pensions.

STATE OF GEORGIA,
Ta (Konner, County,
personally appears 271. Thee hos to the
County, State or Georgia, who being duly sworn, says or eath that he is a home tode covered,
day if 2.7 ?. Is 65, that he enlisted in the military service of the ver
States, and served as a served as a served in Company Control Regularies
federate States for of the State of states, and served as a served
of Cany. 180 %, he was wounded injured or diseased as follows.
monder in tight armen torning.
ace ; vaina
*
Deponent makes application for the pension to which he is entitled for the year end-
ing October 20th. 1806. I have heretofore under said has as a resident of
to County been allowed on in all and
Dollars, for the yea: 189 6
Sword () and subscribed before me, this, the
day of Tag 1800   POST OFFICE March
mon
Note: State buly the nature of wound or obstactor of ditable which causes the disability, and votes a great of the disability resulting from the wound or a sease.
STATE OF GEORGIA,
talkon County.
7 1/ 1/
I. J. Of Stre Cover - Ordinary of soid County.
do certify that I am well acquainted with 17 / 2 / 2 - the
appoint in the foregoing amdavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given nuder my official signature and seal, this
day of 7. 1899.
Affin Comment of the

POWER OF ATTORNEY. POWER OF ATTORNEY. STATE OF GEORGIA, STATE OF GEORGIA, County. County. ___bereby authorize hereby authorize to receive and receipt for the pension paid hereon and request that he remit same to to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this IN WITNESS WHEREOF, I have hereanto set my hand and seal this 1900. day of____ 1,01. [L. S.] [L. S.] Executed in presence of Executed in presence of SOLDIER'S PENS DISABLED

# For Applicants Heretofore Allowed Pensions.

to referred to total a till od of 1 on blomb.
STATE OF GEORGIA,
STATE OF GEORGIA,
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State and County, and has resided therein continuously ever since the interest of the Confederate States (or of the State of in Company of the war between the States, and served as a flerrate in Company of the While Regiment of the Confederate States, and served in the State of in Company of the While ergaged in such military service in the State of in the first of the state of the Confederate States, and served as a flerrate in Company of the While ergaged in such military service in the State of the State of the Confederate States, and served as a follows.  The first of the confederate States of the State of the Confederate States, and served as a follows.
Deponent makes application for the pension to which he is entitled for the year ending October 26tn, 1900. I have heretofore under said law as a resident of County been allowed an invalid bension of
Dollars, for the year 188 9.
Sworn to and subscribed before me, this, the 1772 The and day of 7 2 2 2 2 2 1900.) post office
Note: State field the nature of wound or character of Alexan which sources the disability and a print particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA.
STATE OF GEORGIA,
do certify that I am well ecquainted with 77. Record the
do certify that I am vell requainted with 7. Part the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of march 1900.

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,		
Julion County.	- 7	
Personally appears MM. Raky of		
County, State of Georgia, who being duly sworn, says or oath hat he	is a bona pde	citizen
and resident of said State, and has resided therein continuously ever	since the 2	1)
day of Mr 1865; that he culisted in the militar		
federate States (or of the State of) during	the war betwe	en the
States, and served as a propagate in Company C	of Lh Reg	iment
s brigade;	that whilst en	gaged
of. (14, 9 1864), he was wounded, injured or dist	u the FL	day
i i i i i i i i i i i i i i i i i i i		
wounded left arm.	u wis	nug
drive useless.		
and the there is		
		*
Deponent makes application for the pension to which he is er	ititled for year	r end-
ng October 26th, 1901. I have heretofore under said law	as a resider	nt of
County been allowed a Dollars, for the year 1900;	n mivalid peas	ion of
Sworn to and subscribed before me, this the	₽	
16 Meday of Juney 1961. Postoffice	cary	7
16 Meday of Janey 1901. Postoffice (17)	auta 1	La.
moRibilacison		
Stre Stree fully the nature of the wound or character of disease which causes the di- ducty the extens of the disability resulting from the wound or disease.	sability, and explain	i partie-
STATE OF GEORGIA,		
fullon County.		
I, Juvalive Kurson or and the certify that I am well acquired with T. D. A. a.		
o certify that Vany well associated with The	ry of said Co	ounty,
pplicant in the foregoing affidavit, and am well satisfied that the state	ing.	the
n his said affidavir are true, and I know he is the individual he repre	ments made by	, 11111
nd that he resides in this County.	sents himseit i	to be
Given under my official signature and seal, this	10 Th	
day of Jany 2 1001.		
All Frohn R. We	00-	
		02
Ordinary Tuello	W Co	unty.

## POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

Y			
- 1			

hereby authorize

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

at

FOR THOSE ALREADY ENROLLED

IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of 1902.

Executed in presence of

__[L. S |

(FOR THOSE ALREADY ENROLLED.

DIER'S PEN

DISABLED

OHN W. LINDSEY

1. 5

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

hereby authorize

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

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

day of ...1903,

Executed in presence of

HER'S PENS

DISABLED

For a MESERY CONTRACTOR OF BEACHURY

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. County.
Personally appears WM Cary 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 20
day of 1865; 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 factorate in Company &, of 42 th Regiment
Volunteers, Vw s Brigade; that whilst engaged
in such military service in the State of, on the 24day
of Cling, he was wounded, injured or diseased as follows:
and the second s
Wounded Left arm
A STATE OF THE PARTY OF THE PAR
All and the state of the state
The distribution of the state o
The state of the s
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1902. I have heretofore, under said law, as a resident of
Fill ton. County, been allowed an invalid pension of
Sworn to and subscribed before me, this the
day of JAN 13 1902 1909. Post-office
Vilgenson
Norg. State fully the mitter of the wound of character of disease which causes the disability, and explain puriodistry the agrent of the disability resulting from the wound or disease.
STATE OF CHORGIA,
County. Committed former
Ordinar of said County,
do certify that I am well acquainted with W Mary
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this
day of JAN 13 1902 1902.
AAL O. LOUIS'AN'
Some Williams
Ordinary Hulton County.
Rove Fill all blatta sell of Company and Regiment.  Rove All vouchers and affidavite must bear date after January 1, 1902.
ON WEE OF ATTORNEY.

## FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

/
STATE OF GEORGIA,
County.
Personally appears, WM Mary of
County, State of Georgia, who being duly sworn, says on oath that he is a bonn fide citizen
and resident of said State, and has resided therein continuously ever since the 20
day of Mov 1865; 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 frivate in Company & of 42 th Regiment
of Mes Volunteers Fa- 's Brigade; that whilst engaged
in such military service in the State of , on the 24 day
of Gueg 186 4 , he was wounded, injured or diseased as ollows:
Wound in left ann
coonica me ceps ann
The second secon
To the state of th
Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1902.
selvis)
Sworn to and subscribed before me, this the
day of JAN 21 1903 1903. Post-office
- Williamond
Norm.—State fully the nature of the wound or character of disease which causes the disability, and explans numbers of the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA, )
County
I John O Willinson
I, John Milinson Ordinary of said County, do certify that I am well acquainted with WM Rang
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 21 113 a (fone)
Jan:
feel seel county.

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

3	 Brest.	5637	

Clerk's Certificate that - Man is a fustice of the Peace, used to attach to a Magistrate's Warrant, Insurance Papers, and Probating Deeds, &c., when sent out of the County.—France and for rate at Harring's Francing House, Weldon, S. C. & W. S. Deed

## State of North Carolina,

State Of Morth Carolina,

Legicie County:

A College Call a above granum signature angears to the to going

College Call a above granum signature angears to the to going

Coule according to stress the Peace for said County, and 62 faith, and

coule accounts his affectable to

the control of the distance of the county of th

Audited Fcb. 6 1889

Fulton

Maimed Zoldiers.

Loucher No. 98

Anoun 3 GC

wand so It M. Kling

Misakla

Acely 6.

included in Warrant No

issued in Transport

1.87

A CRECAL - LERK

A County of State Printer Constitution Scientifical

Million !

STATE OF GEORGIA. EXECUTIVE DEPARTMENT & Allanta, Ga. Hebry 6 Mr. M. M. Ray Huller 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 High am Moubled the is emitted to receive the sum of Hifly 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 within you had return same to Executive Department for warrant. GOVERNOR by the Governor Warner

per above voucher, this Of Min & Ready

Dollars

1389.

Maimed Soldiers. 1891 Voucher No. 128 Maimed Soldiers. Amerini & 50 Paul to MTN Rang For Right arm Pad to Min Il Rang desables For line de'd Exel. 11, included in warrant Included in warrant No issued a reasurer issued to Treasurer WAPRANT CIERL WARRANT CLERK applicant. appleant

Allania, Da. Hebry 4

Mr. M. M. Pany Bullin having filed

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

Heart Um disabled

He is notified to receive the sum of type

such disability, the same being the allowance due of the four enting October 24 18 90

The Treasurer well pay the same and hold his receipt on this voucher and return same

to Executive Department for warrant

( Wolfekarrison

150

Kttin

RECEIVED OF STATE TROUBURER, R. U. HARDEMAN

Wifly y out

Dollars.

per above voucher, this

STATE OF GEORGIA.

EXECUTIVE DEPARTMENT.

Atlanta Ba Fel 4 189:

Mr. William M. Rang having filed his application in the Executive

Department for an allowance under the Act approved October 24, 1887, as amended by Acts

approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for

Um dis He is entitled to receive the sum of Keffy

Dollars

of the County

for such disability, the same being the allowance du are the year entire October 24, 1691

The Treasurer will pay the same and hold his receist of the vomber and return same to

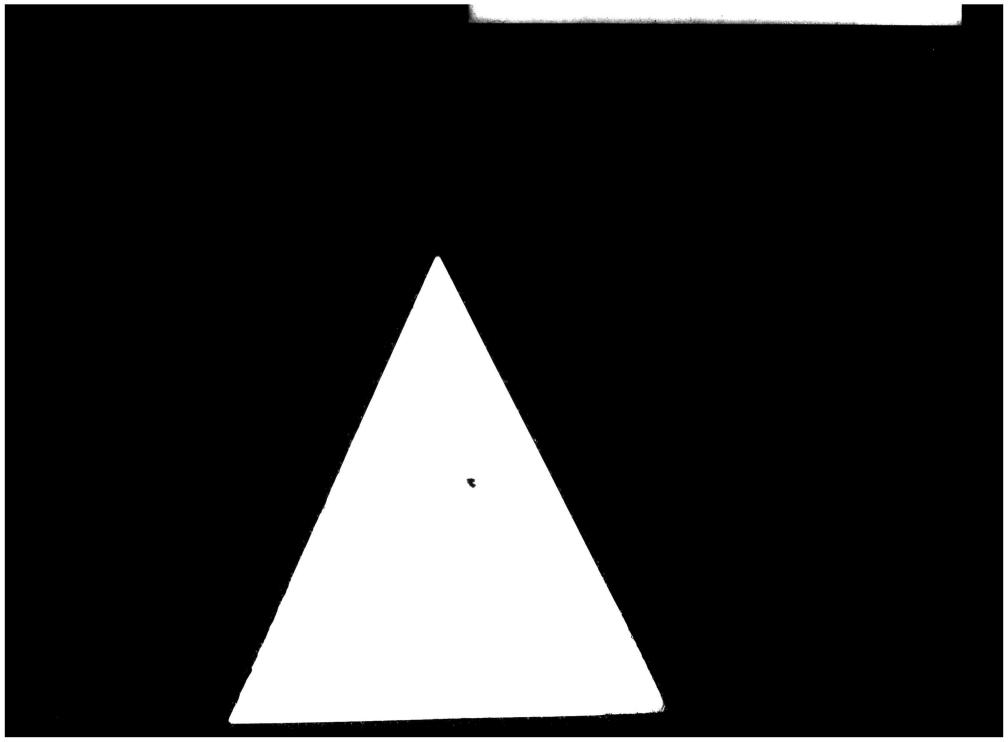
Executive Department for warrant.

Marisa

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

Dollars,

1801



Grebury, m. W. Grivate, Co. J. Collis 4-1864, "alread Feb. No 333% on detail duty The foster July Sept. 20.1864" Widow's Pension UNDER ACT 1910 mitricae; culistos COURTY Froston Raine Par Rest afer Name Many Bylasting 18-1862, " Sud A, act Adsords abon het Widow of the Ul Rosbury annendered, Green bore, n. C. afar. 26 -18635 Costs o egion J. W. LINDSEY, 10/29-1918

arole. 5x"- 8ans The look of the ... Widow's Pension UNDER ACT 1910 N. 3333 0.0 J. W. LINDSEY,
Commissioner of Pension 3

Application for rension by a Widow Under Act of 1810Questions for Applicant.
STATE OF GEORGIA,
Fulton County.
7
Personally before me comes
of1910, and submit testimony to make out the same, true answers makes to the following questions to-wit:
1. What is your name, and where do you reside? Mars 6 24 1 how attack you
How long and since when have you been a continuing resident of the State of Georgia?
3. When, where and to whom were you married? Let face to ga to march 11/
4. When, where and in what Company and Regiment did your husband enjist as a soldier in
Confederate Army of Georgia Militia? (State the arms and class of Service) & 5714 francy of white Army on attack and the arms and class of Service) & 5714 francy of
5. When and where did the Commands of your nusband surrender or dispharge from the army?
6. Was your hysband personally present at the time of the surrender or discharge of this Com-
mand?
7. If he was not present state clearly where he was:
8. Where was his command when he left?
a. For what cause did he leave his Command?
b. By whose authority did be leave his Command?
c. For how long was he granted leave of absence?
e. What was his physical condition when he left his Command?
t. What effort did he make to return to his Command?
g. In what way was he prevented from going back to Command?
h. Was he captured by the enemy at any time?  If so, when and where captured and where held as a prisoner, and when and for what court
i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
J. When and where did your husband die? atlanta Ga 1872 has 186
k. N'ere you residing together when he died?
1. If not, how long had you resided apart?
9 What property of any description did you own, hold or control for your use and its cash
Value Nov. 4, 1908? (State same by items and where situated) Life autale in \$74. True
,
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was re-
ceived for it and what did you do with the proceeds thereof? (Give items and cash value.).
•
11. What property of any description of any value have you now? with restarts
Give list and cash value hosail. The manager City Catalant to Ja.  12. What are your annual earning or income from any source and their value?
lone whatever except \$180 for 16 folice soulles
13. Have you or your husband heretofore been paid a pension by the State?
If so, when and for what cause were you or your husband placed on the Roll?
Sworn to and subscribed before me this the
Welver R Mailute Ordinary
of County.

