

LIGHT PRINT AND, OR BAD COPY.

Descriptive List and Account of Pay, Clothing, Bounty, &c, of

NOTE:—The names of persons for whom this list will be made must be given in full, and the names of the persons for whom it is made must be given in full, and the names of the persons for whom it is made must be given in full.

STATION: *1st Lieutenant*

DATE: *1st March 1864*

No.	NAME	RANK	DESCRIPTION			RESIDENCE		OCCUPATION	When	By Whom	Period	By Whom	To what time	By Whom	REMARKS
			Initials	Complexion	Age	State or Kingdom	Town or County								
1	<i>John Bull</i>	<i>1st Lieut</i>	<i>5' 8"</i>	<i>5</i>	<i>5</i>	<i>White</i>	<i>England</i>	<i>London</i>	<i>1864</i>	<i>1st March</i>	<i>1st March</i>	<i>1st March</i>	<i>1st March</i>	<i>1st March</i>	<i>1st March</i>

I certify that the above is a correct Transcript from the Records of *the War Office*

By *John Bull*

For *the War Office*

Register of List and Account of Pay, Clothing, Bounty, &c., of

STATION: *1st Cavalry*
DATE: *17th Nov 1864*

NAME	RANK	AGE	FEET	INCHES	COMPLEXION		EYES	HAIR	RESIDENCE		OCCUPATION	WHEN TURNED OUT	BY WHOM	PERIOD	LAST PAID		REMARKS
					Complexion	Build			State or Kingdom	Town or County					To what time	By	
<i>John Brown</i>	<i>Private</i>	<i>30</i>	<i>5</i>	<i>8</i>	<i>Dark</i>	<i>Medium</i>	<i>Blue</i>	<i>Brown</i>	<i>England</i>	<i>London</i>	<i>Farmer</i>	<i>1864</i>	<i>By</i>	<i>1st Cavalry</i>	<i>1st Cavalry</i>	<i>1st Cavalry</i>	<i>1st Cavalry</i>

I certify that the above is a correct Transcript from the Records of *1st Cavalry*

REMARKS: *1st Cavalry*

LIGHT PRINT AND, OR BAD COPY

Describe List and Account of Pay, Clothing, Bounty, &c., of

NOTE 1.—The amount of Pay due at date will be carefully stated.
 2.—The amount of Clothing due at date will be carefully stated.
 3.—The amount of Bounty due at date will be carefully stated.
 4.—The amount of Pay due at date will be carefully stated.
 5.—The amount of Clothing due at date will be carefully stated.
 6.—The amount of Bounty due at date will be carefully stated.

NOTE 2.—A correct statement of the amount of Pay due at date, and the amount of Clothing due at date, and the amount of Bounty due at date, must be carefully stated.
 3.—The amount of Pay due at date, and the amount of Clothing due at date, and the amount of Bounty due at date, must be carefully stated.
 4.—The amount of Pay due at date, and the amount of Clothing due at date, and the amount of Bounty due at date, must be carefully stated.

NOTES.—The amount of Insurance Pay due at date will be carefully checked by the Agent of the Insurance Company, and the receipt and proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the Insurance Company, and the proceeds of the same will be sent to the Agent of the 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STATION: *Adjutant General's Office*
 DATE: *Oct 13 1863*
 I certify that the above is a correct Transcript from the Records of *John C. Williams*
J. C. Williams

Descriptive List.

Private *John C. Williams* Co. *1st* Regiment *1st*
 has *blue* eyes *brown* hair *fair* complexion,
 feet *6* inches high, aged *36* was born in the State of *Pa*
 County, by occupation a *farmer* was enlisted *March 1862*
 at *York* by *J. P. Thomas* was paid to *1 year* by *Capt. Henry*
 has received *50* clothing and computation for such.

AFFIDAVIT.

I do solemnly swear that the statements made by me on this Descriptive List are correct.

Attest

J. C. Williams, M. D.,
 Surgeon in Charge Hospital at Convalescent Depot,
 Knoxville, Tennessee.

I do solemnly swear that the statements made by me on this Descriptive List are correct.

Attest:

Surgeon in Charge Hospital at Convalescent Depot,
Knoxville, Tennessee.

LIGHT PRINT AND. OR BAD COPY

Account of Pay, Clothing, Bounty, &c., of

The amount of PAY, CLOTHING, BOUNTY, &c., shall be monthly stated. The amount of PAY, CLOTHING, BOUNTY, &c., shall be monthly stated. The amount of PAY, CLOTHING, BOUNTY, &c., shall be monthly stated.

NOTES: A marginal statement of the man's Clothing Account must be made in full, and the amount due to or from him must be properly stated. If the man has been engaged in any service or otherwise to be mentioned, together with date and place. If the man has been engaged in any service or otherwise to be mentioned, together with date and place.

DESCRIPTION						RESIDENCE		OCCUPATION	ENLISTED				LAST PAID		BOUNTY		REMARKS.
Age	Feet	Inches	Complexion	Build	Hair	State or Kingdom	Town or County		When	Where	By Whom	Period	By Paymaster	To what time	Paid	Due	
18	5	8	Dark	Medium	Black	Mo.	Wm. Smith	Farmer	March 1864	Lawrenceville	C. P. Thomas	1 year	By Wm. Smith	Oct 1 1864	50		From C. P. Thomas for clothing \$32.00 has not been accounted for clothing and bounty from the remaining time to now

I certify that the above is a correct Transcript from the Records of

Surgeon in Charge Hospital at Convalescent Depot,
Knoxville, Tennessee.

Descriptive List.

Private

Co.

Regiment

has eyes hair complexion feet inches high, aged 4 was born in the State of County, by occupation a was enlisted at by for was paid to by clothing and computation for such.

AFFIDAVIT.

I do solemnly swear that the statements made by me on this Descriptive List are correct.

Attest:

Surgeon in Charge Hospital at Convalescent Depot,
Knoxville, Tennessee.

Descriptive List.

Private

Co.

Regiment

has eyes hair complexion,
feet inches high, aged 4 was born in the State of
County, by occupation a was enlisted 11-24-1860
at by for was paid to by
has received clothing and computation for such.

AFFIDAVIT.

I do solemnly swear that the statements
made by me on this Descriptive List are cor-
rect.

Attest:

M. D.,
Surgeon in Charge Hospital at Convalescent Depot,
Knoxville, Tennessee.

John H. ...
9th Jan 1911

No.

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

County

Name

Company

Regiment

...

...

...

...

...

Application of R. D. Waldron
 Fulton County, Ga.
 14th Jan 1914

**Confederate
 Soldier's Application.**

UNDER ACT 1910.

County Fulton
 Name R. D. Waldron
 Company A
 Regiment 58th Regt & 7th Cav. Regt
 J. W. LINDSEY,
 Commissioner of Pensions
 CHAR. F. BRAD, State Printer, Atlanta.
 14/1/14

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

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

1. What is your name and where do you reside? (Give County and Post-office)
R. D. Waldron Atlanta Fulton County Ga
2. How long and since when have you been a continuous resident citizen of this State?
Since June 1875
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
Enlisted as Private in Co. A 58th Regt Infantry 1862
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
Enlisted in Co. A 58th Regt Infantry April 30 1862
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge).
from April 30 1862 to July 1862 having furnished substitute
6. When and where was your Company and Regiment surrendered or discharged from the Service?
at Fort Fisher in 1865
7. Were you actually present with your Command when it was surrendered or discharged?
no
8. If you were not actually present, state specifically and clearly where you were.
I was in prison at Danvers Mass
9. Where was your Command when you left it?
Providence Station Va
10. When did you leave the Command?
June 11th 1864
11. For what cause did you leave?
I was taken prisoner
12. By whose authority did you leave?
Regt U S Army
13. For how long was your leave granted? In what way?
I was a Prisoner
14. Why did you not return to your Command after leave expired?
My term had expired
15. In what way were you prevented?
none
16. What effort did you make to return?
none
17. Were you captured during the war?
I was at Brantillon Station Va
18. If so, when, and where? In what prison were you held and when were you released?
at Danvers Mass
19. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.)
1 house 15. 100 cups 12.00
20. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price?
none
21. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list).
22. What annual or monthly income or earnings of yourself and wife and the source derived have you?
1 Rec. a salary of 80 dollars per month
23. Are you drawing a pension of any amount from this State or the United States?
none
24. Have you ever applied for the Georgia Pension and had it refused? and for what reason it was not allowed?
I have never applied for any Pension

Subscribed and sworn to before me, this 14th day of Jan 1914
J. W. Lindsey Ordinary,
 of Fulton County.

QUESTIONS FOR WITNESS AS TO SERVICE STATE OF GEORGIA.

County: Wayne
R. D. Hall is being presented as a witness in support of the application of R. D. Hall for a writ of Habeas Corpus, and after being sworn to answer truthfully to the questions propounded, answers as follows:

1. What is your name and where do you live?
Wayne County, Georgia
2. How long and since when have you known the applicant?
Since November 20, 1864
3. Where does he now reside, and since when has he been a resident, continuing resident in this State, and how do you know?
He now resides at Wayne County, Georgia
4. When, where and in what Company and Regiment did R. D. Hall enlist during war from 1861 to 1865? (Give date and place)
He enlisted in the 1st Georgia Cavalry Regiment, at Wayne County, Georgia, in 1861.
5. How did you obtain your information of this service?
From the Wayne County, Georgia records.
6. How long within your own personal knowledge did R. D. Hall serve with this Company and Regiment? (Give date)
From November 20, 1864 to January 1, 1865.
7. When and where was his Command surrendered or dispersed? (Give date and place)
At Wayne County, Georgia, on January 1, 1865.
8. Were you personally present at the Surrender?
Yes.
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender?
11. If not where was he and how came him there?
12. When did he leave his Command? Where was his Command when he left it? for what cause did he leave? By whose authority did he leave? How do you know long was he granted leave? If of your own knowledge (Tell clearly and specifically)
13. In what way was he prevented from returning to his Command? How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? If so, when and where? In what prison was he held?

Sworn to and subscribed before me, this 20 day of October, 1910.
J. D. Crawford Ordinary of Wayne County.

AFFIDAVIT OF TWO FREEHOLDERS STATE OF GEORGIA.

County: Wayne
 Personally before me, J. D. Crawford, Ordinary of said County, who on oath says that they are Freeholders residing in said County, and who know the applicant for purposes and we know the power of the Ordinary of said County and wife and of his duty to see that the applicant is not a Freeholder.

J. D. Crawford Ordinary of Wayne County.

Sworn to and subscribed before me, this 20 day of October, 1910.
J. D. Crawford Ordinary of Wayne County.

1910. (State fully by name)
 1. When and to whom was it made? Wayne County, Georgia
 2. What was the purpose or object of the same?
 3. What person or persons were present?
 4. What was the substance of the proceedings?
 5. Was the substance of the proceedings made in good faith and full value?
 Sworn to and subscribed before me, this 20 day of October, 1910.
J. D. Crawford Ordinary of Wayne County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.
 County: Wayne
J. D. Crawford Ordinary of said County, certify that I know the applicant R. D. Hall for Wayne County, Georgia is the person he represents himself to be and resides in said County. That I also know R. D. Hall the witness swearing to said County. That R. D. Hall who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all satisfied with the same and their statements are entitled to full faith and credit. That the Tax Returns of Wayne County, Georgia for 1909, 1910 and 1911 show that R. D. Hall and wife value for tax in 1909, 1910 and 1911 for 1909, 1910 and 1911 day of October, 1910.
J. D. Crawford Ordinary of Wayne County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: "On do solemnly swear that you will true answers make to every question asked you and the evidence you shall give shall be the whole truth; so help you God."
 2. Additional affidavits may be taken by the Ordinary and certified by him.
 3. All affidavits must be made before the Ordinary and certified by him.
 4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders unnecessary.

J. D. Crawford Ordinary of Wayne County, Georgia
 Certify that R. D. Hall is of true and good character and his statement is entitled to full faith and credit.
 Return my official signature this 20th day of October 1910.
J. D. Crawford Ordinary of Wayne County, Georgia

STATE OF GEORGIA, Fulton County

I, Thos H Jeffries Ordinary of said County, do certify that I personally know Rutha E. Waldron, the applicant, and that she is the lawful widow of R.D. Waldron, and was on the Pension Roll of said Fulton County, and was paid a Pension from Fulton County for 1921 and at the time of his death on the 6 day of July, 1921, there was due to him and unpaid his Pension of \$15.00 Dollars from the State of Georgia, and I know Mrs J. T. Bittner, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 12 day of June, 1921.