STATE OF GEORGIA,
Luston County. OF V
Personally below me comes O Do Dalingry who after
being duly sworn true enswers to make, to the following questions, answers as follows:
1. What is your name and where do you reside? Latte Nalvigery
at the
7
How long and since when has she continuously resided in this State? (Give date.)
Daniel 10,1812
4. When and to whom was she married? M. W. Trechary How do you know? I togget destract grant
5 How long and since when did you know Most to Merchang her
husband Estie me Market Conting to years Rue luke to Walter same 180
When and where did Millarkeny died is 1872
the husband of Applicant die?
7 Were the applicant and her husband living together as husband and wife at the date of his
the state of the s
a If not, how long did they live apart before his death?
Were they divorced?
9. When, where and in what Company and Regiment did Mill ( entry enlist?
ter y boson signer Calvary allow I willing
10. Were you a member of the same Company?
11. How long within your personal knowledge did he perform actual military service with his
Company and Regiment From transmistories to the se for an and seed
18. When and where did his Compand surrender, and was discharged?
Enhuson surrender Greenstone MG.
13. Were you personally present when it was surrendered? Life where
were you
/ 11 11 11 11 11 11 11 11 11 11 11 11 11
11 to as the husband of applicant personally present at surrenger ess of recollection of not
where was hell where and for what
cause did he leave Command? (Give date.)
authority del he leave his Command?
long was he gra ited leave?
The state of the s
4,101
15. For what cause, if you know of your can anowledge, was he prevented from returning to
hts Command?
1d. What effort did he make to return to his Command and how do you know this? Of your
own knowledge or how?
Swern to and subscribed before me this the
day of Tay of 1976
Wellin Rulailut 6 Ordinary
our to and subscribes letfore her lingue

County.	
Personally before me comeswho	o on oath says that they
are freeholders of said County and that they know of said County and know, what property she owned or 4th Nov. 1908, and its c	
by Schedule (A) as follows	
Personal property	\$
Notes and accounts due	\$
Total.	\$
Schedule (B).	
We know the property sold or trop way since Nov. 4th, 1908, its cash  Personal property	
Manor Notes and Accounts	\$
Schedule (C).	φ
We also know that property she has now in her possession, use and co	introl to-wit:
Acres of land worth	\$
Ho: ses and Mulcs	\$
Cows and Hogs	\$
Other Property	\$
Income and Earnings.	\$
Total Value of all property and effects	\$
Sworn and subscribed befor, me this the	
Ordinary	
ofCounty	
ORDINARY'S CERTIFICATE.	0.0
STATE OF GEORGIA.	*
( - )	
1. Althur Blue Blue Cordinary o	said County do certify
that, I kno where the species the person she represents herself to be and she is a bone for continuing	icant for pension. She
	resident citizen of said
County and was on the 1th Nov. 1808.  That I also know. L. Dalvigurg	Lo original or be assessed
	he witness who swears
to the service of husband, and freeholders. That all of them are now residents of said County and were du	y sworn by me before
signing the foregoing affidavits and that they all are truthful, trustworthy a entitled to full faith and credit.	nd their statements are
	Returned for Tax is for
1908 1 600 for 1910 1 600 for 1911 177.5 for 1912 1 750	
for 1914 8 for 1915 \$ 72 0 for 1919 \$ 6.50 for 1917 \$ 73 0	1918-770
Sworn under my hand and official and of office this	day of
Oct 10 0	1
(SEAL.) action fly Carles	Ordinary,
tullo	County.
(SEAL.) MOTES 1. Before any questions are snewered the Ordinary shall swear applicant and the wi	these in the following words
NOTES 1. Before any questions are snawered the Ordinary shall swear applicant and the will "You do solemnly awear that you will true answers make to each of the questions you shall give will be the trutt. So help you God."?  2. Additional affidavite may be attached if blank spaces are insufficient.	asked you and the evidence
Additional affidavits may be attached if blank spaces are insufficient.     Only widows who married prior to first January 1870, are entitled.     All effidavits must be made before the Ordinary.	
All affidavits must be made before the Ordinary.	

STATE OF GEORGIA,

All effdavits must be made before the Ordinary.
 Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

El Ordinary

1710

.....County

Sold to

1929

#### **Application for Pension Due Deceased Pensioner**

(UNDER ACT 1904) (To pay expenses of last illness and funeral)

Cordinary Ordinary Follow B Rasburg

Date of Death Sept 15 Amount \$/00 00

Approved and ordered paid OCT. 15', 1929 JOHN W. CLARK,

Commissioner of Pensions.

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

#### Foreston what H. M. PATTERSON & SON

Spring Hill at Jenth

ATLANTA, GA.

for fune, I convise of Mr. May Bayer Barry

in the first covine Indusing Could

and 47 11 to be some buds a second contract

to ve and Listing

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TA OF ALLES

Court to lefter our block Copt

Negrory Public, Georgia, State at Large. My Commission I spires Jun 9 1933.

## Marriage License

State	uf	Georg	ta	Fulton	County.

State of Georgia	Fulton C	ounty.	
To any Minister of the Cospel, anthorized to Solemnize.	Zudge of the Superior	Court, Inst	ice of the Peace, or other Person
You are hereby autho	rized and perm	nitled to	join in the honorable
state of Matrimor	my Er. Hans	sell W. Ra	sbury
and	Miss Mar	y F. Harv	rille
facording to the Rites of your Chur	ch, provided there be no	lawfui cause	to obstruct the same, according to
he Constitution and Laws of this St	ate, and for so doing th	is shall be you	ur suficient License.
REBURN THIS LICENSE W	ITH YOUR CERTIF CATE T	PEREON TO M	Y OFFICE FOR PECORD
Given under my Hand and	Seal this minth	dayet	August 1862
1		R. E.	Mangum L. S. Orginary.
I hereby certify that	M. W. Rasbur	Ξ <b>Υ</b>	
and	Miss Mary E. Hs	rville	
vere joined together in the HOLY	BANS of MATRIMON	v Y	
on the tenth day of August	1862 ************************************	₩,	M. Futt, J.P.
State of Georgia,	) ) s. s.	OPDIN	IARY S OFFICE
Fulton Con	inty.	llanta Ga.	, June 10th 1918.
ARTHUR R. MARRUT. C	lerk Court of O	ordinary of sa	id County, hereby certify that the
foregoing is a te	us copy of the Marriage	License and C	Certificate of Marriage of
	Mr.	Mansell W	. Rambury
and and	/ 1188		
B. S. C. L. C.	the same appears of rec	_	110 110 110 110 110 110 110 110 110 110
		,	
Com ( Indiana)		-	nd Seal of the Court of Ordinary,
	the day and year a		Phyarbut
THE REAL PROPERTY.			C. C. ORDINARY

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

(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.	
Personally before me, the Ordinary of said County, comes R. Reg Wull H. M. Gattersona Government of said County, who, after being	ller usix
says that he knew Man Mary & Raslerry of said County, and tha	t said Pensioner
was on the Pension Roll of said County at the time of death, which occurred in Full	len
County, in this State, on the 15 day of Sept	1929
and that pensioner left no widow surviving, and no estate of any value sufficient to pe	y these funeral
expenses, which amounted to the sum of \$27500, per sworn reatements fully	and completely
ITEMIZED hereto attached.	
Sworn to and subscribed before me,	
Chillen R. Malbut Co, Ordinary R. Lee Willer	
County	
(Seal of Ordinary)	
CERTIFICATE OF ORDINARY	
CERTIFICATE OF URDINARY	
GEORGIA, trelton County.  I, Thoo ti Affica , Ordinary of said Co	
that I personally know Rosa e Mullon with the Catterson of Son, w	
citizen of said County, and that said person is of truthful and trustworthy character,	
faith and credit; that I also knew M. C. A. B. Rosburg while ir life an	
the same person whose name appears on the Pension Roll of + Clou	
was paid a Pension of	
the foot of this voucher have been carefully observed in making up this voucher and the	
attached hereto.	omo wiikii bic
Given under my hand and official seal, this	1920
(Oat of Oatloom)	Ordinary
Fulfort	Courty
	Courty
INSTRUCTIONS:  1st. Require those claiming expenses of last illness and funeral to make out their accounts in the	Dr. iteminal form
1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fugiving each tien and the value of it, and each data. 2nd. Each account must be sworn to before the Ordinary, and in the following form:	ny itemized form,
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses	s, as the case may
be) of, who died without owning sufficient property to pay th	is bill.
3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly attached neatly to this blank, after this blank has been properly completed as indicated.	svorn to, and all
4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for money must be paid out until it is returned to you as your authority to make the payment.	approval and no
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.	

C. C. ORDINARY

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

Ole Time		- kis							
mit No	o A A Cekc				With	to receive at	-	STATE	
INDICENT PENSION				Executed in	ess my hand	and receipt for		OF	
1900.	and in			n presence of	and seal, this	the pensaud a		GEORGIA,	
Name Mobs Ralling						llowed and r	County		Power
County Fultan					e-	of equest that a	ty.	-	of Atte
Approved 6/5-1902			·		day of	гети запе			Attorney.
					by	5			
				1	1900	1	berely		
A CHURS			1	1. 8.	)ō.		authorize		

Ti.

County. hereby authorize 1900 ___[L. S.] Excepted in present at

STATE OF GEORGIA.

STATE OF GEORGIA. Hulton County. Robert Rattirue ____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 dependence of the following questions, depones and answers as to I was per solution of the state of the 3. When and where were you torn " 1834 - Chester & Co. 4. When and where and in what company and regiment did you entist or serve to Region 5. How long did you remain in such company and regiment furthe sent sees Surrender at apparentias for 6. When and where was your company and regiment surrendered and discharged Shul 99 1666 at Office cattax Da ". Were you present with your company and regement when it was surrendered " I chao 8 If not present, state specifically and clearly where you were, when you left your command, for what cause and by shose authority. I was there at Survey the and gat Daiale. 9. How much can you carn (gross) per annum by your an exertions or labor thought 820 10. What has been your occupation since 1865; Name little gols taken able 19 Upon which of the following grounds do you base you application for pension, viz. first mage and poverty," second, "infarmity and poverty," or tair i, "blindness and poverty" 2- Lizer. 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 Too the third, state whether you are totally blind and when and where you lost your sight.

29 years Sirrye I have been able to care a suffer of old and infirm, smaller to wark. I broken rile. 13. What property, real or personal, or inflome do you possess, and its gross value " - 1 cere-14. What property, rent 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 : Auch 15. In what County did you reside during those years, and wast property that you then return for faxation Trultan County - no takes - so property 16. How were you supported during the years 1898 and 1899; By my 4 Chillren 17. How much did your support goat for each of those years, and what portion did your souts but thereto. by your own labor or income: Cost about \$600 about \$20 -18. What was your employment during 1808 and 1809? What pay did you receive is each year? 10. Have you a family? If so, who compages such family? (It's their pa are of support " Have they a homestead! Wife and & Children - Wark on Factory 20. Are you receiving any pension? If so, what amount and for what disability " World 21. Have you ever made an application for pension before " No-22. How many applications have you ever made and under what class? Maril Sworn to and subscribed before me this the Rab 1 X Balton & Applies

_, of said State and County, having been presented witness in support of the application of Robert Ratteries under Section 1254, Code and after being duly sworn true answers to make to the following questions, leposes and answers as follows What is voir name and where do you reside? Take Hills of the Are you requainted with Frahert Ratteries In long have vou known him " about 50 sears Where ploes he reside, and how long and since when has he been a resident of this State? Stantu la - Lived in la about 30 season When, where and in what company and regiment did he callet, and how do you know 1862 - Chester & 6. 602" 17 56 Regnet. Were you a member of the same company and regiment? I was How bong did a perform regular military duty? about 3 seas-7. When and where was his command surrendered ? Suit 4th 18-65. 25 - Chramattax Red 8. Were you present when it surrendered? " Was applicant present" 1500 10 It he was not present, where was he " He was present When did be leave his con mand 1 /8-65 The what authority he lets Darale Mondo you know all of the mas member of Same Regnet and present 1:. What property, effects or income has the applicant? (Give your means of knowledge.) Me knowled - him - alary . Have brustaling onto sale? 12 What property, effects or income did the applicant possess in 1895, 1897, 1898 and 1899, and wha disposition, it any, did he make it same " Last scattering Has be conveyed away any of his property in the last four years, if so, what was it, and to whom ? Has not carried away any thing What is the applicant's occupation and physical condition " Losuriyan Labor : when able - He is phyrically weally to whan The is all wells shell and infirm How was he supported during the years 1898 and 1899; By his with cine! Children 17. What portion of his support for these two 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 1264, Code" He is ald week full and wifers 19 What interest have you in the recovery of a pension by this applicant? Nous -Sworn to at I subscribed before me, this Moral to the Total Superior of Superi

I Divil Of THE GIOTANS.
STATE OF GEORGIA,
- dultan COUNTY
Personally came before me of Free Man and
A JOSE CR - ALD both known to me as reputable physicians
of said County, who, being severally sworn, say on oath that they have examined carefully
Rolt Ratting applicant for pension under Section 1254, Code, and after
such personal examination sey that his precise physical condition is as follows:
Mear Sighted Two rikes backen
+ Buin in left hill among 1 1 111
is many house 186 also find unable to zame a
turns trung feble no health very poor financity
Suffering with the right hile & right bey also will of
They further say on oath that the physical condition of applicant renlers 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 beare me, this the of H. Fireman Mill
19 than an aux t und
Sworn to and subscribed before me, this they of the terrement that I day of Engalt 1901)
O INARY'S CERTIFICATE.
STATE OF GEORGIA.
Fultari COUNTY.
1. Gran R Mulker 2001 10 Ordinary in and for said County, hereby certify
that the applicant Rall Ruting resides in said County, and has
been a bona fide resident of this State since the day of 1886 7-
and tout the witnesses, viz: - Prinstell - Freezewith Brek
EF BO E
are of trustworthy character, and that their statement have entitled to full faith and credit.
I further certify that before answering the thregoing questions the applicant and each witness took
the oath hereon prescribed, and that the full text of the affigavits was read to the applicant and witness
before same was signed.
I further certify that the tax digests of the County sie withit applicant returned for taxation in his name in 1898. White takes
10-11-1
* Till and it is a
Witness my hand and seal of office this 19 day of July
think li lekurson Ordinary,
of Fuelar County.
NOTE.

shall true snawer make to each of the questions asked of you, and the eyidence you shall give will be the whole truth,

#### POWER OF ATTORNEY.

STATE OF GEORGIA,	(	
COUNTY	<b>S</b>	
I.		hereby authorize
	of	
o receive and receipt for the peusion	allowed, and request	that he remit same to
	at	
y		
Witters my hand and seal, this	day of	1906.
		[I, S.]
Executed in the presence of		

Name Coll. atteres

Fullon.

County

Regiment

SOLDIER'S PENSION

INDIGENT

19061

COOK SECTION 1294
(FOR THOSE ALREADY ENROLLED.)

Rottores, Robert

No. 357

MARRANI ISSUED

JOHN W. LINDSEY.

(M. MARRANT HANDED TO

WARRANT HANDED TO

NA CLASSE

THE COMMENT OF SOME

#### POWER OF ATTORNEY.

STATE OF GEORGIA,			
COUNTY			
I		, hereby	authorize
•f			
to receive and receipt for the pension allowed, and	d request	that he remit	same to
at			
by			
WITNESS my hand and seal, this	day of		1907
			[1 5.]
Executed in presence of			

SOLDIER'S PENSION

CODE BROWNER 1884. (FOR THOSE ALREADY EMBOLKES)

NO. 473

Name LOGA, LUTTELLE County

Co. R. Regiment

Commissioner of Peal
WARRANT HANDEID TO

5

WARRANT ISSUED

JOHN W. LINDSEY,

WARRANT HANDED

2000

State of Georgia,	State of Georgia,
Fulton County.	County
Personally appears Sourch Patteres of Fulton	Personally appears lout Kattere of
County State of Georgia who being duly	County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
County, State of Georgia, who, being duly sworn, says on eath that he is a bona fide citizen	and resident of said Coursey and State, and has resided in said State continuously eve-
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
years old and	and by occupation a M. All light that he enlisted in the military service of the Con-
by occupation a, that he entisted in the military service of the Confederate States (or of the State of) during the war between the	federate States (or of the State of ) during the war between the
States, and served for the term of July in Company of the Regiment	States, and served for the term of 3 1/22 in Company of / th Regiment
of 2 still Car of chica, ; that his physical condition is as	of A. C. A that his physical condition is
follows	of T. Lo. ; that his physical condition is as follows: (if all firming 4 form Th
The Inferently and powerty	
the factor of the said the	
that his property consists of the following items:_	that his property consists of the following items:
to the terroring tems.	
	Andread
of the value of Dollars. I am now earning	of the value of Dollars I am now earning
by my labor, Dollars per month. That by reason of his	by my labor, Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or	physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.	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	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 be	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	is entitled for the year 1907. I have heretofore, as a resident of
County, been allowed a pension for the year 1905.	County, been allowed a pension for the year 1906.
Sworn to and subscribed before me, this the Robb was Callered	day of JAn 1907
Ordinary.	Sworn to end subscribed before me, this the day of
Ordinary.	-
State of Georgia.	State of Georgia,
County.	County. Ordinary of said County.
1	County.)
July Ci Said Coulty,	N 1
do certify that I am well acquainted with South Vathere	do certify that I am well acquainted with LOILLE LALLEC
the applicant is the foregoing affidavit, and am well satisfied that the statements made	the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself
by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.	to be, and that he resides in this County.
Given under my official signature and seal, this <u>JAN</u> Mon	Given under my official signature and seal this
day of	day of1907.
and the conserved	J. L. D. 41 1
( Affix )	Affix four Grdinary County.
ordinary Fulton, County	bere County

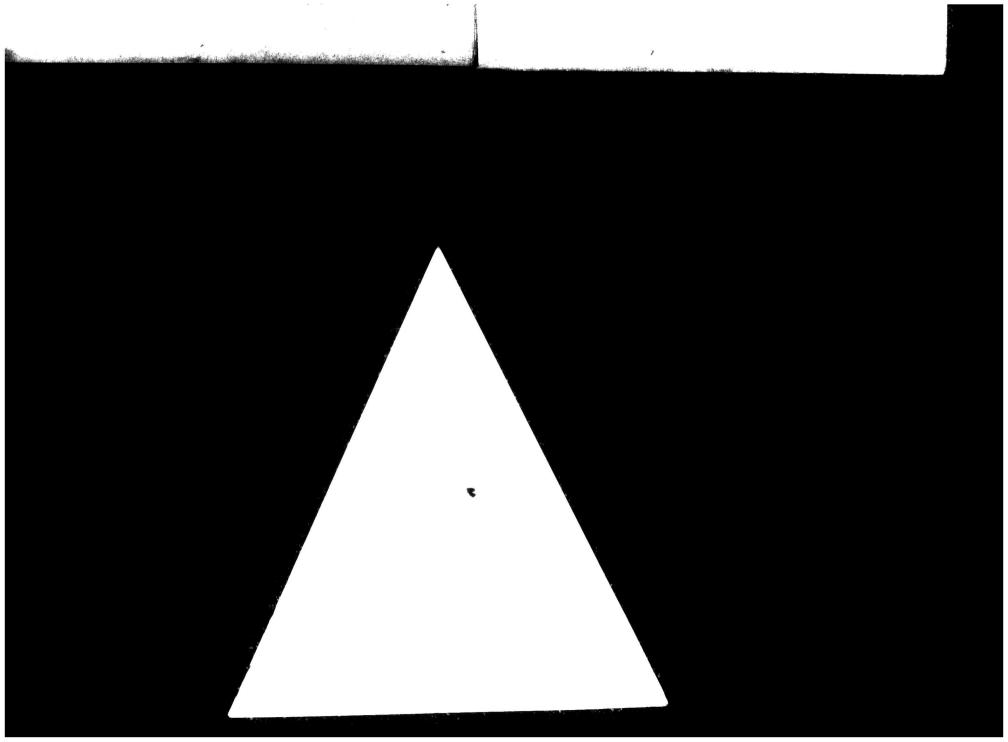
TOUDIAND TO THE TATABLA TAKE WENA HEN I DUDIAND.

Nors.—The blan's spaces must be filled. Nors.—Affidavit should not be attested before January ist, 1906.

rcol, and makes application for the pension to which he ve heretofore, as a resident of_ 1111011. the year 1906. Ordinary. unty. vit, and am well satisfied that the statements made and I know he is the individual he represents himself unty. cial signature and seal this____ 1907. 9.1. 00 yt Ordinary ____County. Norm.—The blank spaces must be filled.

Norm.—Adddavit should not be attested before January let, 1907.

WANNESS AND WHAN TO TAKEN



# OF GEORGIA,

POWER OF ATTORNEY

Veneria office 7
Oursess offin 7/24 7900
Must Klay + Clark
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mand west line !
wand attien Me
May William I
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The state of the s
mile of his oron Ke
order court that
April aras present
me Sot an agreed men
In coffind Infinity
applied as weir prime
Cull I want from coming lais
Cappind atteny said of
A Vindle
Caus of Present
Z (31)
* 3.8

INDIGENT PENSION,

1900.

Name George F Rommets:

JOHN W. LINDSEY,

WARRANT HANDED TO

County Luitn

STATE OF GEORGIA. Fulling STATE OF GEORGIA. County. George & Kaworth of said State and County, desiring County. to avail himself of the Pension Aor (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: , hereby authorize 1. What is your name and where do you reside? (give State, County and post office George F. Raworth, Ga Jullon County, Battle Hill 20 2. How long and since when have you been a resident of this State 2. to receive and receipt for the pension allowed, and request that he remit same to Fifteen you Since 1885 When and where were you born? 1836 Chaileston SC Witness my hand and seal this When and where and in what company and regiment did you enlist or serve? 1861 Aiken SC. Co & 1 Regt arty SCV Executed in presence of ____(I. S.) 5. How long did you remain in such company and regiment Four Year & 6. For how long a period did you discharge regular military duty " Four Year ? 7. When, where and under what circumstances were you discharged from service? vas present with Comman datus born 7 C erfel 1860 8. What is your present occupation? Pedling Vigilables How much can you earn (gross) per arnum by your own exertions or labor ! about 50% day 10. What has been your occupation since 1865? Working Some for R'R & budding
11. Upor which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? age y Poverly 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? Lour years, besides buffering non with 13. What property, effects or income do you possess, and its gross value? . None 14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, did you make of same ?___ 15. In what County did you reside during those years, and what property did you then return for taxation? 16. How were you supported during the years 1898 and 1899? Peddling Vegitables 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? Could not make a suffert only bread for 18. What was your employment during 1898 and 1899? What pay did you receive in each year? 19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Yes Mife & Child, they live on what cur make no Homestrad 20. Are you receiving any pension? If so, what amount, and for what disability? Sworn to and subscribed before me this the Applicant.

AAAACIO IOI UPPIICAIIL,

LOWER OF RELORIES.

#### QUESTIONS FOR WITNESS. STATE OF GEORGIA. Fullar COUNTY. J. E. Currenussas, of said State and County, having been presented as a witness in support of the application of G. F. Raworth for pension under Section 1254. Code, and after being duly aworn true answers to make to the following questions, 1. What is you sattliff with where do you feetile? I.E. Carmonsing. 2. Are you acquainted with. \$\\ \mathcal{F.Raworth} \quad \text{, the applicant; if so} how long have you known him? about at orty years 3. Where does he reside, and how long and since when has he been a resident of this State? Fulion County about fifteen for 4. When, where and in what company and regiment and he suffer, and how do you hasw? 1861 Cliken S.C. Co. E. 1st Rest SC Was member in Same Co 5. Were you a member of the same company and regiment? 34 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? Form years he was 1 st dergt when we went into Simil afterwards oberdid to 2nd Lunt of same Co the was a good hold in the Officer Sugar de Greensbon What property, effects or income has the applicant (Give your means of knowledge, g What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? 9. Has he contected away aliy of his property in the last four years, if so, what was it, and to whom? None 10. What is the applicant's occupation and physical condition? His age & Suffering from Careble Zuplure 12. How was he supported during the years 1893 and 1899 ? 13. What portion of his support for these two years was derived from his own labor or income? She own labor From petiling 14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? . Age & Information he

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

Sworn to and subscribed before me, this

#### AFFIDAVIT OF DUVOIOUS

ALTIDATI OF PHISICIANS,
STATE OF GEORGIA,
Free COUNTY.
1/2 Party Soll De Mill 22
and and
of said Can'ty who, being severally sworn, say on oath that they have examined carefully
and position under Section 1254, Code, and after
such personner examination say that his precise physical condition is as follows:
With A. M. A.
With a double, druck Scratal Hornia
of my longe lige He also has
buterne bleeling piles.
The Add
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 sension being allowed.
Sworn to and subscribed before me this the
29 day of garage 1960 a. H. Lindowne M. D.
Ordinary.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA, 'A"
Tulla COUNTY.
I, Ordinary in and for said County, hereby certify
that the applicant resides in said County, and has
been a bona fide resident of this State since the day of 189
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 affide vite was read to the applicant and witness
before same was signed.
I further certify that the tax digests of County show hat applicant
returned for taxation in his name in 1898Dollars
of property, and in 1899. Dellars of property.
In my opinion the foregoing claim is made in good faith.
Witness my hand and seal of office, this
15 Kelley dinary, .
of Factor County.
Norm.
Before any questions are naswered, the Ordinary shall swer applicant and the winness in the following words: "You shall this as swer make the such of the questions asked of you, and the eridones you shall give will be use whole truth, so help you did."  Additional additional additional and the way has taked to the following the control of the contro

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I hereby authorize of or receive and receipt for the pension allowed and request that be remit same to at by

Witness my hand and seal, this day of 1901.