(SEAL.)

Thos H Jeffries Ordinary,
Fulton County.

Waldron, R.D.
Fulton County
1921
Application for Pension Due
Deceased Soldier
UNDECEASED ACT 1911
To be paid his Widow or Dependent Children
BY
Mrs. Rutha E. Waldron
Widow of R.D. Waldron County
of Fulton
No. 2-503a Recd.
Date of Death 7/6 1921
Approved and ordered paid
Jun. 12 1921
J. W. LAMBERT
Commissioner of Pensions
Ordinary: Fill out above in full and
this sent to Pension Office for approval
before you pay out the money.
Jun 11 1921
Waldron

GEORGIA, _____ County.

I hereby authorize and constitute _____, of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 1921 through my deceased husband, _____, who was on Pension Roll and paid from _____ County for 19____. Witness my hand this _____ day of _____, 1921.
Attested before me: _____

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA, Fullon County

Personally before me comes Mrs. Rachael Waldron of said County, who after being duly sworn, on oath says that she is the widow of R.D. Waldron who was duly enrolled as a Pensioner from the County of Fullon and was paid a Pension of One Hundred Dollars from Fullon County for 1920 and that the said R.D. Waldron died in Fullon County on the 6 day of July, 1921 and at the time of his death a Pension of \$15.00 was due him from Fullon County and unpaid for 1921. Applicant further swears that she married the said R.D. Waldron on the 14 day of March, 1920 in Appling County and State of Ga and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 19 day of July, 1921.
Arthur R. Mearns Ordinary } Mrs. Rachael Waldron
Fullon County }

(SEAL)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Fullon County

Personally before me comes Mrs. J. B. Pittman who on oath says that he knew R.D. Waldron while in life and that he knows Mrs. Rachael Waldron the above applicant; that he knows that the said R.D. Waldron and Mrs. Rachael Waldron were in due form of law married in the County of Fullon in the State of Georgia on the 14 day of March, 1920 and that they resided together as husband and wife from date of marriage to the day of his death on the 6 day of July, 1921 and I now know that she is his dependent widow.

Sworn to and subscribed before me this 19 day of July, 1921.
Arthur R. Mearns Ordinary } Mrs. J. B. Pittman
Fullon County }

(SEAL)

Note for—This form can be used for pension or other claims where there is no other.
1. Care must be used to get true names of parties attached here, if names are not given by witness.
2. This form is for the use of the Pension Office and the Pension Office will not accept this form unless it is filled out by the Pension Office and the Pension Office will not accept this form unless it is filled out by the Pension Office.
3. The Pension Office will not accept this form unless it is filled out by the Pension Office and the Pension Office will not accept this form unless it is filled out by the Pension Office.
4. The Pension Office will not accept this form unless it is filled out by the Pension Office and the Pension Office will not accept this form unless it is filled out by the Pension Office.

as husband and wife from date of marriage to the day of his death on the 7 day of July, 1910 and I now know that she is his dependent widow.
 Sworn to and subscribed before me this 19 day of July, 1921.
Orman R. Mayhew Ordinary Mar. J. B. Bittner
Frederick County.

NOTE: This form can be used by justices of the peace to certify to the fact that a person is a dependent widow.
 20-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.
 21-This form is for the use of the ordinary who died after October 1910, and for widows and dependent children of Service.
 22-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.
 23-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.
 24-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.
 25-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.
 26-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.
 27-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.
 28-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.
 29-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.
 30-Ordinary must send to all such justices of the peace a copy of this form, to be given to the widow.

STATE OF GEORGIA WARE COUNTY:

Personally came before me Henry Strickland of said State and County and after being duly sworn on oath says he is a member of Company "C" of the 7th Georgia Cavalry, and was captured at Provilian station Va, on the 11th Day of June 1864, and sent to prison at Elmira, New York, and was kept there untill after the close of the War, and was discharged from prison on the 14th Day of June 1865. I further swear that R.D. Waldron of the same Company was captured with me and was also kept in prison at the same place untill after the close of the War.

Sworn to and subscribed before me this the 25th Day of October, 1910. H. Strickland
Orman R. Mayhew
 Ordinary Ware County Georgia.

GEORGIA WARE COUNTY:

I The Undersigned hereby certify that I know Henry Strickland, and know him to be truthful and trustworthy and his statement is entitled to full faith and credit.

This October, 25th 1910 Orman R. Mayhew
 Ordinary Ware County Ga.

MARRIAGE LICENSE
 of
R. D. Waldron
 AND
Miss Rachel Branch
 Issued Month 13th 1921
 and Recorded on Page 22 Book
C of Marriage Licenses
Geo. S. Patterson
 Ordinary

Georgia Appling County
J. G. H. Bayley Ordinary of Appling County
 Georgia hereby certify that the within and foregoing is a true copy of marriage license issued to R. D. Waldron and Miss Rachel Branch as appears of Record in this office Given under my hand and Seal of said Court this July the 21st 1921
J. G. H. Bayley Ordinary
 & Officer Clerk of said Court

I The undersigned hereby certify that I know
Henry Strickland, and know him to be truthful and trustworthy
and his statement is entitled to full faith and credit.

This October, 25th 1910

R. D. Waldron
Ordinary Ware County Ga.

I J. J. H. Basley ordinary of Appling County
Georgia hereby certify that the Within and foregoing
is a true copy of marriage license issued to R. D.
Waldron and Miss Rachael Branch as appears of
Record in this office Given under my hand
and Seal of said Court this July the 21st 1921
J. J. H. Basley ordinary
Clerk of said Court

172

MARRIAGE LICENSE

STATE OF GEORGIA COUNTY OF APPLING

TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

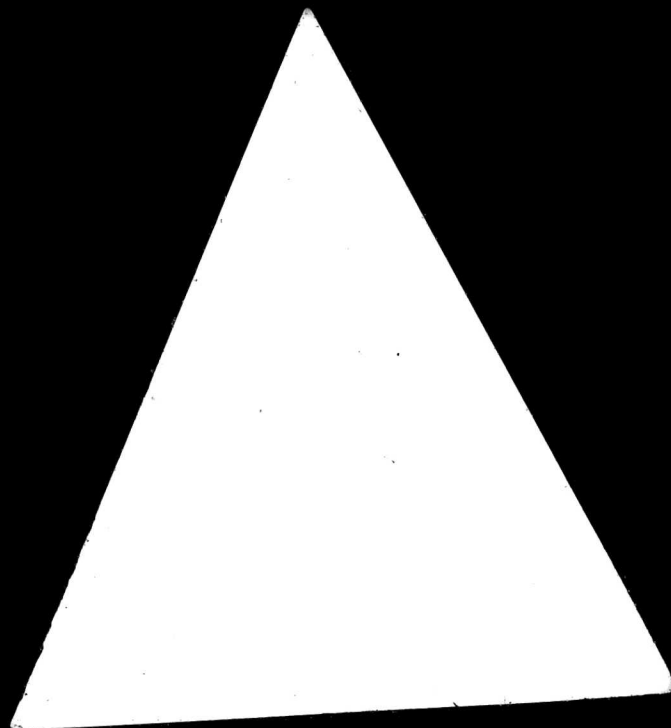
You are hereby authorized to join
Mr. Ransel D. Waldron and Miss Rachael Branch
in the Holy State of Matrimony according to the Constitution
and laws of this State and for so doing this shall be your license.
And you are hereby required to return this license to me
with your Certificate hereon of the fact and date of the Marriage.
Given under my hand and seal this 13th day of
March 1889 Jas. S. Patterson Ordinary (L.S.)

STATE OF GEORGIA **CERTIFICATE** COUNTY OF APPLING

I certify that R. D. Waldron and Rachael Branch
were joined in Matrimony by me this 14th day of March Eighteen Hundred
and Eighty Nine
Recorded Jas S Patterson
Ordinary

Rev D. F. Studley M. S.

I certify that *P. D. Halden* and *Kasheh Toranian*
were joined in matrimony by me this *14th* day of *March* *Eighteen Hundred*
and *Eighty nine*
Recorded *Geo B Patterson* *##* *Rev D. F. Steadley M. G.*
Ordinary



Fuller
Fuller
County

No.

Widow's Pension

✓ UNDER ACT 1910.

Fuller
Richardson
Widow
Widow
C. B. 1740 Caly

J. W. LINDSEY,
Commissioner of Pensions.

Under Act 1910, Widow's Pension.

9/24/10

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

STATE OF GEORGIA.

Fulton County.

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

1. What is your name, and where do you reside? Rebecca Ann Waldrop, 67 years
2. How long and since when have you been a continuing resident in the State of Georgia? 67 years
3. When, where and to whom were you married? L. H. Waldrop, July 22, 1861
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.) Company B,
First Georgia Cavalry, in March 1862
5. When and where did the Commands of your husband surrender or discharge from the army?
in North Carolina
6. Was your husband personally present at the time of the surrender or discharge of this Command? yes
7. If he was not present state clearly where he was?
8. Where was his Command when he left?
- a. For what cause did he leave his Command?
- b. By whose authority did he leave his Command?
- c. For how long was he granted leave of absence?
- d. What was his physical condition when he left his Command?
- f. What effort did he make to return to his Command?
- g. In what way was he prevented from going back to Command? no
- h. Was he captured by the enemy at any time?
- i. If so, when and where captured and where held as a prisoner, and when and for what cause re-
leased?
- j. When and where did your husband die? Were you residing together when he died? If not,
how long had you resided apart? in Carroll Co. Dec 17, 1864
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.) 80 acres of land in Carroll Co
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received
for it and what did you do with the proceeds thereof? (Give items and cash value.) none
11. What property of any description of any value have you now? 80 acres of land
Give hat and cash value? about \$1000
12. What are your annual earnings or income and their value?
13. Have you heretofore been paid a pension by the State? have not
If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the _____ day of _____ 1908.

Rebecca Ann Waldrop
of Fulton County.

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

Carroll County.
Personally before me John H. Smith who after
being duly sworn true answers to make, to the following questions, answers as follows:

Widow's Pension

UNDER ACT 1910.

County

Name

Widow

J. W. LINSLEY,
Commissioner of Pensions.

See 2nd Book, Page

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

1. What is your name and where do you reside? W. J. Millican, Carroll County, Ga.
2. How long and since when have you known Frances Ann Waldrop applicant?
3. How long and since when has she continuously resided in this State? (Give date.) Since she was 1890, from the date of her marriage to her husband.
4. When and to whom was she married? How do you know? She was married to her husband in 1890.
5. How long and since when did you know W. J. Millican her husband?
6. When, where and in what Company and Regiment did W. J. Millican enlist? Max. 1862, in Georgia County, Co. B - 1st Ga. Cavalry
7. Were you a member of the same Company? I was.
8. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Max. 1862 until the surrender.
9. When, and where did his Command surrender, and was discharged?
10. Were you personally present when it was surrendered? Yes If not where were you? Present and how came you there? Present
11. Was the husband of applicant personally present at surrender? Yes If not where was he? He was present when, where and for what cause did he leave Command? (Give date.) He was discharged by whose authority did he leave his Command? By the officers in command. How do you know all this? Do you state if of your own personal knowledge? (State all you know fully, and how you know it.)
12. For what cause, if you know of your own knowledge was he prevented from returning to his Command? War was over.
13. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? None.
Sworn to and subscribed before me this the 27 day of Aug. 1910.
W. J. Millican Ordinary.
of Carroll County.

AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA.
Carroll County.

Personally before me comes H. M. Earnest & W. J. Millican who on oath says that they are freeholders of said County and that they know Frances Ann Waldrop of said County and know what property she owned on 4th Nov. 1906, and its cash value to be as set out by Schedule (A) as follows: 78 Acres Land, Val. \$1,000.
Personal property None \$
Notes and accounts due None \$
Total \$
Schedule (B).
We know the property sold or given away since Nov. 4th 1906, its cash value to be as follows:
Personal property None \$
Money, Notes and accounts None \$
Schedule (C).
We also know what property she has now in her possession, use and control to wit:
80 Acres of land, worth \$1,000.
Horses and Mules None \$
Cows and Hogs None \$
Other property None \$
Income and earnings None \$
Total Value of all property and effects \$1,000.
Sworn to and subscribed before me this the 27 day of Aug. 1910.
H. M. Earnest & W. J. Millican Ordinary.
of Carroll County.