Executed in presence of

SOLDIER'S PENSION

INDIGENT

No 344

Those Aiready Enrolled

WARRANT HANDED TO

JOHN W. LINDSEY,

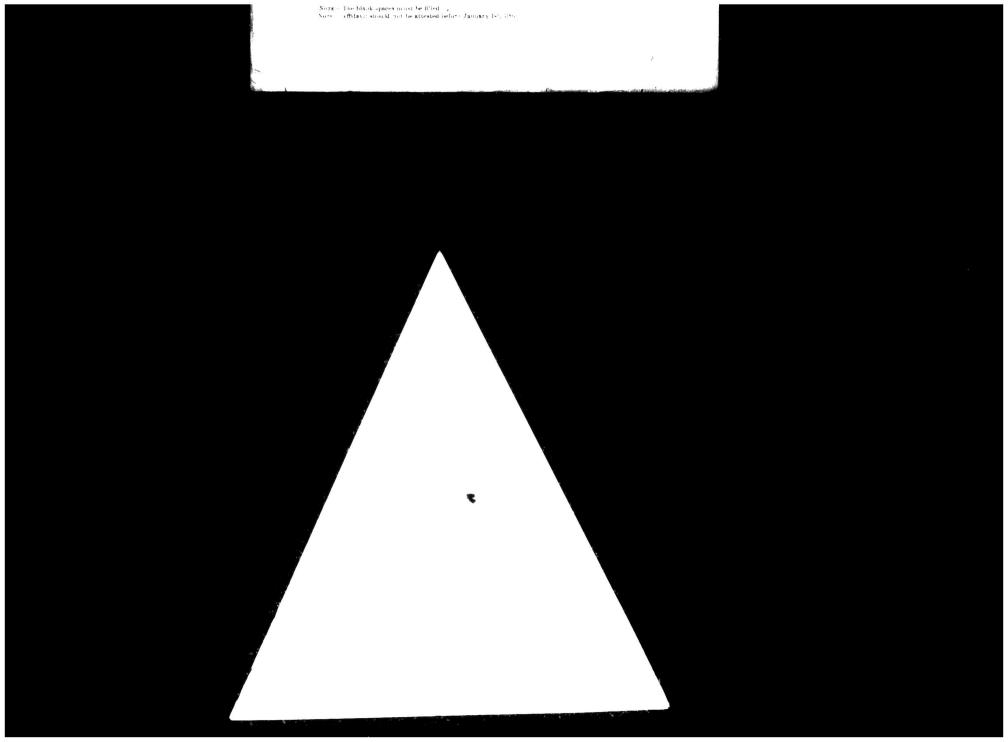
WARRANT ISSUED

c 3 rta

# For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
County \
Dersonally appears to I Rangeth a cully
County, State of Georgia, who being daly sworn, says on oath that he is a bona nde citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of that he is Cy years old and
by occupation a that he enlisted in the military service of the Con-
federate States for of the State of Fourth Careline and during the war between the
States, and served for the term of Affect in Company of of the Regiment
States, and served for the term of Affair, in Company E of Ath Regiment of x. (166 166 167 22 Life in the Links the physical condition is as
follows Contain Properties
Se weral Pobulity
that his property consists at the following stems
I the value of I follage, that by reason of his physical
condition and poverty he is mable to import nime if by his own exercion or labor and
that he receives no pour ion, but the one between applied for
Deponent des.re 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 critical for the year 1901. There here fore as a resident of 2,00 floor.
Sworn to and subsgribed before me, this the p
Switch to and strong time that the
Allen Recellence on Opinary
flue Mailline on ordinary
STATE OF GEORGIA.
County, )
do certify that I am well acquinted with a filteration the
do certify that I am well acquinter with
applicant in the foregoing affidavit, and an well satisfied that the statements muste by him in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County
2//
Given under inv ometa; signature and seat, this
day of Acree 12 y 1901.
order of the Country
Ordinary (CC *** County

Norz - The black spaces must be filled. Norz - Affidavit should not be attested before January 1st, 1961



# POWER OF ATTORNEY.

# STATE OF GEORGIA.

County

Know all Men by these Presents, That I.

Raman County, in said State, do hereby appoint H. L. Law, 1200 of Labor Lorange Sergers. my true of Tuller

of hallow larger 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 afflicant; 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.

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

day of

Daraux

, and oblige if allowed, send am me at 38 Eun

Mo. 2738

Widows' Pension

Lausen, Laide Ming

1891.

Warrant Issued

1891

AND HANDED TO



#### STATE OF GEORGIA.

Clarke

Know all Men by these Presents, That I, Sarah Rurrain of Puller George,

County, in said State, do hereby appoint 24 14 Harris

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

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

Daraux Rawson

Executed in the presence of us

The Their.

If allowed, send amount by

check

me at 39 Enmet St. Atlante, Ja, and oblige

Darah & Revocor.



Affidavit to be Made by the Widow.

STATE OF GEORGIA,

County of Lelacke

r	in	person	came	before	me,	the	undersigned	Ordinar
in	an	d ior t	he Ca	unty o	f		becake	

Mrs. Sarah Rarreer, , who being sworn according to law, says under oath that she is the widow of Eugene Recessor, who was a soldier in the service of the Confederate States, and served as a member of Company . "

205 th Regiment of North lear olive Volunteers; that he enlisted in said service on or about the 28th day of Army up to Deasember, 13th 1862 That while in the Army, he was on the 13th day of December 1862 (See Nove No. 1) Killed in the back of Fredericksburg we the State of Virginia

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on theday of march 1821, and that she has resided in Georgia continuously since the her must berth it that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other. State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworm on and subscribed before me, this, the day of Hoay 1891 Sacah & Rance as March March

Nors 1. State in blank above the date of the death of the husband, and how, and when, and where he died. And in a case his death resulted from disease, state how the disease is known positively to have resulted from the service of the soldier

#### Affidavit for Three Witnesses

State of Ceorgia.

In person came before me, the undersigned Ordinary

County of leinke David Heil

9. Dilliand County, witnesses

each known to said Attesting Officer as truthful. reliable and reputable citizens), who severally say under oath that, from their own personal knowledge Mr. Sarah Ranger of the Country of

State of Georgia, is the vidow of Gargane Rarriso. of the 25th. Regiment of North Carolina Volunteers. That said soldier enlated in the service of the Confederate States (or the Grorgia State Troops) on or 28d day of Afric :86 2 That while in said service, or by reason of said service in the Army, he lost his life as follows

the new Kelled of Buyenes on the 18th day of Recounter.

Our apportunity for knowing the faces stated in reference to death of applicant's hasband were no now each member of the some com mineral.

We further swear that Mrs Such Rancon societ during the service, and that she has not intermined since his death, and that she resides in County of the State of Georgia.

Swapp to and subscribed before me the, the day of Hoay 1891. I wild Hemrick Mosening Toring ordinary. The Dictions

NOTE. Witnesses must not testify about things they may believe but coufine their statements to such facts as they per-

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

State of Georgia.

1. S. m. Ider rugler

County of lelanke

in and for said County of leturite

State of Georgia, hereby certify that I am acquainted with Mis Larah Rarray

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 that the county, and that she resided in the State of Georgia on December 23d, 1890, and has not lived out of the State since that date. I also certify that the witnesses whose testimony she presents to sustain her claim are known to me to be truthful witnesses, entitled to full faith and credit as such. I am fully satisfied that this claim is made in good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign

In Witness, Whereot, I have hereante set my nand and affixed the seal of my office, this, the

day of May

De Kessington That the statements in the Jongme Kertifical

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

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

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

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

Those whose husbands contract I disease in the certific, and who after the way, dard of the disease caused by the service. The disease directly causing the death.

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

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

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

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

There is no need of employing a lawer or other arent to attent 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 Teace or Notacy will not

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 Tressurer'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

#### ror wittows heretotore allowed rensions.

#### STATE OF GEORGIA,

personally comes Mrs.

County of

Fulton

25th

Sarah Rawson

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

her birth

Fulton

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

continuously ever since.

18. That she is the Widow of

Eucone Rawson

who was a Soldier in Company

Regiment of

of the

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

Apr 11

1862 and served in the Army up to 13th

13th Dec

ne dans or

186 2. That he lost his

life on the

(State here

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

Killed in the battle of Frederickburg in the State of Virginia

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 58; that Georgia is her home and she resided in this State 23d day of December, 1850, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

__day of _ February 1894.

Mr. Lo achour Ordinary. Post-office

## For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

personally comes Mrs. Sand Hawam

County of

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

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

continuously ever since here live

En d'auron

I of the 23" Regiment of Driver

Volunteers, that he enlisted in said Regiment on or about the month of .86.2 and served in the Army up to 12 to Dec 186.2. That he lest his

day of de come 1862 (State hor

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

Bellen in the Faller of Fredrikating in the State of tregener

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18,5 5; 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

30 day of Jamay 1893

W. L. Caulom Ordinary Post-office reach less

# ensigned of Ordinary of the County of Applicant's Resident Allowed Pensions.

ed a said Cornty of	g '- yins. Culduto	DE GEORGIA C	aucdis".J.K
STATE OF G	EORGIA,	Banak O	Dersonally Connect Mrs.
who being aworn, says of	n oath, that she is	a bona fide resident e Georgia, and that sh	e has resided in said State
Eugene Rawson			That she is the Widow of
of the 25	<b>.</b> .	Regiment of	vas a Soldier in Company Georgia
Volunteers, that he enlis 186 2 and served in the life on the 13th full particulars of the hu. 111ed in the battle of	day of day of sband's death, when	December  n, where and from what in the State of	That he lost his  18 62 (State here at cause.) (
		*	during his service in the

#### STATE OF GEORGIA, County of Fulton 1. I. Cal hour Ordinary in and for mid County of State of Georgia, hereby certify that I am acquainted with Mrs. 1111 361 F the applicant for a pension in this case and know from my own know dge (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 Tuger Pawsor 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 W.L. Gulham Ordinary POWER OF ATTORNEY. STATE OF GEORGIA. County. hereby authorize

to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have bereunce set my hand and seal, this day ef____ [1.8.] Executed in the presence of

FOR THOSE HERETOFORE

PAID

To oo o

No. 7352

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

STATE OF GEORGIA, County of Ordinary in and for said County of

State of significant for a pension in this case; and to eased and as such has neretotore been allowed a porsion for the year ending February 1 (th. 1800) In Womess Whereof I have become set us, hard and adved the seal of my office, this the Ordinary

#### POWER OF ATTORNEY.

STATE OF GEORGIA. County hereby authorize to receive and receipt for the pension paid hereon and request Is WILKES WILLEON, I have hereinto set any hand and seal, this [1. 8.]

Executed in the presence of

PENSIO

# For Widows Heretofore Allowed Pensions.

STATE OF G	EORGIA,	1	Personally Comes Mrs
County of	"ulton	arch De	псоп
wh	o being sworn, says on o	onth, that she is a bona	fide resident of said county o
·.tor	State	of Georgia, and that s	die has resided in said State
ontingously ever since	- n e nit	18	That she is the Widow o
	C.*	w	ho was a Soldier in Company
of the		Regiment of	7-orgi
Volunteers that he enlisted in	resid regiment on or ab	out the month of	F # 7 1
186 and served in the Arm	y up to		186 That he lost his
		7 7 7 6 0	14 (Mate lan

in a firm recovering in the State of Firecomm

full particulars of the husband's death, when, where and from what coolers

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 rear 18. That Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1895, and now apply for

Swarn to and subscribed before one, this sure that her have the day of 1896 Swach Rawden.

Post-office Post-office

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Suction	Bersonally Comce Mrs
Sullan See De t	<ul> <li>meeting that she is a found fide resident of said county of the off Congruent that she has its standard and South</li> <li>That she is the Wickonsident</li> </ul>
of the 25 th	Recoment of People a
ite on the /3 // day of	1802 Phothe Let his Selection 162 Main and
Allexine the land the land	the of Reducion bay

Deponent swears that she was the wife of soil force of solder, during his service in the utility as a soider, and that she his never interested since his death attressed trust she became his wife in the year 1807, that Georgia is red bonne and she resided in this State 2 and day of December, 1890, and has not fived in any other State or a calling a tree that date. I have been allowed a pension as a resident of the year ending February 15th, 1990, and now apply for the pension provided by law for the year ending February 15th, 1990, and now apply for the pension provided by law for the year ending February 15th, 1990, and now apply for the pension provided by law for the year ending February 15th, 1990, and now apply for the pension provided by law for the year ending

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	1N	WITNE	SS WHE	EREOF, I	have her	eunto s	et ary han	d and	seal, this		
day o	E				1898,						
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For Those Heretofore Paid			LIDOW'S PENSI	Englanding Polymers Josh, 1888. PAID CO. LANGE C.		is F	X			MACH	
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#### POWER OF ATTORNEY.