ORDINARY'S CERTIFICATE.
STATE OF GEORGIA.
Carroll County.

Ordinary of said County do certify that, I know W. J. Millican the applicant for pension. She is the person who represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1906.
That I also know W. J. Millican the witness who swears to the service of husband, and H. M. Earnest & W. J. Millican who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.
That the Tax Returns Carroll County Returned for Tax is for 1908 \$200. for 1910 \$200.
Sworn under my hand and official seal of office this 27 day of Aug. 1910.
SEAL W. J. Millican Ordinary
Carroll County
(SEAL)
NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who married prior to first January 1870, are entitled.

ORDINARY'S CERTIFICATE.
STATE OF GEORGIA.
Fulton County.

Ordinary of said County do certify that, I know Frances Ann Waldrop the applicant for pension. She is the person who represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1906.
That I also know W. J. Millican the witness who swears to the service of husband, and H. M. Earnest & W. J. Millican who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.
That the Tax Returns Fulton Co Returned for Tax is for 1908 None for 1910 None
Sworn under my hand and official seal of office this 20 day of Sept. 1910.
SEAL W. J. Millican Ordinary
Fulton County
(SEAL)
NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who married prior to first January 1870, are entitled.
5. Attach certified copies of marriage licenses if obtainable. If not, prove marriage, by some person, or by general reputation.

We also know what property she has now in her possession, use and control to wit:

50 Acres of land worth	\$1100
Horses and Mules	none
Cows and Hogs	2
Other property	11
Income and earnings	11
Total Value of all property and effects	\$1100

Sworn and subscribed before me this the 27 day of Decr 1890

A. J. Barnes, Clerk Court
of Coweta County

3 Only widows who have been married before the war are eligible for a pension.
 4 Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person of good moral reputation.



NEWNAN GA.

Georgia Coweta County

Personally appeared before me, *E. E. Young & P. Pauline* who being duly sworn in support of a claim for pension by Mrs. S. H. Waldrup widow of Stephen Holmes Waldrup, deceased.

We know that the said Mrs. S. H. Waldrup is the widow of Stephen Holmes Waldrup, and has remained his widow since his death. We know Stephen Holmes Waldrup was, said Stephen Holmes Waldrup enlisted in the Confederate Army in March, 1862, at Newnan Ga, in Co "B", 1st Ga. Cavalry. We were members of the same Company and Regiment.

Said Stephen Holmes Waldrup served in said Co "B", 1st Ga. Cav. from enlistment to the close of the war, and made a valiant, faithful soldier. We have no interest in a pension having accrued to his widow. We were all present at the surrender.

Sworn to & subscribed before me *E. E. Young & P. Pauline*
 May 7, 1904.

E. E. Young, Ordinary
P. Pauline, Clerk Court

I certify that *E. E. Young & P. Pauline* are citizens of said County & are of good moral reputation.

This May 7, 1904. *E. E. Young, Ordinary*

of our own company and
said Stephen Holmes Waldrop served in said
Co "B", 1st Ga. Cav. from enlistment to the
close of the war, and made a valiant, faithful
soldier. We have no interest in a pension
being claimed to his widow. We were all
present at the surrender. } Geo. E. Young
known to & subscribed before me. }
May 7, 1909.

Thos. C. Lomax

I certify that Geo. E. Young & Thos. C. Lomax
are the persons who said above
I myself of which I am not
any more of that
This May 7-1909. L. A. P. Ordway

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Fulton COUNTY. }
Know all Men by These Presents, That I, Drucilla Waldrop
of Fulton County, in said State, do hereby appoint

Wm. Reid my true and lawful attorney in fact, for
me and in my name, to receive and receive 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 author-
izing my said Attorney to receive and receive for the same, and to execute and deliver up to the Governor, or for
any use of money which may be coming to me for the reasons aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of February 1895.
Drucilla X Waldrop [L.S.]
wif

Executed in the presence of us
W. L. G. Williams
Ordinary DIRECTIONS.

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

Waldrop, Drucilla
Fulton, Georgia
1895.
No. 3952
Widow's Pension.
For year ending February 15, 1895.
PAID TO
Mrs. Drucilla Waldrop
OF
Fulton County.
Widow of Wm. R. Waldrop
Warrant Issued,
Feb 10 1895.
AND HANDLED TO
Atty
Gen. W. Williams, State Printer
Georgian Publishing House,
No. 107 South.

H. M. Reid, Atty.

POWER OF ATTORNEY.
STATE OF GEORGIA, }
Duluth COUNTY. }

Know all Men by These Presents, That I,

Emilia Waldump
of Duluth

County, in said State, do hereby appoint,

Wm Reid

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

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

Emilia X Waldump [L.S.]
Wm Reid

Executed in the presence of us

W. L. Waldump
(Duluth)

DIRECTIONS.

If allowed, send amount by
at _____, and oblige.

Form No. 5.

Affidavit to be Made by the Widow.

STATE OF GEORGIA, }

COUNTY OF *Duluth*

In person came before me, the undersigned Ordinary in and for the County of *Duluth*

Mrs. Emilia Waldump, who being sworn according to law, says under oath that she is the widow of *Wm R. Waldump*, who was a soldier in the service of the Confederate States, and served as a member of Company *A*

4th Regiment of *Georgia* Volunteers; that he enlisted in said service on or about the *4th* day of *March* 1862, and was in the Confederate Army up to *March* 1865. That while in the Army, he was on the day of *1864*. (See Note No. 1)

He became so sick that he was sent home from the service reaching home in Grapewick County Georgia in March 1865 and continuing sick he grew worse and died in said County of Grapewick on the 26th day of May 1865. The sickness from which he died was contracted while he was in the actual service of the Confederate Army as stated and he died from that sickness as stated.

Form No. 1.

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the *10th* day of *July* 1845, and that she has resided in Georgia continuously since the *fall of the year* 1839; 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, 1895, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this the *10th* day of *February* 1895.
W. L. Waldump
Ordinary.

Emilia Waldump
Wm Reid
POST OFFICE, *Atlanta Ga*

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

Waldump, Emilia
Fulton, Georgia
1895.
No. 3952
Widow's Pension.
PAID TO
Emilia Waldump
County.
Warrant issued,
1st March 1895.
AND HAND-TO
Wm Reid
Ordinary.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

PERSONALLY appears J. J. Walker 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 1852; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 0, of 23rd Regiment of Georgia Volunteers Colquitt's Brigade; that whilst engaged in such military service at the battle of Petersburg in the State of Va, on the 20th day of June 1863 he was wounded as follows: Blown up in the works and left eye destroyed and right wrist and right ankle dislocated rendering him incompetent to perform the ordinary manual vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1894. I have heretofore been allowed a pension of Thirty dollars, for the year 1893.

Sworn to and subscribed before me, this, the 12th day of March 1894, } J. J. Walker
W. L. Boehm Ordinary

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

STATE OF GEORGIA, }

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

Personally appears J. J. Walker 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 1852; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 0, of 23rd Regiment of Georgia Volunteers Colquitt's Brigade; that whilst engaged in such military service at the battle of Petersburg in the State of Va, on the 20th day of June 1863, he was wounded as follows: Blown up in the works and left eye destroyed and right wrist and right ankle dislocated rendering him incompetent to perform the ordinary manual vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of Thirty dollars, for the year 1893.

Sworn to and subscribed before me, this, the 8th day of March 1895, } J. J. Walker
W. L. Boehm Ordinary

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

STATE OF GEORGIA, }

Walker, J. J.
 No. 1377
 For These Already Enrolled.
 Soldier's Pension
 1894.
 Name J. J. Walker
 County Fulton
 Disability Loss of eye
 Amount, \$ 30
 W. H. HARRISON,
 Secretary Executive D.
 WARRANT HANDED TO
Walker, J. J.
 No. 1377

(For These Already Enrolled)
 No. 162
 SOLDIER'S PEN
 1895
 Name J. J. Walker
 County Fulton
 Disability Loss of eye
 Amount, \$ 30
 RICHARD JOHNS
 Secretary Executive
 WARRANT HANDED
Walker, J. J.
 No. 162

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

PERSONALLY appears J.J. Walker 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 1853; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company G, of 23rd Regiment of Georgia Volunteers, Colquitt's Brigade; that whilst engaged in such military service at the battle of Petersburg in the State of Va, on the 20th day of June 1863 he was wounded as follows: Blown up in the works and left eye destroyed and right wrist and right ankle dislocated rendering him incompetent to perform the ordinary manual vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of Thirty dollars, for the year 1893.

Sworn to and subscribed before me, this, the

12th day of March 1894.

M.L. Calhoun Ordinary

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

STATE OF GEORGIA, }

Fulton County. }

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

Given under my official signature and seal, this

day of March 1894.

M.L. Calhoun

Ordinary Fulton County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

PERSONALLY appears J.J. Walker 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 1852; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company G, of 23rd Regiment of Georgia Volunteers, Colquitt's Brigade; that whilst engaged in such military service at the battle of Petersburg in the State of Va, on the 20th day of June 1863, he was wounded as follows: Blown up in the works and left eye destroyed and right wrist and right ankle dislocated rendering him incompetent to perform the ordinary manual vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of Thirty dollars, for the year 1894.

Sworn to and subscribed before me, this, the

8th day of March 1895.

M.L. Calhoun Ordinary

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

STATE OF GEORGIA, }

Fulton County. }

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

Given under my official signature and seal, this day of March 1895.

M.L. Calhoun

Ordinary Fulton County.



STATE OF GEORGIA.

Fulton

County.

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

Given under my official signature and seal, this

12th

day of March

1894.



W.L. Calhoun

Ordinary

Fulton

County.

STATE OF GEORGIA.

Fulton

County.

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

Given under my official signature and seal, this
day of March 1895.



W.L. Calhoun

Ordinary

Fulton

County.

Audited, Feb. 3, 1891.

Wm. B. M. M. M.
COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. 8

Amount \$ 30.00

Paid to James J. Walker
for Pay of one
Eye
Duty 1891

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK

Geo. W. Harrison, State Printer, Atlanta.

Applicant

1891.

No. 8

STATE OF GEORGIA.
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb. 3 1891.

Mr. *James J. Walker* of the County
of *Bull* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Loss of one eye
He is entitled to receive the sum of *Twenty* Dollars
for such disability, the same being the allowance for the year ending October 24, 1891.

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

H. J. Mcintosh
GOVERNOR.

By the Governor.

W. H. Harrison
SECY. EXECUTIVE DEPARTMENT.

30

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

Thirty Dollars,
per above voucher, this *3* day of *February* 1891.

James J. Walker
Hub



By the Governor.

C. H. Harrison

Sec'y, EXECUTIVE DEPARTMENT.

\$ *30.00*

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

Thirty & 00/100

per above voucher, this

James J. Galvin



Dollars.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County, }

I,

herby authorize

of

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

by

at

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

day of _____ 1901.

— [L. S.]

Executed in presence of

CODR SECTION 1900

(For Those Already Enrolled.)

John A. Walker

Do on 21st 1902

DISABLED
SOLDIER'S PENSION.
1901.

Name *John A. Walker*

County *Butts County, Ga.*

Disability *Shot in left hand*

Amount, \$ *25*

July 21 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

App

Geo. W. Harrison, State Printer, Atlanta.

no date



W. W. MOSTELLER, ORDINARY

Alpharetta, Ga.

189

Georgia. I, J. A. Walker, of Milton 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 17th day of March 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a 4 years in Company B, of 38th Regiment of Georgia Volunteers, 1st Brigade; that whilst engaged in such military service in the State of Georgia, on the 27th day of June 1862, he was wounded, injured or diseased as follows:

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Milton County.