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	day of				1899.					
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13	L & Cor I nose Heretofore Frad.	500		For year ending February 15th, 1899  PAID 10  CALLY CLOTH 92		q	RICHARD JOHNSON	UKD	2	7 3
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# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of	} /	Personally Comes Mrs.
ah bang saora, sa	's on eath, that she is a	bonn fide resident of said county of
etintionisis ever a no Pica Title	State of Georgia, and	that she basers open in said State
etamonsiy ever sono		8 Thus she is the Widow or
5		ono was a Soldier in Company
Valuations, that we collete large said regiment of ab	Re ment of .	E12.712
150 1 9th served a the Arms in the 2	Tie Die	Day of They be the big
180 Cath served in the Army up to 2 life in the 2 day of	Jean	for 18 6% State June
Survey Survey Survey Survey, Excellent with a problem		
decided in oxer	to medicalia	inchange la
Leponent swears that shows the water dissert deceased s		
she has never married some his sharing reward, and that	he became his wife in the	te year 18 78
Lauve been allowed a pension as a relident of		
February 17th, 1897, and new apply for the pension oro	ided by law for the year	r ending February 15ch, 1898
Sworn to and subscribed before me, this	· ·	
Sworn to and subscribed before me, this  day of 1-4 and 1898.	E 282 42 8	x /
yrdinacy	Post Office	
State of Georgia, County	1. 77	ix allowery
County.	Ordinary of said county	y, certify that I am well acquainted
with Mrs . C. iten h Place	Xort who made	the above affidavit and am satis-
hed that the facts therein stated are true and I know she		
has continuously resuled in this State since the		
tieven under my official signature and seat this the	day	IN -7 EN IMIN.
	*	
('thetal') (Seal') Ord	ing of -c.	County.

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA. County of FULTON	Sarah Rawson
who, being sworn, says on o	ath, that she is a bona fide resident of said county of
	e f Georgia, and that she has resided in said State
continuously ever since. Birth	That she is the Widow of
Emanie Ravson	who was a soldier in Company
9.1 of the 25th	Regimen of Georgia
Volunteers, toat he enhated in said regiment on or about the	mouth of
186 2 and served in the Army up to 34 1	
life on the 300 day of 200	clinter 1862. State, hore
full particulars of the anishand's death, when, where out to	in what cause i
Tilled in batte	le Fredricker & ?
	×
Deponent swears that she was the wife of said deceased soldier	during his service in the army as a soldier, and that
sie has never married since his death aforesaid, and that she be	scame his wife in the year 18 SE
Loave 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 45th, 1899
Sworn to and subscribed before me, this	Taran TRuman
day of the 1899.	mark
	Post-Office
State of Georgia,	I WHHUISEY
FILL TON	nary of said County, certify that I an well acquainted
with Mrs. Darah Camson	, who made the above affidavit and an satis-
fied that the facts therein stated are true, and I know she is th	e individual she represents herself to be, and that she
has continuously resided in this State since the 23 22	day of See 14 90
Given under my official signature and seal this the	, day of
	money

#### POWER OF ATTORNEY.

STATE OF GEORGIA, _County.∫ Ι,. hereby authorize to receive and receipt for the pension paid hereon and request that he remit same to IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of _1900. [L.S] Executed in presence of

WIDOW'S PENSION

POWER OF ATTORNEY.

- de april de la companya del companya de la companya del companya de la companya	County.	
1,		hereby authorize
	of	
to receive and receipt	for the pension paid hereon and requ	uest that he remit same to
***	at	
IN WITNESS	WHEREOF, I have hereunto set my	hand and seal, this
day of	1901,	
	No security of the security of	[L. S.]

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Charles (Kazz)
who here, sworn, says on oath, that she is a bone fide resident of said county of  State of Georgia, and that she has RESIDED in said State  continuously systematics  18 That she is the Widow of  who was a soldier in Company  of the Management of Regiment of Regiment of
Volunteers, that he collisted in said regiment on or about the month of  186 A and served in the Army up to  A A A A A A A A A A A A A A A A A A A
Tilled in hatile Fredericksburg
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 aforessid, and that she became his wife in the year 18 5 8  I have been allowed a pension as a resident of.  February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1900.  Sworn to and subserfied before me, this  day of Long 1900.
State of Georgia,  Tu Kon County. Ordinary of said County, certify that I am well acquainted
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
Official   Ordinary of Relations County.

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Personally Comes Mrs.
County of Millim	- Jarik Rawson
	oath, that she is a bona fide resident of said County of
constructive ever since Right	ate of Georgia, and that she has RESIDED in said State
Eyeu Ruson	That she is the Widow of soldier in Company
my forther manufacture of the ma	Regiment of
Voluntiers, that he enlisted in said regiment on or about	t the month of
186 2 and served in the Army up to 13 d	Dec 186 2 That he lost his
particulars of the husband's death	18.0 (State here
particulars of the husband's death, when, where a	nd from what cause)
Killed in battle Fre	bricksburgette -
-	The state of the s
Deponent swears that she was the wife of said deceased so	Idiar during his service in the community
she has never married since his death aforesaid, and that	
I have been allowed a pension as a rasident of_	-11/1/A
February 15th, 1 900, and now apply for the pension	
Sworn to and subscribed before me, this	Au Sur Street ending February 15th, 1901.
15 day of Jaun 1901	Darch X Kowsey
John R Wick am ordinary	
Ordinary.	Post Office Celebrate
State of Georgia,	Jour Milliams
1111	Ordinary of said County, certify that I am well acquainted
with Mrs. Larrah Rauson	
	, who made the above affidavit and am satisfied
that the facts therein stated are true, and I know she is	
has continuously resided in this State since the	day of 18 90
Given under my official signature and seal, this ti	1901.
	the trust 1640 K.
Official   Seal.	inary of Julton County

#### POWER OF ATTORNEY.

For year ending Dec. 31, 1972.

For year ending Dec. 31, 1972.

Thu. Sarah Cauraore

Fulton. County,
Vidow of Sengante Cauraore

JOHN W. LINDSEY,

Commissioner of Fractions

WARRANT. ISSUED

### 1902

ARD HANDED TO

THE 1902

AND OF ORORGIA

Wed Widows Heretofore Allowed Pensions.

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, PERSONALLY COMES MRS.
Sarah awson
who, being swern, says on oath, that she is a bona fide resident of said County of
Fulton. State of Georgia, and that she has RESIDED in said State
continuously ever since That she is the Widow of
by of the 25th Regiment of Ma
of the 23 the Regiment of Lya
Volunteers, that he enlisted in said regiment on or about the month of
188 2 and served in the Army up to 13th Dec 188 2. That he lost his
life on the 13th day of NEC 1862 (State here
perticulars of the husband's death, when, where and from what cause).
Killed in battle of Bridnisheburg Va
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has hever married since his death aforesaid, and that she became his wife in
the year 18 08
I have been paid a pension as a resident ofCounty for the
year ending Pecember 31, 1901, and new apply for the pension provided by law for the year ending
December 31, 1902
this day of JAN-13 1902
this aday of the story week with the same
Ordinary. Post-Office
State of Georgia, I We will straight.
Fulton County of said County, certify that I am well
requainted with Mrs. Savah Kawson, who made the above affidavit and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
hereself to be, and that she has continuously resided in this State since the 2 3-el
day of DEC 1490
Given under my official signature and seal, this the day of 13 1902 1902.
Official Seal
Ordinary of Pulton County

# For Widows Heretofore Allowed Pensions.

Irs.
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said County
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### POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY

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Exe	uted in pre	esence	of							// // // // // // // // // // // // //	[15. 15.	



Tauson sareh

TO THOSE HERETOFORE

1904

WIDOW'S PENSION FOR YEAR ENDING DECEMBER 31, 1904

Fulton. County,
Widow of Leaguest 25
Co. H. Regiment 25
JOHN W. LINDSEY,
Commission of France,
WARRANT ISSUED
AND HANDED TO

#### POWER OF ATTORNEY.

7	COUNTY.	
1,		hereby authorize
The state of the s	or	
EO PARALVA and roc	naint for the nancion maid beauty	
to receive and rec	ceipt for the pension paid hereon, and re	quest that he remit same to
and the sign of th	seipt for the pension paid hereon, and re at Whereof, I have hereunto set my hand	and the second s
and the sign of th	Whereof, I have hereunto set my hand	and the second s

DOW'S PERSI

Mu Larah Claus
Fulton.
Winter of Conference Co.
Reference Co.

JOHN W. LINDSE

or ceaseia,

Par Widows He More Alowed

# FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

The same of the sa	
STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Culton.	Lavala Remen
500 MM (1997)	at she is a bona fide resident of said County of
continuously over since Berth	Georgia, and that she has RESIDED in said State
	That she is the Widow of who was a soldier in Company
engene Kun	who was a soldier in Company
7	Regiment of
Volunteers, that he enlisted in said regiment on or	
186 2 and served in the Army up to 3/2	t blee 146 2. That he lost his
life on the 3/2 day of	11 18 62 (State here
per colurs of the historial's leath when, where and tro	om schot cause)
	¥
Deponent swears that she was the wife of said decea	
	ath aforesaid, and that she became his wife in
tne year 18 😞 🖇	<b>5</b> 0
I have been paid a pension as a resident of_	Fulton. County for the
year ending December 31, 1903, and now apply for the	ne pension provided by law for the year ending
December 81, 1904	a Sun
Swora to and subscribed before me,	1
thy day of elfan 1904.	Saray Received
In Milkinson Ordinary	Post Office
(Trainary)	
State of Georgia,	I, jour K. Hilkenson
	Ordinary of said County, certify that I am well
	The made the above affidavit and
am satisfied that the facts therein stated are true, and	
herself to be and that she has continuously resided in	n this State since the
day of 18.	
Given under my official signature and seal, this	the day of JAN 22 1904 1904.
I resum I	Jan A Wilkenson
Brai	dinary of County.
NOTE AND LOCATION OF A	tillon.

NOTE.—All blank spaces must be filled.

# For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Fulton.
Fulton.  State of Georgia, and that she has RESIDED in said State
continuously eyer since all fell with the same is the Widow of the Company who was soldier in Company of the Lotte Regiment of W. C.
Volunteers, that he enlisted in said regiment on or about the month of Openil  186, and served in the Army up to
Milled Frederickshing Dec 13th 1862
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18
I have been paid a pension as a resident of Fulton. County for the year ending Docember 31, 1904, and now apply for the pension provided by law for the year ending
Sworn to and subscribed before me, thisday of JAN 2 1905 1905.    August   Described before me, thisday of JAN 2 1905 1905.   Post Office   Catalana
State of Georgia,  Fulton.  County.  Ordinary of said County, certify that I am well acquainted with Mrs.  Arak Nawson, 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 Ble sleep
Given under my official signature and seal, this the day of JAN 2 1905 1905.
Seal.   Ordinary of Fulton. County

Vonction with Affiliati must be affer dute uffer Jamuary 1st, 1905.

	PATERDICE		-	4.1
4 8.03.	7 42 12 4 12 12 12 12 12	OF	ATTORNEY	

	or a second	Thirdson, marining about a	and the second second second second	***************************************	hereby
tofreceive and	receipt for the p	ension paid	hereon, and	request that	t he remit
In Witness	Whereof, I hav	e hereunto se		nd seal, this_	
day of		1907			
Exe	cuted in presenc	e of	Realization (All Constitution Recognision and Constitution Recognision Realization Recognision Recogni		Charles American (E.) (III. (C.) (C.) (C.) (C.) (C.) (C.) (C.) (C.
	PERSONAL AND RESTORE DESIGNATION OF STREET				
			-)		
		7	- 6	No. of the last of	-
/			The last	no e	1907,
	NSION 31, 1807.	lauran	Cause.	BY, ner of Parsions.	1
300 miles	DOW'S PERSION For Year ending Dec. 31, 1907.	rate Gauren	ym Cauch	HN W. LINDSEY, Commissioner of Passions. WARPANT SESSION	1

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For a Fillows at 12 to folio allowed Panagon

FOR Widows Hereroford, Allowed Pensions

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Fultan					
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WIDOW'S				Witness m	TE OF
Indigent Pension				y hand this	GEORGIA
1902.				soe of	91.4,
Name Mis C. C. Ray	0		Nationary Co		
County Fulton Widow of Mornas H Ray			unty.)	dasy of_	Coun
Coste y Ta			1		hereby
Approved 1902					acthoriz
JOHN W. LINDSRY,					recapt for
WARRANT HANDED TO				190	the pensition or registered
154	•		. :		allowed with
9/2 6-4 90 2-13/16-1902		•	L B	**	一

Power of Attorney

STATE OF GEORGIA. Hellewist! Fullin 27. How was she supported for 1899, 1900 and 1901 Mashingh Shelinastiti do quel prins County. the sale of the bone what and the ord of her two daughters, 28. How much did applicant contribute to her support for last two years? Traffills. If authors.
29. Give a full and complete statement of applicant's physical condition? James 12ill resented as a witness in support of the Application of Mrs. unsked hard allier life, and a sun tenels and fulle, and wash 1900, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

What is your name and where do you reside? Januar Bue

Let and Allandur H. C. Ray

2. Are you acquisited with the applicant, Mrs. C. Ray

If so, how long have you known her? I am. Have Kumm her are Januar following queetions, deposes and answers as follows: 60, What interest have you in the recovery of this pension by the applicant? Home Wastern & Burning of Warreld Like to Known places a Burning. Sworn to and subscribed before me this James Bell Where does she reside, and how long and since when has she been a resident of this State? He hander 8 Atthorage . Printing of Blate all her life.
When and where was she born? That I do not know. Were you ever acquainted with her husband? Was and Jahr he collisted. Where dot be reside in 1861 an alman Martin Ma. Affidavits of Physicians. en and to whom was be married I do not Komo when bat to he worked medicine pit C.C. That I dy not know of mountandinge. STATE OF GEORGIA How long have you known him a umld Day Since 1861-10. When and where fid Therman M Nay Personally before we comes P. R. Me auer M. D. Usanta fa. in Co. K. The kind of Supranta May 1861. In Were you a mamber of the same Company and Regiment of Supranta May 1861. In Were you a mamber of the same Company and Regiment of way mad by a made of the same Company and Regiment. physicians of said County, who, being severally sworn, say on eath that they have examined carefully Mrs. applicant for a Pension under Act of 1900, and after such personal examination say, that her physical condition is this Mary May are obligated and steer deared from the form of the form the first the steer that the steer the steer the steer that the steer the han tenderlook to be compared a long and Regiment surrounded and discharged from service? Le voración I dopen Kurar but handramental afformation Va. and we have no interest in said pension if allowed Was Historian to Comment of the husband of applicant present?