Personally appears John A. Walker of Milton 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 17th day of March 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a 4 years in Company B, of 38th Regiment of Georgia Volunteers, 1st Brigade; that whilst engaged in such military service in the State of Georgia, on the 27 day of June 1862, he was wounded, injured or diseased as follows:

Shot in Left hand

Deponent makes application for the pension to which he is entitled for year ending October 20th, 1901. I have heretofore under said law as a resident of Milton County been allowed an invalid pension of 5 Dollars, for the year 1900.

Sworn to and subscribed before me, this the 20 day of January 1901. Postoffice John A. Walker

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,

Milton County.

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

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

John R. Wilkinson Ordinary, Milton County.



LOWELL DE VILLIERS

a. 16. from 1906. ²³²⁰
 by ¹ ² ³ ⁴ ⁵ ⁶ ⁷ ⁸ ⁹ ¹⁰ ¹¹ ¹² ¹³ ¹⁴ ¹⁵ ¹⁶ ¹⁷ ¹⁸ ¹⁹ ²⁰ ²¹ ²² ²³ ²⁴ ²⁵ ²⁶ ²⁷ ²⁸ ²⁹ ³⁰ ³¹ ³² ³³ ³⁴ ³⁵ ³⁶ ³⁷ ³⁸ ³⁹ ⁴⁰ ⁴¹ ⁴² ⁴³ ⁴⁴ ⁴⁵ ⁴⁶ ⁴⁷ ⁴⁸ ⁴⁹ ⁵⁰ ⁵¹ ⁵² ⁵³ ⁵⁴ ⁵⁵ ⁵⁶ ⁵⁷ ⁵⁸ ⁵⁹ ⁶⁰ ⁶¹ ⁶² ⁶³ ⁶⁴ ⁶⁵ ⁶⁶ ⁶⁷ ⁶⁸ ⁶⁹ ⁷⁰ ⁷¹ ⁷² ⁷³ ⁷⁴ ⁷⁵ ⁷⁶ ⁷⁷ ⁷⁸ ⁷⁹ ⁸⁰ ⁸¹ ⁸² ⁸³ ⁸⁴ ⁸⁵ ⁸⁶ ⁸⁷ ⁸⁸ ⁸⁹ ⁹⁰ ⁹¹ ⁹² ⁹³ ⁹⁴ ⁹⁵ ⁹⁶ ⁹⁷ ⁹⁸ ⁹⁹ ¹⁰⁰ ¹⁰¹ ¹⁰² ¹⁰³ ¹⁰⁴ ¹⁰⁵ ¹⁰⁶ ¹⁰⁷ ¹⁰⁸ ¹⁰⁹ ¹¹⁰ ¹¹¹ ¹¹² ¹¹³ ¹¹⁴ ¹¹⁵ ¹¹⁶ ¹¹⁷ ¹¹⁸ ¹¹⁹ ¹²⁰ ¹²¹ ¹²² ¹²³ ¹²⁴ ¹²⁵ ¹²⁶ ¹²⁷ ¹²⁸ ¹²⁹ ¹³⁰ ¹³¹ ¹³² ¹³³ ¹³⁴ ¹³⁵ ¹³⁶ ¹³⁷ ¹³⁸ ¹³⁹ ¹⁴⁰ ¹⁴¹ ¹⁴² ¹⁴³ ¹⁴⁴ ¹⁴⁵ ¹⁴⁶ ¹⁴⁷ ¹⁴⁸ ¹⁴⁹ ¹⁵⁰ ¹⁵¹ ¹⁵² ¹⁵³ ¹⁵⁴ ¹⁵⁵ ¹⁵⁶ ¹⁵⁷ ¹⁵⁸ ¹⁵⁹ ¹⁶⁰ ¹⁶¹ ¹⁶² ¹⁶³ ¹⁶⁴ ¹⁶⁵ ¹⁶⁶ ¹⁶⁷ ¹⁶⁸ ¹⁶⁹ ¹⁷⁰ ¹⁷¹ ¹⁷² ¹⁷³ ¹⁷⁴ ¹⁷⁵ ¹⁷⁶ ¹⁷⁷ ¹⁷⁸ ¹⁷⁹ ¹⁸⁰ ¹⁸¹ ¹⁸² ¹⁸³ ¹⁸⁴ ¹⁸⁵ ¹⁸⁶ ¹⁸⁷ ¹⁸⁸ ¹⁸⁹ ¹⁹⁰ ¹⁹¹ ¹⁹² ¹⁹³ ¹⁹⁴ ¹⁹⁵ ¹⁹⁶ ¹⁹⁷ ¹⁹⁸ ¹⁹⁹ ²⁰⁰ ²⁰¹ ²⁰² ²⁰³ ²⁰⁴ ²⁰⁵ ²⁰⁶ ²⁰⁷ ²⁰⁸ ²⁰⁹ ²¹⁰ ²¹¹ ²¹² ²¹³ ²¹⁴ ²¹⁵ ²¹⁶ ²¹⁷ ²¹⁸ ²¹⁹ ²²⁰ ²²¹ ²²² ²²³ ²²⁴ ²²⁵ ²²⁶ ²²⁷ ²²⁸ ²²⁹ ²³⁰ ²³¹ ²³² ²³³ ²³⁴ ²³⁵ ²³⁶ ²³⁷ ²³⁸ ²³⁹ ²⁴⁰ ²⁴¹ ²⁴² ²⁴³ ²⁴⁴ ²⁴⁵ ²⁴⁶ ²⁴⁷ ²⁴⁸ ²⁴⁹ ²⁵⁰ ²⁵¹ ²⁵² ²⁵³ ²⁵⁴ ²⁵⁵ ²⁵⁶ ²⁵⁷ ²⁵⁸ ²⁵⁹ ²⁶⁰ ²⁶¹ ²⁶² ²⁶³ ²⁶⁴ ²⁶⁵ ²⁶⁶ ²⁶⁷ ²⁶⁸ ²⁶⁹ ²⁷⁰ ²⁷¹ ²⁷² ²⁷³ ²⁷⁴ ²⁷⁵ ²⁷⁶ ²⁷⁷ ²⁷⁸ ²⁷⁹ ²⁸⁰ ²⁸¹ ²⁸² ²⁸³ ²⁸⁴ ²⁸⁵ ²⁸⁶ ²⁸⁷ ²⁸⁸ ²⁸⁹ ²⁹⁰ ²⁹¹ ²⁹² ²⁹³ ²⁹⁴ ²⁹⁵ ²⁹⁶ ²⁹⁷ ²⁹⁸ ²⁹⁹ ³⁰⁰ ³⁰¹ ³⁰² ³⁰³ ³⁰⁴ ³⁰⁵ ³⁰⁶ ³⁰⁷ ³⁰⁸ ³⁰⁹ ³¹⁰ ³¹¹ ³¹² ³¹³ ³¹⁴ ³¹⁵ ³¹⁶ ³¹⁷ ³¹⁸ ³¹⁹ ³²⁰ ³²¹ ³²² ³²³ ³²⁴ ³²⁵ ³²⁶ ³²⁷ ³²⁸ ³²⁹ ³³⁰ ³³¹ ³³² ³³³ ³³⁴ ³³⁵ ³³⁶ ³³⁷ ³³⁸ ³³⁹ ³⁴⁰ ³⁴¹ ³⁴² ³⁴³ ³⁴⁴ ³⁴⁵ ³⁴⁶ ³⁴⁷ ³⁴⁸ ³⁴⁹ ³⁵⁰ ³⁵¹ ³⁵² ³⁵³ ³⁵⁴ ³⁵⁵ ³⁵⁶ ³⁵⁷ ³⁵⁸ ³⁵⁹ ³⁶⁰ ³⁶¹ ³⁶² ³⁶³ ³⁶⁴ ³⁶⁵ ³⁶⁶ ³⁶⁷ ³⁶⁸ ³⁶⁹ ³⁷⁰ ³⁷¹ ³⁷² ³⁷³ ³⁷⁴ ³⁷⁵ ³⁷⁶ ³⁷⁷ ³⁷⁸ ³⁷⁹ ³⁸⁰ ³⁸¹ ³⁸² ³⁸³ ³⁸⁴ ³⁸⁵ ³⁸⁶ ³⁸⁷ ³⁸⁸ ³⁸⁹ ³⁹⁰ ³⁹¹ ³⁹² ³⁹³ ³⁹⁴ ³⁹⁵ ³⁹⁶ ³⁹⁷ ³⁹⁸ ³⁹⁹ ⁴⁰⁰ ⁴⁰¹ ⁴⁰² ⁴⁰³ ⁴⁰⁴ ⁴⁰⁵ ⁴⁰⁶ ⁴⁰⁷ ⁴⁰⁸ ⁴⁰⁹ ⁴¹⁰ ⁴¹¹ ⁴¹² ⁴¹³ ⁴¹⁴ ⁴¹⁵ ⁴¹⁶ ⁴¹⁷ ⁴¹⁸ ⁴¹⁹ ⁴²⁰ ⁴²¹ ⁴²² ⁴²³ ⁴²⁴ ⁴²⁵ ⁴²⁶ ⁴²⁷ ⁴²⁸ ⁴²⁹ ⁴³⁰ ⁴³¹ ⁴³² ⁴³³ ⁴³⁴ ⁴³⁵ ⁴³⁶ ⁴³⁷ ⁴³⁸ ⁴³⁹ ⁴⁴⁰ ⁴⁴¹ ⁴⁴² ⁴⁴³ ⁴⁴⁴ ⁴⁴⁵ ⁴⁴⁶ ⁴⁴⁷ ⁴⁴⁸ ⁴⁴⁹ ⁴⁵⁰ ⁴⁵¹ ⁴⁵² ⁴⁵³ ⁴⁵⁴ ⁴⁵⁵ ⁴⁵⁶ ⁴⁵⁷ ⁴⁵⁸ ⁴⁵⁹ ⁴⁶⁰ ⁴⁶¹ ⁴⁶² ⁴⁶³ ⁴⁶

Sworn to and subscribed before me, this 20 day of January 1901. } Postoffice

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

STATE OF GEORGIA,

Antelope County

I, Jake R. Wilkinson Ordinary of said County,
do certify that I am well acquainted with John A. Gwader ^{of 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 21

day of January 1901

Put
your
seal
here

2. ЧЕЛОВЕК

Ordinary

William Fullan County

Wacker, John
1904
1906

INDIGENT PENSION
1904

Name *Wacker*
 County *Putnam*
 Co. *2nd W Va*
 Approved _____

JOHN W. LINDEBY
 Commissioner

WARRANT HAD

Ordinary will write _____
 and Regiment on back to be used above.

10/2/04 4/15/04

Pension was not
 present can not
 certify at present
 it seems that he was
 missing state clearly
 left his company for
 some time ago and that he was
 not that of his own knowledge
 known to be true. The
 name T. F. Hendricks was at Appo
 but applicant was not
 an aged man, and infirm
 shown to be such that he
 could earn his support at some
 kind of labor or calling.

J. W. Lindsey
born of Pension

We were in M. R.
Aug 20, 1904
Wacker, John
2nd W Va
Pension office
14/9-1904
Thy Man
Putnam Regt
10/2/04
Wacker
Com. of Regt

STATE OF GEORGIA
 COUNTY }
POWER OF ATTORNEY.

I, _____
 do hereby authorize _____
 to receive and receipt for the pension allowed and request that he remit same to _____
 by _____
 at _____ day of _____ 190 _____
 Witness my hand and seal, this _____ day of _____ 190 _____
 [L. S.]

Extended in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize _____ of _____

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

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

Executed in presence of _____

[L. S.]

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

I, J. B. Walker of said State and County, desiring to avail himself of the Pension Act (Section 1264, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State County and post-office)
J. B. Walker, Walker Co. 37 Partridge St. Atlanta, Ga.
2. How long and since when have you been a resident of this State? all my life
3. When and where were you born? Apr 26 1843 Cobb Co. Ga.
4. When and where and in what company and regiment did you enlist or serve? enlisted June 1861 - 1st Ga. Regiment, Co. H, to Chatterbox Co. Aug. 1861. Co. H.
5. How long did you remain in such company and regiment? Until the end of war
6. When and where was your company and regiment surrendered and discharged? Surrendered with Gen. Lee at Appomattox Court House, Va. April 9th 1865. Paroled at Kingston, Va.
7. Were you present with your company and regiment when it was surrendered? yes
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? nothing like this
9. How much can you earn (gross) per annum by your own exertions or labor? nothing like this
10. What has been your occupation since 1865? Common labor
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Age & Poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? from 1865, ever since I was 20 years old
13. What property, real and personal, or income, do you possess, and its gross value? none
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? none
15. In what County did you reside during those years, and what property did you then return for taxation? Walker Co. none
16. How were you supported during the years 1899, 1900, 1901 and 1902? By my family
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? can't state what it cost. Did all I could
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? Common labor. Can't say didn't keep an account.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? yes. Wife and three daughters. By their labor. They have none.
20. Are you receiving any pension? If so, what amount and for what disability? No.
21. Have you ever made an application for pension before? No
22. How many applications have you ever made and under what class? None made an application before

Sworn to and subscribed before me this 17th day of October 1902
John Williamson Ordinary, J. B. Walker
of Walker County.

Applicant.

Every Question MUST Be Answered.

Pension office 7/25/05
Applicant was not present with
his company at surrender but
it seems that he was
also there. State clearly what
he left his company for, what
cause he was away and what he was
doing at that or his own company
was there to be true. The
applicant was not
an aged man, and infirmity
was not such that he
could not earn his support at some
other labor or calling.

J. B. Lindsey

Walker Co. Ga.

Aug 26 1843

Walker Co. Ga.

1st Ga. Regiment

Co. H

Apr 26 1843

Walker Co. Ga.

1st Ga. Regiment

Co. H

Apr 26 1843

Walker Co. Ga.

1st Ga. Regiment

Co. H

Apr 26 1843

Walker Co. Ga.

1st Ga. Regiment

Co. H

Apr 26 1843

Walker Co. Ga.

1st Ga. Regiment

Co. H

Apr 26 1843

Walker Co. Ga.

1st Ga. Regiment

Co. H

Apr 26 1843

Walker Co. Ga.

1st Ga. Regiment

Co. H

Apr 26 1843

Walker Co. Ga.

1st Ga. Regiment

Co. H

Apr 26 1843

Walker Co. Ga.

1st Ga. Regiment

Co. H

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

County,

This Man, J. J. Kendrick, is the only member of my Co. living. I know that I made known of.
of said State and County, having been presented
for pension
 as a witness in support of the application of *J. B. Walker* under section 1254, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside?
John B. Walker the applicant; if so, how
2. Are you acquainted with *J. B. Walker* about 45 years
3. Where does he reside, and how long and since when has he been a resident of this State?
Walker Co. I have known him
4. When, where and in what company and regiment did he enlist, and how do you know?
Sumnerville Co. Aug 1861, Co. K, 21st Regt. U.S. Cavalry
5. Were you a member of the same company and regiment?
Yes
6. How long did he perform regular military duty?
4 yrs
7. When and where was his command surrendered?
at Appomattox
8. Were you present when it surrendered?
Yes
9. Was applicant present?
Yes
10. If he was not present, where was he?
For what cause?
When did he leave his command?
By what authority he left?
He was present

11. What property, effects or income has the applicant? (Give your means of knowledge.)
None. I am personally acquainted with him.
12. What property, effects or income did the applicant possess in 1890, 1897, 1908, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?
None, had nothing to convey away.
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
He has not
14. What is the applicant's occupation and physical condition?
Common laborer. Unable to make a support by hard labor. He was wounded three times during the war.
15. Is the applicant unable to support himself by labor of any sort, if so, why?
Unable from age and infirmity
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
By the assistance of his family
17. What portion of his support for these four years was derived from his own labor or income?
None, as he is that
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
Applicant is a former Confederate soldier.
19. Who compose family? What property have they? Children's age and their earning capacity?
Wife and 3 daughters, ages 23-18-14. They have no skilled profession.
20. What interest have you in the recovery of this pension by this applicant?
None except he needs it.

Sworn to and subscribed before me, this the *1st* day of *October* 190*4*.
J. J. Kendrick
 Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

County,

Personally came before me *John S. Walker* and *J. B. Walker*, both known to me as reputable physicians of said County, who, being severally sworn, say on each that they have examined carefully *John S. Walker* applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

He suffers from wounds in Hip and leg and back, and is physically unable to make a living and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the *1st* day of *October* 190*4*.
John S. Walker Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County,

I, *John S. Walker* Ordinary, in and for said County, hereby certify that the applicant, *John S. Walker* resides in said County, and has been a bona fide resident of this State since the *1st* day of *October* 189*0* and that the witnesses, viz.:

are of trustworthy character, and that their statements are entitled to full faith and credit. I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed. I further certify that the tax digest of *Walker* County shows that applicant returned for taxation to his name in 1899 *1890* Dollars of property, and in 1900 *1890* Dollars of property, in 1901 *1890* Dollars of property, in 1902 *1890* Dollars of property.

In my opinion the foregoing claim is *made in good faith*.
 Witness my hand and seal of office, this *1st* day of *October* 190*4*.
John S. Walker Ordinary,
Walker County.

NOTE.

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

20. What interest have you in the recovery of a pension by this applicant?
 Sworn to and subscribed before me, this the 1st day of Aug, 1906.
J. J. Kunkling Ordinary.
 I, John B. Walker, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:
no more exertion from the effects of gunshot wound
general debility is the result that he is disabled
from doing any kind of manual labor or
business work that he cannot earn any part of
a living by himself

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Cherokee COUNTY.

Personally came before me J. J. Kunkling and J. H. Gayart, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully

John B. Walker applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

no more exertion from the effects of gunshot wound
general debility is the result that he is disabled
from doing any kind of manual labor or
business work that he cannot earn any part of
a living by himself

Sworn to and subscribed before me, this the 1st day of August, 1906.
J. J. Kunkling Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cherokee COUNTY.

I, J. J. Kunkling Ordinary, in and for said County, hereby certify that the applicant, John B. Walker resides in said County, and has been a bona fide resident of this State the 1st day of August, 1906 and that the witnesses, viz:

J. H. Gayart and J. J. Kunkling are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Cherokee County shows that applicant returned for taxation in his name in 1901 \$0.00 Dollars of property, and in 1902 \$0.00 Dollars of property; in 1903 \$0.00 Dollars of property; in 1904 \$0.00 Dollars of property; in 1905 \$0.00 Dollars of property.

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

Witness my hand and seal of office, this 1st day of August, 1906.

J. J. Kunkling Ordinary.

NOTE.

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

Baldwin COUNTY.

Leaph. H. R. Foster of said State and County, having been presented as a witness in support of the application of J. B. Walker for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

- What is your name and where do you reside? Leaph. H. R. Foster
- Are you acquainted with J. B. Walker the applicant? if so how long have you known him? Since 1867
- Where does he reside, and how long and since when has he been a resident of this State? in Co K
- When, where and in what company and regiment did he enlist, and how do you know? in Co K
- Were you a member of the same company and regiment? yes
- How long did he perform regular military duty? 2 years
- When and where was his command surrendered? at Vicksburg
- Were you present when it surrendered? yes
- Was applicant present? no
- If he was not present, where was he? in Co K
- When did he leave his command? at Vicksburg
- By what authority he left? by general order
- What property, effects or income has the applicant? (Give your means of knowledge.) none
- What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? none
- Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? none
- What is the applicant's occupation and physical condition? Physician
- Is the applicant unable to support himself by labor of any sort; if so, what? yes
- How was he supported during the years 1901, 1902, 1903, 1904 and 1905? by family
- What portion of his support for those four years was derived from his own labor or income? none
- Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. He was in good health & doing
and served faithfully & bravely
- Who composes family? What property have they? Children's ages and their earning capacity? none

20. What interest have you in the recovery of a pension by this applicant? nothing
 Sworn to and subscribed before me, this the 1st day of August, 1906.
J. J. Kunkling Ordinary.

are of trustworthy character, and that their statements are true.

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

I further certify that the tax digest of _____ County shows that applicant returned for taxation in his name in 1901 _____ Dollars of property; in 1902 _____ Dollars of property; in 1903 _____ Dollars of property; in 1904 _____ Dollars of property; in 1905 _____ Dollars of property.

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

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

NOTE.

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

14. What is the applicant's occupation and physical condition? *Very poor; Laborer. On very thin & Can get to do nothing*

15. Is the applicant unable to support himself by labor of any sort; if so, why? *No. Physical condition poor*

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? *By family*

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

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1234, Code. *Very Small. He was in good health & doing and served faithfully & honestly & devoted.*

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

20. What interest have you in the recovery of a pension by this applicant? *Nothing whatever*

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

W. H. Hunter Witness.

W. H. Hunter Ordinary.

GEORGIA

County:

WALKER, J. R.
Fulton County

No.
1919

Application for Pension Due Deceased Soldier

UNDER ACT 1891

To be paid his Widow or Dependent Children

Mrs. Mattie E. Walker

Widow of JR Walker

of Tulsa County

Co. B Regt. 1st Ala Vol.

Approved and paid

4/23 1917

Died Mar. 22, 1919
J. W. LINDSEY.

Commissioner of Pensions

Byrd Printing Co., State Printers, Atlanta

STATE OF GEORGIA, Fulton County
William R. Vincent Ordinary of said county, do hereby
 certify that I personally know *Livingston Warren*, the applicant, and that she
 is the lawful widow of *J. R. Warren* and was on
 the *Superior* Pension Roll of said *Fulton* county, and was paid
 a Pension from *Fulton* county for 1878, and at the time
 of her death on the *11* day of *March* 1894, there was due to
 him and unpaid his Pension of *Twenty* Dollars from the State
 of Georgia, and I know *Jat. Edwards* the within
 witness, and he is of a truthful and trustworthy character and entitled to full credit.
 Given under my hand and seal this *15* day of *April* 1894
William R. Vincent Ordinary,
Fulton County.

William P. Valente Ordinary
Tulsa County.

State of Georgia, Troup County

ORDINARY'S OFFICE—NSC

I, H. F. Woods and Ordinary and ex-officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of marriage license of Joseph R. Walster and
Matthe E. Christensen and also copy of Certificate of Rev W. B. Bell the Minister who performed the marriage ceremony with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and 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 5th day of April, 1919

H. F. Woods and
Ordinary and ex-officio C. & O.

STATE OF GEORGIA, Fulton County

I, Arthur R. Mauldin Ordinary of said county, do certify that I personally know Mrs. Matthe Walster, the applicant, and that she is the lawful widow of J. R. Walster, and was on the Adopted Pension Roll of said Fulton county, and was paid a Pension from Fulton county for 1918, and at the time of his death on the 15 day of March, 1919, there was due to him and unpaid his Pension of Ninety Dollars from the State of Georgia, and I know J. A. Christensen the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 15 day of April, 1919

Arthur R. Mauldin Ordinary,
Fulton County

WALKER, J. R.

Fulton County

No. 54

1919

Application for Pension Due
Deceased Soldier

UNDER ACT 1891

To be paid his Widow or Dependent Children

BY

Mrs. Matthe E. Walster

Widow of J. R. Walster

County Fulton

Co. B Regt. 42nd Yolo

Approved and paid 54

4/23 1919

Side Mar 24 1919

J. W. LINSLEY

Commissioner of Pensions.

State Printing Co. State Printer, Atlanta.

100 4/23 1919

GEORGIA, _____ County.

I hereby authorize and constitute _____ of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 191____ through my deceased husband, _____ who was on _____ Pension Roll and paid from _____ for 19____

Witness my hand this _____ day of _____, 19____

Attested before me:

State of Georgia, Troup County

ORDINARY'S OFFICE—NSR:

I, *H. F. Moody and* Ordinary and ex-officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of *marriage license of Joseph R. Walker and Mattie E. Christopher and also copy of Certificate of Rev. W. B. Bell the Minister who performed the marriage ceremony* with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and 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 *5th* day of *April*, 1919.

H. F. Moody and
Ordinary and ex-officio C. C. O.

Application for Pension Due Deceased Soldier

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

STATE OF GEORGIA, *Fulton* County

Personally before me comes Mrs. *Mattie E. Walker* of said county, after being duly sworn, on oath says that she is the widow of *J. R. Walker* who was duly enrolled as a *Indigent* Pensioner from the county of *Fulton* and was paid a Pension of *\$80.00* Dollars from *Fulton* county for 19 *18*, and that the said *J. R. Walker* died in *Fulton* county on the *22* day of *March*, 191 *9*, and at the time of his death a Pension of *\$90.00* was due him from *Fulton* county and unpaid for *1919*. Applicant further swears that she married the said *J. R. Walker* on the *29* day of *October* 1889, in *Troup* county and State of *Georgia*, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this *3rd* day of *April*, 1919.