There mudualized has been for the about many functions of Abylich.

16 If the present, where was be? In from many fine they Sworn to and subscribed before me this 23-1 R. 71. Heaver M. K. John Reversion ordinary For what cause Deplacement gradual, of do just introduce in the Fulton County. By whose authority be left of present by the Confidence of Designation of the Confidence of the State of the Ordinary's Certificate STATE OF GEORGIA. Daw Mr key after the loan classed and before his drath ____County. Lower Line in March 1880 in March Irak Qualifier - allento . When it were at his death and how long had be been a guident of Georgia at his death? In When did he reside at his death and how long had be been a guident of Georgia at his death? In When did had had huma pusullut of the Marry Sung, 1860. Ordinary in and for said County, hereby certify that the applicant, Mrs. and has been a bona fide resident of this State since the ______day of ___ De you of your own knowledge know that applicant is the lawful widow of like H. Can

Description of the H. Can

Has she remained unmarried singular national death, and is now his ridow?

What property, effects or income has the applicant, if any, and how do you know this of your own __, and that the witnesses, Mr.___ are of trustworthy character, and that their statements are entitled to full taith and credit. A do intrinse sectify that before answering the foregoing questions, the applicant and said witnesses took the ath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same I further certify that the tax digest of___ redge : She cruss les proprie Than We nieme Shetels mide sold the home dol ____County shows that applicant returned for taxation in her own name is 1899____ 23. What property, effects or income did applicant possess in 1888 and 1900, and what disposition did she make of it? Surface after the Association of the make of it? ____dollars worth of property. of property, and in 1900 and 1901____ Witness my hand and official seal this ______ day of _____ whom? I good sham sha sanged a small hours of fiven any ayay, if so, what was it, and to whom? I good sham sha sanged a small hours to whom? 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 such of the questions saked of you, and the ordinance you shall give will be the whole truth: So help you God." Additional affiduring may be attended, if black spaces are insufficient, all affidiarits must be made before Undinary. All affidiarits must be made before Undinary. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Thousansired since 18th April, 18th, not entitled.

Witnesses and two Physicians are necessary to make out claims. 25. What is applicant's physical condition and her chances and ability to earn a support Es can hy support the strange bun a hard working from and her broke husel am and is me small to do any manu later Dufficult Earn me Suffer

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1900, and after haviers as follows: the e do you reside?	ing been duly a	word true answers	to make to the	The second second
1900, and after haviers as follows: (C) the edo you reside?	s have en	, t. lin.	1 de	Ell same
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The state of the s	with her husband with her husband with her husband worn, and true the same Company and Regiment did he ophist and the company and Regiment did her to Company and Regiment when it company and regiment to Company and the Com	with her hu-band and her hu-band and her hu-band and how do not know that applicant is the lawful and how do not know that applicant is the lawful and how here a second to determine the lawful and how here he was the long bod in been a recledge know that applicant is the lawful	with her husband with a same Company and Regiment? Yet a same Company and Regiment surpendered and discharged and when it corrected, the husband of appears to the husband of appears to the husband of appears to the command with the same of the husband of appears to the husband of appears	with her husband?  Sile a mirrord?  I This?  Regiment did he oblist and how de not know this?  Regiment did he oblist and how de not know this?  Regiment did he oblist and how de not know this?  Regiment did he oblist and how de not know this?  Regiment did he oblist and how de not know this?  Regiment did he oblist and how de not know this?  Regiment did he oblist and how de not know this?  Regiment did he oblist and how discharged from service?  The her husband of applicant present?  The her husband of applicant present?  Regiment did he oblist and how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?  Regiment did how discharged from service?  The husband of applicant present?

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

26. Is surlicent able	
26. Is applicant able to earn a support at labor of any sort, if	f not why?
27. How was she supported for 1899 and 1900?	
28. How much did applicant contribute to her support for las	
29 Give a fall and complete statement of applicant's physical	st 'wo years ?
-	1
the recovery of this pension by	the applicant? Ao, 2
Sworn to and subscribed before me this 8th	1
day of Mught 1902 BA	loves & massey
Tullon County.	The same of the sa
county.	Witnesses.

STATE OF GEORGIA.

COUNTY of Land of County state of

## WIDOWS PENSION FOR VEAR BEING DECEMBER OF SOIL THE TO SEE COURT. WINDOW OF THE SEE COURT. WARRANT ISSUED WARRANT ISSUED

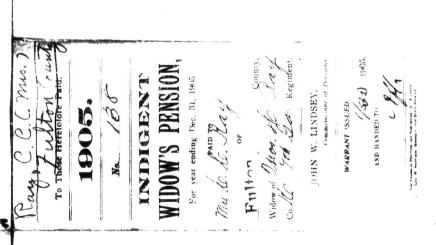
TO THOSE HERETOFORE PATO

1904

### POWER OF ATTORNEY.

STATE OF GEORG		
	COUNTY	
Ι,	2	, hereby authorize
	of	
to receive and receipt	for the pension paid hereon, and i	request that he termt same to
	at	
In Witness Wh	ercof, I have bereanto set my ban	id and seal, this
day of.	1905.	
		1. 5.

Executed in presence of



### FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS. STATE OF GEORGIA, County of Fulton. Who being sworn, says on oath that she is a bona tide resident of said County of Fulton. State of Georgia, and that she has resident in said State

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

in the Gira day of Mary

ZIP

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 is 5.

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

Sworn to and subscribed before me

ania Augustinea della 1904 1904 Dina Albertainea Ordinary

le Comercial

State of Georgia,

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

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

who made the above affidavir, 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

Given under my official signature and seal, this the____

Om Albie Minen

NOTE. All blanks must be filled.

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

### FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Fulton.	1 Solo Stay
	,
who, being sworn says on oa	th, that she is a bona fide resident of said County of
P 11 1 1 / 1 1 1	of Georgia, and that she has RESIDED in said State
continuously ever since all her	1.10
Jamas de Ol	That she is the Widow of
James Ja JL	who was soldier in Company
of the 7 th	Regiment of Slat 914
Volunteers, that he enilsted in said regiment on o	or shout the month of
186, and served in the Army up to	Manage
	That he died on
the day of	march 1480
Market 1 and 100 and 1	
Security state and a security state of the s	
**************************************	
Deponent swears that she was the wife of said does	eased soldier, during his service in the Army as a
	leath aforesaid, and that she became his wife in
the year 18 5	
I have been allowed an Indigent pension as	s a resident of Fulton.
County, under Act 1900, for the year 1904, and no	ow apply for the pension provided by law for the
year ending December 31, 1905	, , , , , , , , , , , , , , , , , , , ,
Sworn to and subscribed before me,	1 fives D
thisday of JAN 2 1905 1905.	Me Me, & May
01/011	wark
John of All Meson Ordinary.	Post-Office
	50
State of Georgia,	1. Jon of west unson
Fulton. County.	Ordinary of said County, cartify that I am well
acquainted with Mrs. 10.16. Ray	
am satisfied that the facts therein stated are true,	, who made the above amday t and
herself to be, and that she has continuously resided	
day of18 '	The office State stime the L. St. Mer. Reg.
	No. 1ΔN 2 1905
Given under my official signature and soal, the	his the day of IAN 2 1905 1905
(Official)	m / Kollenson
Seal.	Rulta
Ordi	luary of County

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



State of Georgia, Falton County.
any Minister of the Coopel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to solematic.
You are hereby authorized and permitted to join in the honorable state of Matrimony Thomas & Ray
nd Eliss Cynthia & Butter
ccording to the Riles of your Church, provided there be no lawful cause to obstruct the same, according to
e Constitution and Laws of this State; and for so doing this shall be your sufficient License
Civen under my hand and seal, this 3 day of June 1858.
I hereby certify, that Thomas H. Ray
nd Allies Cynthia & Butter
the day of June 1858, by me
tate of Beorgia,   OFDINARYS OFFICE   Suffon County.   1. CONTRETES TO SECURITY OF the Court of
rdinary of said Counts, do bereby certify (bal) trave compared the foregoing copy of the Marriage License defections of Ammas H. Bay and Micro Cynthia C. Bullie
with the original record thereof, now remaining in this office, and the same is a
correct transcript therefrom, and of the whole of such original record, and that said
Court is a Court of Record
In Testimony Whereof, I have bereunto sel my hand and affixed the seal of
the Court of Ordinary, thus 16 day of Alexander 1892. Muscellus M. Audus C. C. O.
state of Georgia,  sutton County.  1 A COUNTY OF Said County, and
esiding Magistrate of the Court of Ordinary thereof, do hereby certify that the above attestation sub- where the court of Charles of Said Court is sufficient and in due form of ion
d that his signature thereto is genuine.
WITNESS, my band and official signature this Administration day of Sec 1892
John Wilking or ordinary.

contribution

Widow's Application Under Act of 1910-As Amended by Act of 1919, and Constitutional Amendment of 1920. Date of Marriage Dec 2 Company.

Certificate.

STATE OF GEORGIA

Ordinary of

January 1st, 1920. now residenty of said County and

nuously, a bona fide resident citizeu

the applicant for said

mutitled to full faith as

SEAL OF ORDINARY Given under my hand and official scal of office this

is wered the Coding's that swear at pleant and the witness in the following words at you will rue unswers make to each of the questions asked you and the evidence how thath, we had you Gost. On the process as the process as the process of the control of the control of the country in which the applicant or witness resides and must be control of the Country in which the applicant or witness resides and must be control of the Country in which the applicant or witness resides and must be control of the Country in which the applicant or witness resides and must be control of the Country in which the applicant or witness resides and must be control of the country in which the applicant or witness resides and must be controlled to the country in which the applicant or witness resides and must be controlled to the country in which the applicant or witness resides and must be controlled to the country in which the applicant or witness resides and must be controlled to the country in which the applicant or witness resides and must be controlled to the country in which the applicant or witness resides and must be controlled to the country in which the applicant or witness resides and must be controlled to the country in which the applicant or witness resides and must be controlled to the country in which the country in which the country in the country in which the country in the country in

by general

JOHN W. CLARK,

Commissioner of Pensions.

CLARI

Ordinary's Certificate.

STATE OF GEORGIA,
fullow COUNTY
Thos Hypeffices Ordinary of said County do certify
that I know the speciant 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 be become
In without the service of husband, that both of them are now, residents of said County and
wery duly sworn by the before signing the foregoing affidavits, and that the truthful and trustworthy
and thous statements are entitled to full faith and credit
Given under my hand and official seal of office this Votage of March 192 7
SEAL OF ORDINARY) has A fine Grdinary.
of Fallon County

### Instructions:

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

  You do soismily 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 it blank spaces are insufficient.
  Only widows who married prior to January 1st. 1881, are entitled.
  All affidavits must be made before the Ordinary of the Quunty in which the applicant or witness resides and must
  be certified by such Ordinary.

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

- Attach certified copies of marriage house it 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.

### APPLICATION FOR PENSION BY A WIDOW

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

### QUESTIONS FOR APPLICANT TO ANSWER:

	sonally appears before me, MESA C. E. Ray of said State and Count
nd l	pereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Cou
itut	ional Amendment of 1920, and submits testimony to support the same, and after being duly sworn tru
nsw	ers to make to the questions propounded, answers as follows, to wit:
1.	What is your name, and where do you reside? (Give Post Office and County)
Ms	ca. C. E. Ray, 712 Wibert St., Atlanta, Ga.
2.	How long and since when have you been, continuously, a bona fide resident citizen of the State o
8. a.	Ween, where and to whom were you married? Dec. 21, 1875 to J. A. Roberta, Western County, Ga. Married second time to W. F. Ray on Dec. 6, 1862, Watton County, Ga. He died in 1906 Atlanta Gad. Have you married since the death of first and soldier husband. 188. 2021 Anguards dead.
4.	When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate
rmy	or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.)
Q.O	. G. 9th Regt. Ga. Infantry, Walton County, Ga., June 13, 1861.
8.	When and where did the commands of your husband surrender or discharge from the Service?
a	Appoins thor. Va., Apr 9, 1865.  Was your husband personally present with his command when it was surreadered or discharged?
	Yes. You indoesn personally bresent with his command when it was surrendered or discharged?
7.	If he was not present, state specifically and clearly where he was?
8.	When did he leave the Command? War ended.
a.	
-	For what cause did he loave?
э.	For what cause did he leave?
ь. с.	For what cause did he leave?
ь. с. е.	For what cause did he leave?
b. c. e. f.	For what cause did he leave?
b. c. e. f. g. h.	For what cause did he leave?
e. f. g. h.	For what cause did he leave? "" " " " " " " " " " " " " " " " " "
b. c. e. f. g. h.	For what cause did he leave? "" " " " " " " " " " " " " " " " " "
b. c. e. f. g. h.	For what cause did he leave? n n n  By whose authority did he leave? n n  For how long was his leave of absence granted? None In what way? None  What was his physical condition when he left his command? POOF, PRENIX OF WOUND.  What effort did he make to return to his Command? Never left except when In what way was he prevented from going back to Command?  Was he captured by the enemy at any time? 50.  If so, when and where? In what prison was he held and when was he released? 50.
b. c. e. f. h. i.	For what cause did he leave? " " " " " " " " " " " " " " " " " " "
b. c. e. f. g. h. i.	For what cause did he leave? "" " " " " " " " " " " " " " " " " "
b. c. e. f. h. i.	For what cause did he leave? " " " " " " " " " " " " " " " " " " "

Deg bout of this page

Office Ga. Soldier Roster Commission, Atlanta, Ga., Moh. 22, 1927.