Arthur B. McFarland Ordinary *Mrs. Mattie Walker* (th. S.)
Fulton County.

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, *Fulton* County

Personally before me comes *J. H. Christopher*, who on oath says that he knew *J. R. Walker* while in life and that he knows Mrs. *Mattie E. Walker* the above applicant; that he knows that the said *J. R. Walker* and Mrs. *Mattie E. Walker* were in due form of law married in the county of *Troup* in the State of *Georgia* on the *29* day of *October*, 1889, and that they resided together as husband and wife from date of marriage to the day of his death on the *22nd* day of *March*, 1919, and I now know that she is his dependent widow.

Sworn to and subscribed before me this *12th* day of *April*, 1919.

Arthur B. McFarland Ordinary *J. H. Christopher*
Fulton County.

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

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court or Ordinary, this the 5th day of April 1919
H. H. Woodward
Ordinary and ex-officio C. C. O.

on oath says that he knew Mrs. Mattie E. Walker
and that he knows J. R. Walker
the above applicant; that he knows that the said J. R. Walker
and Mrs. Mattie E. Walker were in due form of law married in the county
of Troup in the State of Georgia on
the 29 day of October 1891, and that they resided together
as husband and wife from date of marriage to the day of his death on the 22nd day of
March, 1919, and I now know that she is his dependent widow.
Sworn to and subscribed before me this 17th day of April, 1919.
Adeline R. Walker Ordinary. *J. H. Leprouty*
Fulton County.

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

No. 1

Marriage License

State of Georgia Troup County

To ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

J. R. Hansen You are hereby authorized to join
and *Mattie E. Christopher*
in the Holy State of Matrimony according to the Constitution and
Laws of this State and for so doing this shall be your license.
And you are hereby required to return this license to me with your
Certificate given of the fact and date of the Marriage.

Given under my hand and seal this 17 day of
Oct 1891 *R. M. Morgan* J. S. Ordinary

STATE OF GEORGIA TROUP COUNTY

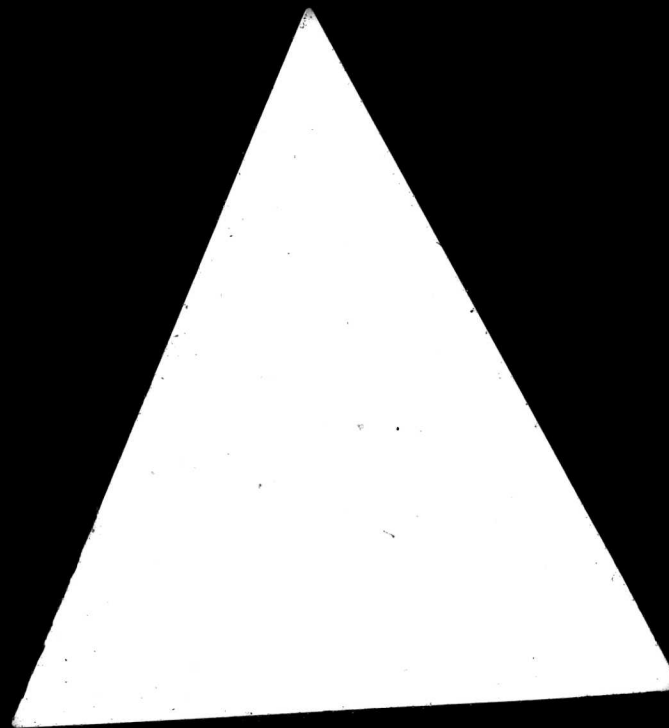
I Certify that *Joseph R. Walker* and *Mattie E. Christopher*
were joined in Matrimony by me this 29th day of Oct
and ninety one 1891
Recorded 17/30 1891 *H. S. Bee m ofls*
R. M. Morgan Ordinary

PARTIES PERFORMING CEREMONY RETURN TO ORDINARY TO BE RECORDED.

LICENSE

I certify that Joseph R. Waister and Mattie E. Christopher
were joined in Matrimony by me this 29th day of Oct
ninety one 1891
Recorded R. M. Hanna, Ordinary H. J. Bee m of k

PARTIES PERFORMING CEREMONY RETURN TO ORDINARY TO BE RECORDED.



OK for 1915
Fulton
County

No.

Widow's Application

To Be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910.

☒ Fulton
County

Name Mrs. R. J. Walker

Widow of W. F. Walker

Company 10 2nd Ga. Reg.

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAR. F. BYRD, State Printer, Atlanta.

10/31-1914

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Fulton County.

Personally before me comes Mrs. L. J. Walker of said County, who, after being duly sworn, on oath says, that she is the widow of W. F. Walker, to whom in the County of Walton State of Ga she was married on the 16th day of Aug 1864 and that she remained his wife, and resided with him to the date of his death in Mar 25 1914 and that she has not since his death remarried. At the time of his death he was a resident of Walton County, in Ga said State of Georgia, and he was on the Confederate Pension Roll of the State and paid a pension of \$60.00 in Walton County for 1913 per annum, on account of being a soldier in Company 10-2nd Ga Regiment. (Volunteers of State Militia.)

At the death of W. F. Walker he was in the use and possession of the following property none

of the cash value of \$
What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully.) 1 bed and bed clothing-trunk
Acres land none \$
Horses and Mules none \$
Hogs, Cows, etc. none \$
Total Cash value of all property \$25.00

That she is now a bona fide resident citizen of said County of Fulton and she has so continuously resided since 25th day of March 1914.

Sworn to and subscribed before me, this 25th day of July 1914, L. J. Walker of Fulton County.

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

STATE OF GEORGIA,

Fulton County.

Personally before me come W. S. Jones, Sr. known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. L. J. Walker who made the foregoing affidavit, is the lawful widow of W. F. Walker who died in Cobb County in said State of Ga on 25th day of Mar 1914 and that she has not since remarried. That she became the wife of W. F. Walker on the 16th day of Aug 1864 and that she and he had resided together as man and wife continuously since 16th day of Aug 1864 and that the said W. F. Walker was the same man who was on the pension roll of said State Ga from Walton County when he died.

Sworn to and subscribed before me, this 25th day of July 1914, W. S. Jones, Sr. of Fulton County.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll or Put on Under Act of July 11, 1910.

Name Mrs. L. J. Walker
County Fulton
Widow of W. F. Walker
Company 10-2nd Ga Reg
Approved _____

J. W. LINDSEY,
Commissioner of Pensions
CHAS. P. STEIN, State Printer, ALBANY.

Sworn to and subscribed before me, this the 14th day of August, 1914, at W. S. Jones County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes Emily Alford who after being sworn on oath says, that they are freeholders of said County, and that they know Mrs. J. Swanson said County and knew her said husband W. S. Swanson at his death on the 28th day of March 1914 that she and he were in the use, possession and control of the following property at his death to wit: about 1000 sq. ft. of land

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

of the value of \$.....

Sworn to and subscribed before me, This the 14th day of Aug, 1914.

John R. Williamson Ordinary.

of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

John R. Williamson Ordinary of said County, do certify, that, I know Mrs. J. Swanson the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 14th day of Aug, 1914.

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

That the tax Books of Fulton County shows that none returned property to the amount of none for 1908 & none for 1909 & none for 1910 & none.

Sworn under my hand and official seal of office this 30th day of Oct, 1914.

(SEAL.) John R. Williamson Ordinary.

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

That the tax Books of _____ County shows _____
 amount of _____ for 1908 \$ _____ for 1909 \$ _____ for 1910 \$ _____
 Sworn under my hand and official seal of office this _____ day of _____ 191____
 (SEAL.) John P. Williams Ordinary.
 _____ County.

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

WALKER, L. J. (Mrs.)
 and

For _____ County

1926

**Application for Pension
 Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

J. Elliott Jeffries Ordinary

For Mrs. L. J. Walker

Date of Death Nov 73 1926

Amount \$ 100.00

Approved and ordered paid

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

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

38

Application for Pension Due to a Deceased Pensioner

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

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Frank B. Lowndes of
Awtry and Lowndes Co. of said County, who, after being sworn, on oath
says that he knew Mrs. L. J. Walker 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 23rd day of March, 1926, and that
a Pension of (\$) Dollars was due pensioner and
unpaid at the time of pensioner's death, and that pensioner left no dependent children surviving, and
no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$163.90, per
sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

Arthur R. Marshall Ordinary
Fulton County

(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thomas H. Jeffers Ordinary of said County, do certify
that I personally know Frank B. Lowndes who is a resident
citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit;
that I also knew Mrs. L. J. Walker while in life and that this was
the same person whose name appears on the Pension Roll of Fulton County, and
was paid a Pension of One Hundred forty (\$140.00) Dollars
in said County for 1925, 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 23rd day of March, 1926.
Thomas H. Jeffers Ordinary
Fulton County

(Seal of Ordinary)

INSTRUCTIONS:

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

JOE W. AWTRY, Pres. & Treas.

FRANK B. LOWNDES, Vice-Pres. & Mgr.

Atlanta, Ga.,

3-26-26

192

M. Mr. W. W. Walker

312 W. 4th St.

TO AWTRY & LOWNDES CO., DR.

FUNERAL DIRECTORS

AUTO AMBULANCE

17 WEST GAIN STREET

Phone Ivy 8813

Phone Ivy 8814

Funeral expense of Mrs. L. J. Walker 3-28-26

Casket	\$100.00
Shipping case	10.00
Embroiding	15.00
Hearse	5.00
Robe	15.00
Constitution	2.40
Journal	.75
Georgian	.75
E. L. Almond Co.	15.00
	<u>\$163.90</u>

Georgia, Fulton County.

Personally appeared Frank B. Lowndes who swears that the above bill is just and true and was for the funeral expenses of Mrs. L. J. Walker, deceased.

Sworn to and subscribed before me Arthur R. Marshall
660

1. I, Frank B. Lowndes, Ordinary of said County, do certify that I personally know Frank B. Lowndes, who is a resident citizen of said County, and that said person is of truthful and trust worthy character, entitled to full faith and credit; that I also knew him L. J. Walker while in life and that this was the same person whose name appears on the Pension Roll of Fulton County, and was paid a Pension of One Hundred forty (\$140.00) Dollars in said County for 1925, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 19 day of March, 1925.
(Seal or Ordinary) Frank B. Lowndes Ordinary
Fulton County

INSTRUCTIONS:

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

Georgia, Fulton County.

\$153.90

Personally appeared Frank B. Lowndes who swears that the above bill is just and true and was for the funeral expenses of Mrs. L. J. Walker, deceased.

Sworn to and subscribed before me, Frank B. Lowndes
Arthur R. Insart C. C. O.

POWER OF ATTORNEY, STATE OF GEORGIA.

(County.)

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
1891 day of

[L.S.]

Executed in the presence of us:

DIRECTIONS.

If allowed, send amount by
me at

and oblige.



Walker, Louisa (Mrs)
Fulton County
1891.

No. 2133

Widows' Pension

PAID TO

Mrs. Louisa Walker
— OF —
Fulton

COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

POWER OF ATTORNEY. STATE OF GEORGIA.

Form No. 5.

Know all Men by these Presents, That I,

County, in said State, do hereby appoint,

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

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

Executed in the presence of:

DIRECTIONS.

If allowed, send amount by
me at

and oblige.



Widows' Pension

No. 2133

1891.

\$100.00.

Warrant Issued

AND HANDED TO

1891

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

In person came before me, the undersigned Ordinary

in and for the County of

County of *Fulton*

Mrs. *Louisa Walker*, who being sworn according to law, says under oath that she is the widow of *Ellis R. Walker*, who was a soldier in

the service of the Confederate States, and served as a member of Company *B-*, of the

7th Regiment of *Georgia* Volunteers; that he enlisted in said service on or about the *15th* day of *May*, 1861, and was in the

Army up to *July 13th*, 1861. That while in the

Army, he was on the *20th* day of *June*, 1861. (See Note No. 1)

That while in service he contracted fever, from exposure, and died at Winchester, Va. on 13th day of July 1861.