The rolls of Co. C, 9th Regiment Ga. Vol. Infantry show that John A. Roberts enlisted as a private, June 13,11861. Woulded, Rean's Station. Tenn., Dec. 10, 1863. Surrendered, Appointing, Va., Arr. 9, 1865.

liven under my hand and official seal the day and year first above written.

Acting Superintendent.

ing Superintendent.

see obboarse hade.

Questions for Witness as to Service of Husband and Marriage STATE OF GEORGIA.				
COUNTY.				
as a witness in support of the application of	esented			
provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of	pension			
said State, who, after being sworn true answers to make to the questions propounded, answers as	1926, 11			
to wit:	tollows			
1. What is your name and where do you reside?				
John Mark and Mark an				
a Harden and discount to the house	plicant			
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident cit				
this State?	traen or			
4. When and to whom was she married?				
Y	her			
the husband of applicant, die?				
7. Were the applicant and her husband living together as husband and wife at the date of his de-	eath?			
and the same of th				
The state of the s				
<ol> <li>If not, how long did they live apart before his death?</li> </ol>				
Were they divorced?				
9. When, where and in what Company and Regiment did	enlist			
(Give date and place)				
10 How did you obtain your information of this service?				
11. How long within your personal knowledge did he perform actual military service with thin Co				
and Regiment? (Give dates.)	mpans			
12. When and where was his Command surrendered or discharged? (Give date and place)				
13 Were you personally present with this Command when it was surrendered?				
If not, where were you and how came you there?				
14. Was the husband of applicant personally present with his Command at its surrender?				
If not where was he?and how came him there?				
When, where and for what cause did he leave his Command? (Give date.)				
By whose authority did he leave his Command?				
and how long was he granted leave?				
How do you know all that you have stated to be true? (If of your own knowledge state clearly and specif	fically)			
15. For what cause, if you know of your own knowledge, was he prevented from returning to his nand?	Com-			
16. What effort did he make to return to his Command and how do you know this?				
17. Was he captured as a prisoner?				
Sworn to and subscribed before me, this the	October Colonia			
day of (Witness)				
Ordinary				
(SEAL OF ORDINARY)				

STATE OF GEORGIA, Walton COUNTY.
ORDINARY'S OFFICE—10.
I,G_A @arrett, Ordinary and ex-officio Clerk of the Court
or Ordinary of said County, do hereby certify that I have compared the foregoing copy of
Marage Lineuse of John A Roberts and Clara E Marable
with the original record thereof, now remaining in this office, and the same is a correct
transcript therefrom, and of the whole of such original record.
In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court
of Ordinary, this the 24 day of March 1927
Il Ganet
Ordinary and ex-officio C. C. O.

GEORGIA, FULTON COUNTY.

Personally appeared J. B. Marable who sewars that he was personally acquainted with J. A. Reberts who died in December 1881, leaving a widow and that said widow was residing with him at the time of his death. She later marrie W. P. Ray and lived with him until the date of his death in May 1986 and is now his dependent widow.

J.B.Marable

Sworn to and subscribed before me, this 1 th day of April, 1927.

arthur a market

### MARRIAGE LICENSE

John A Roberts

Clara E Marable

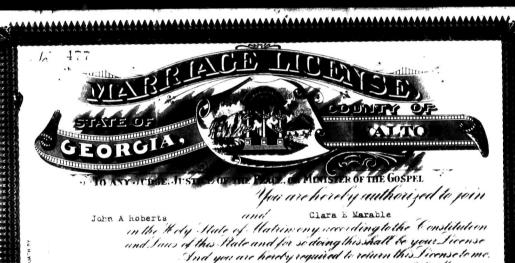
Issued December 21st, 1875,02

and Recorded on Page 462

Book

of Marringe Licenses

arthur a marker



December, 1875. Hard and seal this

County OF WALTON

Ordinary

dayof

STATE OF GEORGIA

Copperation of the Copperation o

within thirty days after the date of said . Marriage.

und Clara E Marable

with your Gerlificate theen of the fact and date of the Marriage,

I Credify that 50hn A Roberts were joined in Matumeny by me the 21st days

days December

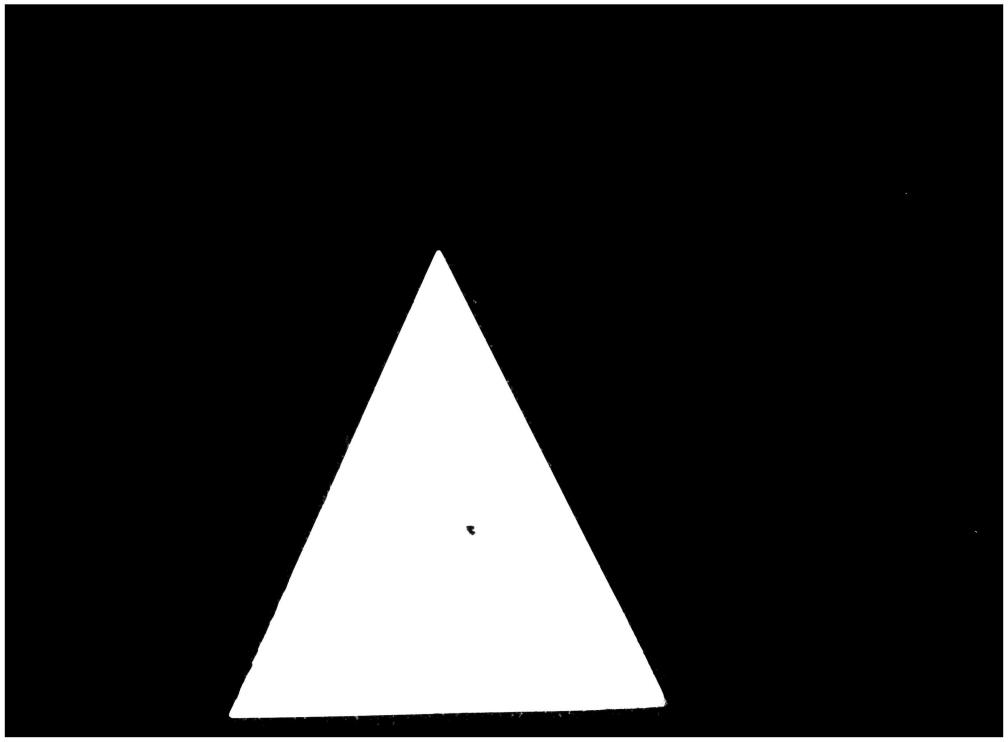
Thos.Giles

1.875.

Received Dec. 30th 1825.

G A Munnally. H.C.

Ordinary.



# POWER OF ATTORNEY. STATE OF GEORGIA.

Ray, Navil Of.					7,45	and a six and	en jagengangangan
(For Those Already Enrolled.)			iN day of	Ť	to receive	I,	STAT
From Walten 190	Executed			-	ive and		STATE OF GEORGIA
DISABLED	3		ESS		receipt for		GEOR
SOLDIER'S PENSION.	presence of		WITNESS WHEREOF, I have hereunto set		t for the		
1901.	e of		EOF, I		e pension	,	County
Name David R Ray			have h			,	
County Hullan Viv			ereunt	by	paid hereon	here	
Disability # Carolinas Amount, \$ V			set n		n and	hereby authorize	
Jan 18 1801.			my haud		request that	norize	
OHN W. LINDSEY,			l and seal this		st that he		
WARBANT HANDED TO		,	this		<b>теш</b> і	***	
Gro. W, Harrison, wate Printer, Atlanta.		[L. s.			remit same to		
nodato		_	1	,	0 1		

STATE OF GEORGIA

County.

Ĭ, hereby authorize

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of 1901.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

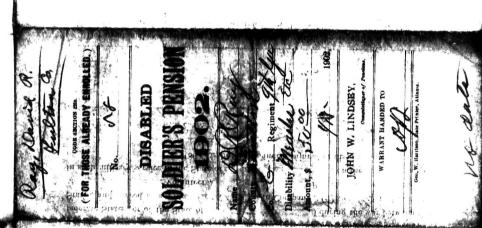
County.

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

day of

[1. 5.]

Executed in presence of



SETTING CEORGE.

FOR APPLICANTS HELETO OUR ALLOWED PPHSIONS.

C 1 116

### For Applicants Heretofore Allowed Pensions.

Personally appears Aurile Whay of Author County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citiz and resident of said State and has resided therein continuously ever since the 25 day of 21 reguest 1834; that he enlisted in the military service of the Cotederate States (or of the State of January C, of I th Regime of Jacquary Volunteers, 's Brigade; that whilst engagent such military service in the State of Jacquary C, on the 186 , he was wounded, injured or diseased as follows:	on- he ent
The of wethicked and Penalises	
Deponent makes application for the pension to which he is entitled for year entitled. 1901. I have heretofore under said law as a resident with County been allowed an invalid pension Dellars, for the year 1900.  Sworn to and subscribed before me, this the Daniel Rough day of the county beautiful to the pension Dellars, for the year 1900.  Sworn to and subscribed before me, this the Daniel Rough day of the county beautiful to the pension Dellars, for the year 1900.  Sworn to and subscribed before me, this the Daniel Rough day of the county beautiful to the pension to which he is entitled for year ent	,.f
Since fully the nature of the wound or character of disease which causes the disability, and explain pur-	di -
STATE OF GEORGIA,  County,  I. John County,  In John Coun	at of a control of
Given under my official signature and seal, this	ow:
day of Jan 1901. John R Wakus  Addit John R Wakus  Ordinary Thurston Count	on y.

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Hullow County
Personally appears DR Ray of Futton
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 of18 34, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
1 OX
States, and served as a figurable in Company G, of Mith Regiment of Lyll Wolunteers, 's Brigade; that whilst engaged in such military service in the State of Ow on the day
in such military service in the State of Ua on the day
of 186_2, he was wounded, injured or diseased as follows:
Had mender which coursed yoursel disability to furyour duly
disability to preson delle
W Description of the second of
Note that the second se
Company of the same distribution of the same of the sa
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1902. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1901
Sworn to and subscribed before me, this the
131K dry of Jan 1802. Post-office
O. D. M. Kinsone
Note: State folly the nature of the would or character of disease which causes the disability, and explain- participating extent of the disability resulting from the would or disease
purifying extent of the disability resulting from the wound or disease
SPATE OF GEORGIA,
Author County
Of Williams
I, John K Wilkinson Ordinary of said County,
do certify that I am well acquainted with Do Ray
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this
day of 1902.
Your Collows Collows
ner County.
Norg Fill all blanks pad of Company and Regiment. Norg All vouchers and affidavits must bear date area. January 1, 1902.

1112 /121

STATE OF GEORGIA.

Ι.

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

hereby authorize

IN WITNESS WHEREOF, I have hereunto set my head and seal this day of . 1903.

Executed in presence of

DISABLED

DIER'S PENSI

OHN W LINDSEY

WARKANT HANDED

1. 5.

(FOR THOSE ALREADY ENROLLED. 13

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

hereby authorize

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

nt

IN WITHERS WHEREOF, I have bereunte set my nend and seat, this

Executed in the presence of

(FOR THOSE ALREADY ENROLLED.

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Personally appears,  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 3% that he enlisted in the military service of the Confederate States for of the State of 1 during the war between the States, and served as a 124000000000000000000000000000000000000
issural Delectity from much
Deponent makes application for the pension to which he is entitled to, the year ending that the 26th, 1903. I have herefore, under said law as a resident of County, been allowed an invalid pension of Dollars, for the year 1902.  Sworn to and subscribed before me, this the day of Post-office Post-office.  Note: State fully the nature of the sea of the decade of discounty decade which causes the disability and experimental states.
STATE OF GEORGIA, County
do certife that I am well acquainted with Recy the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual be represents himself to be an I that he resides in this County  Given under my official signature and seal, this day of 1903.
Note: Fill all olanks and of Gompany and Regiment Note: All venchers and affidavits must bear date after January 1, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, Fulton County

County.
Personally appears of Read
County Species Committee of
County, State of Georgia, who being duly swo. n, 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 1834; that he enlisted in the military service of the Con-
lederate States for of the State of
states, and served as a Vitzi-City in Company / City
of Mal Volunteers self-self-self-self-self-self-self-self-
of Law Volunteers — 's Brigade; that whilst engaged on the State of
o', he was wounded injured or diseased as follows:
General to to to to to to the constitueles
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1904. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1903.
Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the day of JAN 21 1904 1904.  Post-office
1 Ost-Since
Syst - 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,
& time tall. County.
I, John R. Welkenson of Gordinary of said County, to certify that I am well acquainted with a first that
to certify that i am well acquainted with a who is the
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents biaself
to be, and that he resides in this County.
Given under my official signature and seal, this. JAA: 21 1944
day of 1904
Tour Jour J. William /
Ordinary County
Note - Fig. all blanks and of Company and books

Norm - Fitt all blanks and of Company and Regiment.

Norm - All vouchers and affidavits must bear date after January, 1, 19-4.

STATE OF GEORGE	١,	
	COUNTY.	
1,		.hereby authorize
	of.	
to receive and receip, fo	or the pension paid bereon, and re	quest that he remit same to
	¹ .) y .	
at.		
IN WITNESS WHEREO	or, i have hereunto set my band a	nd seal, this
day of	1905.	
		[1 8.]

Executed in the presence of

SOLDIER'S PENSION

DISABLED

### WAKRANT HANDED TO JOHN W LINDSEY 5 1905. Disability Апопит. Name K

			Y. 5	
				hereby author
			of	
o receive a	nd receipt	for the pensio	n paid hereon and requ	est that he remit same
			by	
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				d seal, this
In Wi	TNESS WHE	rreof, I have h	creunto set my hand and	d seal, this
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Cour Septres 128.
(FOR THOSE ALBEADY ESPOLLED.) 63 No.

SOLDIER'S PENSION DISABLED

avid R. Ruy Fritton

1906.

Amount. \$ 52,00 Disability

JOHN W. LINDSEY. WARRANT HANDED TO

County

FOR THOSE ALREADY ENROLLED.

5

0::

Gay, Savid Co.

STATE OF GEOR	RGIA,
ruitou	COUNTY. )
Personally annears	land A. Ray of Fulton.
	no, being duly sworn, says on oath that he is a bona fide citizen
	d has resided therein continuously ever since the
day of	18 that he enlisted in the military service of the Con-
federate States (or of the State	e of Margia ) during the war between the
States, and served as a	dent Conjung the war between the
of Car Vol	inteers 's Brigade; that whilst engaged
in such military service in t	the State of , on the day
of	186 he was wounded injured or diseased as follows:
Huin	ecle
ending October 20th, 1905	I have heretofore, under said law, as a resident of County been allowed an invalid pension of Dollars, for the year 1964.
Su pro to and subscribed diverse at a SA	her we me, this the Service Property Record
	d the wound or character of disease which causes the dissbutty win explain- resofting from the wounding disease.
the applicant in the foregoing	g affidavit and am well satisfied that the statements made
	e true, and I know he is the individual he represents himself
to be, and that he resides in t	144
day of	ny pfficial signature and seal, this SAN ~ 1995
· · · ·	. ,
A 5ix / your Seat	Ordinary Fulton. County
høre.	Ordinary Kulton. County

Fulton. County Note -Fili all blanks and of Company and Regiment. Nors - 111 vouchers and affidavits must bear date after January 1, 1905

### FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,	
Fulton County.	
Personally appears wired to Rely of Fulton.	
County, State of Georgia, who, being duly sworn, says on sath that he is a bonu fide city	
and resident of said State, and has resided therein continuously ever since the	zeu
day of 1811 18 ; that he enlisted in the military service of the C	
federate States, (or of the Space of Lat find ) duying the war between	on-
States, and served as a link Mil in Company of the Regime	ine
of	ned.
in such military service in the State of, on the	dav
of 186 he was wounded, injured or diseased as follo	
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Huunda	
Depenent makes application for the pension to which he is cutitled for the y	ear.
ending October 26th, 1906. I have heretofore, under said law, as a resident	of
Fulton. County, been allowed an invalid pension	of
Dollars, for the year 1905.	
Sworn to and subscribed before me, this the \ Vant \ \ \ - \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
May of 1906	
Post-Office	
A de la	
ForzState fully the nature of the wound or character of disease which causes the disability and exportionarily the extent of the disability resulting from the wound or disease.	lain
State of Georgia,	
Fulton. County.	
1, Ordinary of said Cour	
do certify that I am well acquainted with Lancel L. L.C.	ty
the applicant in the foregoing affidavit, and am well satisfied that the statements m	nd o
by him in his said affidavit are true, and I know he is the individual he represents hims	
o be, and that he resides in this County.	CII
Given under my official signature and seal, this JAN 1 1900:	
day of	
In Alder June	
And Continue Tillon	
Nors.—Fill all bishks and of Company and Regiment.	

Note.-All vouchers and affidavits must bear date after January 1st, 1 +6

Georgia	,	* .	Coun	ity.			
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7.00.017 ·		× ,	is the say	ie person	whoas		
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	STATE OF GEORGIA.
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	to receive and receipt for the pension paid hereon, and request that he remit same to
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	at My home aforce
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State of Georgia,	
Full or	}
Personally appears 2221	( )
Personally appears 2 2211	, May on Fulton
County, State of Georgia, who leing duly swo	orn, says on bath that he is a bona has citize
and resident of said State, and has resided the	
day of 1877; that be	enlisted in the military service of the Cou
federate States (or of the Spate of	
States, and served as a Ticeal	in Company di, of th Regimen
of Volunteers	's Brigade; that whilst engaged
in such military service in the State of _	on theda
of 186 , he w	as wounded, injured or diseased as follows
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Sterricle	
VIVICE CO	
	Person I e
Deponent makes application for the	pension to which he is entitled for the year
ending October 25th, 1907. I have heret	ofore, under said law, as a resident of
A Lilian.	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
MT ( CI )	. County, been allowed an invalid pension of
1266	Dollars, for the year, 1908
1266	Dollars, for the year, 1908
1266	Dollars, for the year, 1908
1266	Dollars, for the year, 1908
Sworn to and subscribed before me, this	Dollars, for the year, 1908
Sworn to and subscribed before me, this	Dollars, for the year 1906, the dand of his hard project.  Postoffice
Sworn to and subscribed before me, this	Dollars, for the year 1906, the dand of his hard project.  Postoffice
Sworn to and subscribed before me, this	Dollars, for the year 1906, the dand of his hard project.  Postoffice
Sworn to and subscribed before me, this case of the wound or characteristic of the wound or characteristic of the sate of the disability reacting from the wo	Dollars, for the year 1906.  the dand A.
Sworn to and subscribed before me, this case of the wound or characteristic of the wound or characteristic of the sate of the disability reacting from the wo	Dollars, for the year 1906.  the dand A.
Sworn to and subscribed before me, this	Dollars, for the year 1906, is the disability and explain or disease which causes the disability and explain
Sworn to and subscribed before me, this	Dollars, for the year 1906.  It has been done to disease which causes the disability and explain under cisease  Ordinary of said County
Sworn to and subscribed before me, this day of 1907  Solver of Memoran 1907  Norm State fully the nature of the wound or charmed the scient of the disability reaching from the worst trade of Georgia,  Fulton County.  County.  In the applicant in the foregoing affidavit, and am	Dollars, for the year 1906.  It the Annual R. Rug  Postoffice  Description of disease which causes the disability and explain our disease  Ordinary of said County  World Statisfied that the statements made
Sworn to and subscribed before me, this day of 1907  Solver of Memoran 1907  Norm State fully the nature of the wound or charmed the scient of the disability reaching from the worst trade of Georgia,  Fulton County.  County.  In the applicant in the foregoing affidavit, and am	Dollars, for the year 1906.  It the Annual R. Rug  Postoffice  Description of disease which causes the disability and explain our disease  Ordinary of said County  World Statisfied that the statements made
Sworn to and subscribed before me, this day of 1807  Note - State fully the nature of the wound or charmed the extent of the disability resulting from the work that of Georgia,  Fulton County.  County.  In the applicant in the foregoing affidavit, and amony him in his said affidavit are true, and I know the said affidavit ar	Dollars, for the year 1908.  It the Annual Rolling and Rolling and Rolling and Rolling and Rolling and Rolling and Explain and Explain and Explain and Explain and Explain and Explain and Rolling and Explain and Rolling and Explain and Rolling and Explain and Rolling and
Sworn to and subscribed before me, this day of 1807  Note - State fully the nature of the wound or charmed the extent of the disability resulting from the work that of Georgia,  Fulton County.  County.  In the applicant in the foregoing affidavit, and amony him in his said affidavit are true, and I know the said affidavit ar	Dollars, for the year 1906.  It the Carrier of Charles which causes the disability and explain a country of said County.  Ordinary of said County.  Well satisfied that the statements made whe is the individual he represents himself
Sworn to and subscribed before me, this day of	Dollars, for the year 1908.  It the Dand R. Fay  Postoffice  Description of disease which causes the disability and explain  Ordinary of said County.  Well satisfied that the statements made whe is the individual he represents himself are and seal this.  1907.
Sworn to and subscribed before me, this	Postoffice  Ordinary of said County,  Ordinary of said County,  Well satisfied that the statements made whe is the individual he represents himself are and seal this.

Ordinary____ Nove.—Fill all blanks and of Company and Regiment.
Nove.—All vouchers and affidaviss must bear date after January 1ss, 1907.

Affix your seal here

Widow's Application

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

Name Mus Eva Ray Widow of Jas K. P. Flees Date of Marriage Many 27
Company

7th Ba dry Regiment

Approved R. de J Ladren Pention Commissioner

Ord. Notified

Ordinary's Certificate

of said State she represents nerself to be since January 1st, 1929 that

ful and trust e of husbands that both of them Land before skyning the foregoing affidat

and their statements are entitled to full faith affidavits, and that they

under my hand and official seal of office this

(SEAL OF ORDINARY)

are truth-

DISTRUCTIONS

defore any vestions are answered the Ordinary shall sweet applicany and the value of voternon year that you will true answers make to each of the questions and life the whole truth. So help you God."

And give will be the whole truth. So help you God.

Middloma affactit may be attended if blank spaces are manifacent inly addows who narried prior to January 1st 18s1, are critised.

Old affactit may be made before the Ordinary 1st 18s1, are critised.

Old affactit may be made before the Ordinary of the County to which the applicant the ordinary of the County to which the applicant properties of the County to the Co

the back of the application careful the bulky form of Marriage

5-5-1931 E

JOHN W. CLARK, Commissioner of Pensions.

Ordinary of said County, do certify the applicant for pension; that

continuously, a bona fid residents of

Ordinary.

JOHN W. CLARK, 3

### Ordinary's Certificate

, Ordinary of said County, do certify the applicant for pension; that son 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 E. R. Lu Claudan

the witness who swears to the sensing or husband that both of them are now residents of said County and were duly sworn by me before sygning the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit

Given under my hand and official seal of office this (SEAL OF ORDINARY) County.

### INSTRUCTIONS:

### APPLICATION FOR PENSION BY A WIDOW

Under Act of 1910, as Amended by Act of 1919, and Constitutional

	Amendment of 1920.
	QUESTIONS FOR APPLICANT TO ANSWER
STA	TE OF GEORGIA,
	QUESTIONS FOR APPLICANT TO ANSWER:  TE OF GEORGIA,  COUNTY.
	Personally appears before me, Luca Esa Rouy of said State and County
and l	hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and
the C	Constitutional Amendment of 1920, and submits testimony to support the same, and after being
duly	sworn true answers to make to the questions propounded, answers as follows, to wit:
1.	What is your name, and where do you reside? (Give Post Office and County)
2.	How long and since when have you been, continuously a bone had resident citizen of the
State	of Georgia? 1850
3.	When, where and to whom were you married? May 1866, wheat steen the
a.	Have you married since the death of first and soldier husband?
4.	When, where and in what Company and Regiment did your husband enlist as a soldier in Con-
feder	ate Army or Georgia Militia? (State the arms and class of Service, and give service)
and (	aptaint James K. Valle treld entested en Co St 7 Rog 14 go
2	mantry may 31, 1861
5.	When and where did the commands of warms
ice?	Was your husband person by present with his
6.	Was your husband personally present with his command when it was surrendered or dis-
charg	red? yes
7.	If he was not present, state specifically and clearly where he was?
8.	When did he leave the Command?
a.	For what cause did he leave?
b.	By whose authority did he leave?
c.	For how long was his leave of absence granted? In what way?
e.	
f.	What was his physical condition when he left his command? Securally Currentled.  What offort did he make to return to his Command?
	In what way was he prevented from going back to Command?
h.	Was he captured by the enemy at any time?
i.	If so, when and where? In what prison was he held and when was he released?
j.	When and where did your first husband die? 1888, Ottavila Grana
k.	Were you residing together when he died?.
1.	If not, how long have you resided apart?
m.	Are you now a widow? 400
9.	Have you or your husband herstofore been paid a pension by the State?
0.	o, when and for what cause were you or your husband placed on the roll?

(SEAL OF ORDINARY)

^{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 evicacy of the state of the questions asked you and the evicacy of the property of the state of the questions asked you and the evicacy of the state of the property of the state of the questions asked you and the evicacy of the state of the property of the state of the questions asked you and the evicacy of the state of the questions asked you and the evicacy of the property of the questions asked you and the evicacy of the property of the evicacy of the property of the property of the experiment o