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the *18th* day of *November*, 1852, and that she has resided in Georgia continuously since the *2d* day of *September*, 1834; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the
7th day of *May*, 1891.
Ordinary.

Mrs Louisa Walker

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

DEED TO
1891
Issued
aob
County
Walker
Pension
33
1.
County
Walker

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

County of *Fulton*

Walter N. G. Jett
and *Thomas Wood*

In person came before me, the undersigned Ordinary
in and for said County, witnesses *Samuel*

(each known to said Attesting Officer as truthful,
reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
Mrs. *Louisa Walker*, of the County of *Fulton*,
State of Georgia, is the widow of *John R. Walker*, who was a soldier in
Company *B* of the *7th* Regiment of *Georgia* Volunteers.
That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the *15th* day of *May* 1861. That while in said service, or by
reason of said service in the Army, he lost his life as follows:

*That he contracted fever from exposure
while in service - and died from
typhus fever - on the 13th day of
July 1861 - at Winchester Va.*

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

Sworn in and subscribed before me, this, the
7th day of *May* 1891.

W. H. Harrison
Ordinary.

Samuel Hope
W. A. Jett

Thomas Wood

death resulted from disease, state of mind and not from any other cause.

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

Form No. 3.

STATE OF GEORGIA,

County of *Fulton*

I, *W. H. Harrison* Ordinary

in and for said County of *Fulton*

State of Georgia, hereby certify that I am acquainted with Mrs. *Louisa Walker*
the applicant for a pension in this case, and know, from my own knowledge, or from positive proof
presented to me by reputable witnesses, that she resides in this County, and that she resided in the
State of Georgia on December 23d, 1890, and has not lived out of the State since that date. I also
certify that the witnesses whose testimony she presents to sustain her claim are known to me to be
truthful witnesses, entitled to full faith and credit as such. I am fully satisfied that this claim is made in
good faith, and that I have caused the applicant and the witnesses to read or hear read the proofs they sign.

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

7th day of *May* 1891.

W. H. Harrison
Ordinary.

W. H. Harrison
Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.
Those whose husbands were killed in service.
Those whose husbands died in the army of wounds or disease contracted in the service.
Those whose husbands went to the army and have never been heard from since the war.
Those whose husbands were wounded in the army and have since died from the direct effects
of the wounds.

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

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

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

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

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

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

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

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

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

By order of the Governor

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

W. L. Cuthbert
Ordinary.
Mr. A. Jett
Thos Wood

Sec. Ex. Department.

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

Form No. 2.

STATE OF GEORGIA, County of *Fulton*
I, *W. L. Cuthbert* Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Louisa Walker the applicant for a pension in this case, and
know, from my own knowledge, (or from positive proof presented to me by reputable witnesses),
that she resides in this County, and that she resided in the State of Georgia on December 23,
1890, and has not lived out of the State since that date. That she is the widow of
Philip R. Walker deceased, and as such has heretofore been allowed a
pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
30th day of *January* 1893.

W. L. Cuthbert Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I,

County, in said State, do hereby appoint

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

In Witness Whereof, I have hereunto set my hand and seal, this
day of *1893*.

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by _____ to _____
me at _____, and oblige

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

Form No. 2.

STATE OF GEORGIA, County of *Fulton*

I, *W. L. Cuthbert* Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Louisa Walker the applicant for a pension in this case, and
know, from my own knowledge (or from positive proof presented to me by reputable wit-
nesses), that she resides in this County, and that she resided in the State of Georgia on
December 23, 1890, and has not lived out of the State since that date. That she is the
widow of *Philip R. Walker* deceased, and as such has heretofore
been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the *1st* day of *February* 1894.

W. L. Cuthbert Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA,

County

KNOW ALL MEN BY THESE PRESENTS, That I,

County in said State, do hereby appoint

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

In Witness Whereof, I have hereunto set my hand and seal, this
day of *1894*.

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by _____ to _____
me at _____, and oblige

No. *1636*

1894.

WIDOWS' PENSION,

for year ending February 15th, 1894.

PAID TO—

Louisa Walker

OF—

Fulton County.

WARRANT ISSUED

2/1 1894.

AND HANDED TO

Cuthbert

Ord. of State, when received.

Walter Lewis
Fulton County
FOR THOSE HERETOFORE PAID.

1893.

20. 1893

WIDOWS' PENSION,

for year ending February 15th, 1893.

PAID TO—

Mrs. Louisa Walker

Fulton County.

Warrant Issued

2/1 1893.

AND HANDED TO

Cuthbert

Ord. of State, when received.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Fulton*

Personally comes Mrs. *Louisa Walker*

who being sworn, says on oath, that she is a bona fide resident of said County of *Fulton* State of Georgia, and that she has *resided* in said State continuously ever since *Dec 23rd 1861* That she is the Widow of *Polix F. Walker* who was a Soldier in Company *B* of the *7th* Regiment of *Georgia*

Volunteers, that he enlisted in said Regiment on or about the month of *June* 1861 and served in the Army up to *July 13th 1861* That he lost his life on the *18th* day of *July* 1861 (State here full particulars of the husband's death, when, where and from what cause.)

He died of Typhoid Fever caused by exposure while in said service.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1853; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this *30th* day of *January* 1893. *W. L. Johnson* Ordinary. Post-office *Bolton Ga*

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Fulton*

Personally comes Mrs. *Louisa Walker*

who being sworn, says on oath, that she is a bona fide resident of said County of *Fulton* State of Georgia, and that she has *resided* in said State continuously ever since *Dec 23rd 1861* That she is the Widow of *Polix F. Walker* who was a Soldier in Company *B* of the *7th* Regiment of *Georgia* Volunteers, that he enlisted in said Regiment on or about the month of *June* 1861 and served in the Army up to *July 13th 1861* That he lost his life on the *18th* day of *July* 1861 (State here full particulars of the husband's death, when, where and from what cause.)
Died July 13th 1861 at Winchester Va of Typhoid Fever caused by exposure while in said service.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1853; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this *1st* day of *February* 1894. *Louisa Walker* Ordinary. Post-office *Bolton Ga*

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

Form No. 1.

STATE OF GEORGIA, County of Fulton
I, M. L. Calhoun Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Louisa Walker the applicant for a pension in this case, and
know from my own knowledge (or from positive proof presented to me by reputable wit-
nesses), that she resides in this County, and that she resided in the State of Georgia on
December 23, 1890, and has not lived out of the State since that date. That she is the
widow of Felix B. Walker deceased, and as such has heretofore
been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the 2nd day of February, 1895.
M. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County of Fulton
KNOW ALL MEN BY THESE PRESENTS, That I,
M. L. Calhoun of said County, do hereby appoint
Felix B. Walker my true and lawful attorney in fact, for
me, and in my name, to receive and receipt for whatever amount of money I may be en-
titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the
foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any
Warrant that may be issued by the Governor, or for any sum of money which may be
coming to me for the reason aforesaid.
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of February, 1895. [L. S.]

Executed in the presence of:

DIRECTIONS.

Send amount by _____ to
me at _____, and oblige

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

Form No. 1.

STATE OF GEORGIA, County of Fulton
I, M. L. Calhoun Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Louisa Walker the applicant for a pension in this case, and
know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she
resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived
out of the State since that date. That she is the widow of Felix B. Walker
deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
the 2nd day of February, 1895.

M. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County of Fulton
I, M. L. Calhoun hereby authorize
of Felix B. Walker to receive and receipt for the pension paid hereon and request
that he remit same to _____ at
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of February, 1895. [L. S.]

Executed in the presence of

WALKER, FELIX B.
Fulton County
FOR THOSE HERETOFORE PAID.
1895.
No. 647
WIDOW'S PENSION
PAID TO
Louisa Walker
Fulton County
WARRANT ISSUED
AND HANDED TO
Applicant
for year ending February 15th, 1895.
Widow of Felix B. Walker
Fulton County

WALKER, FELIX B.
Fulton County
FOR THOSE HERETOFORE PAID.
1896.
No. 7386
WIDOW'S PENSION,
for year ending February 15th, 1896.
PAID TO
Louisa Walker
Fulton County
WARRANT ISSUED
AND HANDED TO
Applicant
for year ending February 15th, 1896.
Widow of Felix B. Walker
Fulton County

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.
Louisa Walker

who being sworn, says on oath, that she is a bona fide resident of said county of
Fulton State of Georgia, and that she has resided in said State
continuously ever since Dec 23rd 18 90 That she is the Widow of
William R. Walker who was a Soldier in Company
B of the 7th Regiment of Georgia

Volunteers, that he enlisted in said Regiment on or about the month of June
1861 and served in the Army up to July 13th 1861 That he lost his
life on the 13th day of July 18 61 (State here
full particulars of the husband's death, when, where and from what cause.)

Died July 13th 1861-at Winchester Va-of Typhoid Fever caused by exposure
while in said service

Deponent swears that she was the wife of said deceased soldier, during his service in the
army as a soldier, and that she has never married since his death aforesaid, that she became
his wife in the year 18 53 that Georgia is her home and she resided in this State 23d day
of December, 1890, and has not lived in any other State or locality since that date. I have
been allowed a pension for the year ending February 15th, 1894, and now apply for the
allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this
day of Feb 1895.

W. L. Walker Ordinary. Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.
Louisa Walker

who being sworn, says on oath, that she is a bona fide resident of said county of
Fulton State of Georgia, and that she has resided in said State
continuously ever since December 23rd 18 90 That she is the Widow of
William R. Walker who was a Soldier in Company
B of the 7th Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of June
1861 and served in the Army up to July 13th 1861 That he lost his
life on the 13th day of July 18 61 (State here

full particulars of the husband's death, when, where and from what cause.)
Died July 13th 1861 at Winchester Virginia -of Typhoid Fever caused by exposure
while in such service.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,
and that she has never married since his death aforesaid, that she became his wife in the year 18 53,
that Georgia is her home and she resided in this State 23d day of December, 1890, and has not
lived in any other State or locality since that date. I have been allowed a pension as a resident of
Fulton County for the year ending February 15th, 1895, and now apply for
the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this
day of Feb 1896.

Louisa Walker Ordinary. Post-office

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

Form No. 8

STATE OF GEORGIA, County of Fulton
A. N. Kuley
Fulton
Louisa Walker
 Ordinary in and for said County of
 State of Georgia, hereby certify that I am acquainted with Mrs.
Louisa Walker the applicant for a pension in this case, and
 know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she resides in
 this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the
 State since that date. That she is the widow of Felix R. Walker
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereto set my hand and affixed the seal of my office, this 2
 day of July 1897.

A. N. Kuley Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, Louisa Walker hereby authorize
me to receive and receipt for the pension paid hereon and request
 that he remit same to my home
 IN WITNESS WHEREOF, I have hereto set my hand and seal, this
 day of July 1897.

Executed in the presence of

POWER OF ATTORNEY.

State of Georgia,

Fulton County.

I, Louisa Walker hereby authorize W. C. Fisher
Fulton Co
 to receive and receipt for the pension paid hereon and request that he remit same to
me at my home
 IN WITNESS WHEREOF, I have hereto set my hand and seal, this 3
 day of July 1898.

Executed in presence of

W. C. Fisher
Attorney

Walker Louisa
Fulton County
FOR SECURITY

1898.

NO. 2224

WIDOW'S PENSION.

For year ending February 15th, 1898.

PAID TO

Mrs. Louisa Walker

OF

County

Fulton

Widow of Felix R. Walker

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

7/3

1898.

AND HANDLED TO

W. C. Fisher

W. C. FISHER, STATE PRINTER, ATLANTA.

WIDOW'S PENSION.

No. 1156

1897.

FOR YEAR ENDING FEB. 15th, 1897.

Walker Louisa
Fulton County

PAID TO

Mrs. Louisa Walker

OF

Fulton County.

Widow of Felix R. Walker

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

7/2

1897.

AND HANDLED TO

W. C. Fisher

W. C. FISHER, STATE PRINTER, ATLANTA.

{ Official
Seal.

POWER OF ATTORNEY.

State of Georgia,

Fulton County.

I, Louisa Walker hereby authorize M. C. Fisher of Ballwin Co

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2

day of Feb

1899.

Louisa Walker [L. S.]

Executed in presence of

W. C. Fisher

Walker, Louisa W.
Fulton Co

For Those Heretofore Paid.

1899.

NO. 911

WIDOW'S PENSION,

PAID TO
For year ending February 15th, 1899.
Mrs. Louisa Walker

of Fulton County
Widow of Edgar R.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

1899.

2/3

AND FORWARDED TO

M. C. Fisher
GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Walker, Louisa
Fulton County
TO Those Heretofore Paid.

1900.

NO. 977

WIDOW'S PENSION,

For year ending February 15th, 1900.
PAID TO
Mrs. Louisa Walker

of Fulton County,
Widow of

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1900.

Feb 13

AND FORWARDED TO

M. C. Fisher
GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, Louisa Walker hereby authorize M. C. Fisher of Ballwin Co

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13

day of Feb

1900.

Louisa Walker [L. S.]

Executed in presence of

A. J. Stewart

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of FULTON

Personally Comes Mrs.

Louisa Walker

who, being sworn, says on oath, that she is a bona fide resident of said county of *Fulton* State of Georgia, and that she has resided in said State continuously ever since *Dec. 23rd* 18 *90*. That she is the Widow of *Philip B. Walker* who was a soldier in Company *B* of the *7th* Regiment of *Georgia* Volunteers, that he enlisted in said regiment on or about the month of *July* 186 *1* and served in the Army up to *July 13th* 186 *2*. That he lost his life on the *13th* day of *July* 186 *2*. (State here full particulars of the husband's death, when, where and from what cause.)

At Newnan Ga. of typhoid fever caused by exposure in service

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 *33*.

I have been allowed a pension as a resident of *FULTON* County for the year ending February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this

2 day of *Feb* 1898

Louisa Walker
Post-Office *Bolton*
Ordinary.

M. C. Fisher
State of Georgia,
FULTON County.

Ordinary of said County, certify that I am well acquainted with Mrs. *Louisa Walker* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the *23rd* day of *Dec* 18 *90*.

Given under my official signature and seal this the *2* day of *Feb* 1899.

Official
Seal

Ordinary of *FULTON* County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Fulton*

Personally Comes Mrs.

Louisa Walker

who, being sworn, says on oath, that she is a bona fide resident of said county of *Fulton* State of Georgia, and that she has resided in said State continuously ever since *Dec 23rd* 18 *90*. That she is the Widow of *Philip B. Walker* who was a soldier in Company *B* of the *7th* Regiment of *Ga* Volunteers, that he enlisted in said regiment on or about the month of *July* 186 *1* and served in the Army up to *July 13th* 186 *2*. That he lost his life on the *13th* day of *July* 186 *2*. (State here full particulars of the husband's death, when, where and from what cause.)

Died with typhoid fever contracted in the Army

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 *33*.

I have been allowed a pension as a resident of *Fulton* County for the year ending February 15th, 1899, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this

13 day of *Feb* 1900

M. C. Fisher
Post-Office *Bolton*
Ordinary.

Louisa Walker
Post-Office

State of Georgia,
Fulton County.

Ordinary of said County, certify that I am well acquainted with Mrs. *Louisa Walker* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the *23rd* day of *Dec* 18 *90*.

Given under my official signature and seal, this the *13* day of *Feb* 1900.

Official
Seal

Ordinary of *Fulton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton County.I, Louisa D. Walker hereby authorize
M. C. Fisher of Bolton Ga.

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

me at Bolton Ga.IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 16day of June 1901. Louisa D. Walker [L. S.]

Executed in presence of

John R. Williamson
OrdinaryWidow Louisa D.
Fulton County

To Those Heretofore Paid.

1901.

No. 310

WIDOW'S PENSION,

For the ending February 15th, 1901.

M. C. Fisher

of

Fulton County.Widow of John W. Walker

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

May 17 1901,

AND HANDED TO

M. C. Fisher

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

Louisa Walker

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since Dec 23 1890. That she is the Widow of John R. Walker who was a soldier in Company 7th of the 7th Regiment of Infantry Volunteers, that he enlisted in said regiment on or about the month of July 1861 and served in the Army up to July 1862. That he lost his life on the 13th day of July 1862. (State here particulars of the husband's death, when, where and from what cause)

Died with typhoid fever
Contracted in the army

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1883

I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1900, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 16th day of June, 1901.

John R. Walker Ordinary.

Louisa D. Walker
Post Office Button

State of Georgia,

Fulton County.

John R. Walker

County of said County, certify that I am well acquainted with Mrs. Louisa Walker, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 23 day of Dec 1890.

Given under my official signature and seal, this 16th day of June, 1901.

Official Seal.

John R. Walker
Ordinary of Fulton County.

Sworn to and subscribed before me, this 16 day of June, 1901.
John R. Coleman Ordinary.
Post Office Barton
Louisa D. Walker
John R. Coleman
State of Georgia, }
Fulton County. }
Ordinary of said County, certify that I am well acquainted
with Mrs. Louisa Walker, 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 22 day of Dec, 1890.
Given under my official signature and seal, this the 16 day of June, 1901.
John R. Coleman
Ordinary of Fulton County.

Official
Seal.

BOARD OF VILLAGE

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County, I

M. A. Walker

J. E. Walker

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

at *Atlanta Ga*

day of *June* 1892. *M. A. Walker* [L. S.]

Executed in presence of

E. R. Birmingham
Fulton Co Ga

Walker, M. A. Mrs
Fulton Co

To Those Heretofore Paid.

1902.

No. *1204*

(From Clayton Co-1901)

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. M. A. Walker

Fulton Clayton County,

Widow of *J. E. Walker*

Co. *4th Ga* Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDED TO

J. E. Walker

Geo. W. HARRISON, STATE PRINTER, ATLANTA, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, M A Walker
J E Walker

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

In Witness Whereof, I have hereunto set my hand and seal, this 14th
day of Jan 1902. MA Walker [L. S.]

Executed in presence of
ER Dillingham NP
Fulton Co Ga

Walker M. A. Mrs.
Fulton Co

To Those Heretofore Paid.

1902.

No. 124
Ann Clayton Co. 1911

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. M A Walker

Fulton County

Widow of J E Walker

Co. Regiment 4th Ga

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDLED TO

J E Walker

1902

Walker M. A.
Fulton County

To Those Heretofore Paid

1903.

No. 137

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. M A Walker

OF

County,

Widow of J E

Co. Regiment 4th Ga

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1903.

AND HANDLED TO

J E Walker

1903

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, M A Walker
J E Walker

hereby authorize
of Fulton County
to receive and receipt for the pension paid hereon, and request that he remit same to
me at my home

In Witness Whereof, I have hereunto set my hand and seal, this 14th
day of January 1903. MA Walker [L. S.]

Executed in presence of

John W. Lindsey
Commissioner

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA.

PERSONALLY COMES MRS.

County of *Fulton**M A Walker*

who, being sworn, says on oath, that she is a bona fide resident of said County of *Fulton* State of Georgia, and that she has resided in said State continuously ever since *1835*. That she is the Widow of

J O Walker who was a soldier in Company *4th* of the *2nd* Regiment of *4th* Volunteers, that he enlisted in said regiment on or about the month of *1st* day of *June* *1862* and served in the Army up to *29th* day of *June* *1862*. That he lost his life on the *29th* day of *June* *1862* (State here particulars of the husband's death, when, where and from what cause.)

From disease contracted in the army

Dependent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year *1854*.

I have been paid a pension as a resident of *Clayton* County for the year ending December 31, 1901, and now apply for the pension provided by law for the year ending December 31, 1902.

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

M A Walker

John R Wilkinson
State of Georgia

John R Wilkinson
County of *Fulton*

Ordinary of said County, certify that I am well acquainted with Mrs. *M A Walker* 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 *June* day of *29th* *1835*.

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

Official Seal

Notary

NOTE.—All blank spaces must be filled. Voucher and affidavit must bear date after January 1st, 1903.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA.

PERSONALLY COMES MRS.

County of *Fulton**M A Walker*

who, being sworn, says on oath, that she is a bona fide resident of said County of *Fulton* State of Georgia, and that she has resided in said State continuously ever since *1835*. That she is the Widow of

J O Walker who was a soldier in Company *4th* of the *2nd* Regiment of *4th* Volunteers, that he enlisted in said regiment on or about the month of *1st* day of *June* *1862* and served in the Army up to *29th* day of *June* *1862*. That he lost his life on the *29th* day of *June* *1862* (State here particulars of the husband's death, when, where and from what cause.)

From disease contracted in the army

Dependent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year *1854*.

I have been paid a pension as a resident of _____ County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this *14th* day of *JAN* 1903.

John R Wilkinson Ordinary.

Post Office

State of Georgia,

County of *Fulton*

Ordinary of said County, certify that I am well acquainted with Mrs. *M A Walker* 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 *June* day of *29th* *1835*.

Given under my official signature and seal, this *14th* day of *Jan* 1903.

Official Seal

Ordinary of

County

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

Official Seal

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

Official Seal

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton County.

I, M. A. Walker
E. Walker of Fulton County

hereby authorize
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Rome

In Witness Whereof, I have hereunto set my hand and seal, this 3rd
day of February 1906. M. A. Walker [L. S.]

Executed in presence of

John R. Davidson
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA.

Bushton County.

I, M. A. Walker
E. Walker of Bushton County

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

In Witness Whereof, I have hereunto set my hand and seal, this 19
day of Jan 1906. M. A. Walker [L. S.]

Executed in presence of

Justus Walker

Walker, M. A.
TO THOSE HERETOFORE PAID.

1906.

1465

WIDOW'S PENSION

YEAR ENDING DECEMBER 31, 1904.

M. A. Walker

Fulton

E. Walker

ISSUED

AND PAID TO

E. Walker

1906.

Walker, M. A.
Fulton County

TO THOSE HERETOFORE PAID

1906.

No. 315

WIDOW'S PENSION

For year ending Dec. 31, 1906.

M. A. Walker

Fulton County.

Widow of E. Walker

Co. 1st Regiment 7th

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT ISSUED

1906.

AND HANDED TO

E. Walker

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

M. A. Walker

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

Fulton

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

continuously ever since 1835. That she is the Widow ofJ. de Walker

who was a soldier in Company

of the 48thRegiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of April March1862, and served in the Army up to 29th June 1862. That he lost hislife on the 29th day of June 1862. (State here

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

From disease contracted
in the ArmyDeponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854.I have been paid a pension as a resident of Fulton County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this 2nd day of JAN 2 1904.John R. Wilkinson OrdinaryPost Office SpauldCot MillState of Georgia,
County of Fulton.I, John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs.

who made the above affidavit and

am satisfied that the facts therein stated are true, and I know she is the individual she represents

herself to be, and that she has continuously resided in this State since the 29thday of June 1862.Given under my official signature and seal, this 2nd day of JAN 2 1904.John R. WilkinsonOrdinary of Fulton County.NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

M. A. Walker

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

Fulton

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

continuously ever since all her life. That she is the Widow ofJ. de Walker

who was a soldier in Company

of the 48thRegiment of GeorgiaVolunteers, that he enlisted in said regiment on or about the month of April March1862, and served in the Army up to 29th June 1862. That he lost hislife on the 29th day of June 1862. (State here

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

Died June 29th(Regular)Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1854.I have been paid a pension as a resident of Fulton County, for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this 2nd day of JAN 2 1904.John R. Wilkinson OrdinaryPost Office SpauldCot MillState of Georgia,
County of Fulton.I, John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. M. A. Walker, 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 29thday of June 1862.Given under my official signature and seal, this 2nd day of JAN 2 1904.Official
SealJohn R. WilkinsonOrdinary of Fulton County.NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

Given under my hand and seal

John P. Wilkinson
Ordinary of Fulton County.

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

Official
Seal

John P. Wilkinson
Ordinary of Fulton County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, John P. Wilkinson, hereby authorize
John P. Wilkinson to receive and receipt for the pension paid hereon, and request that he remit same to
me at once

In Witness Whereof, I have hereunto set my hand and seal, this 16th
day of January 1907.

Executed in presence of
John P. Wilkinson
Ordinary

Walker, M. A. (Mrs.)
Fulton Co.
To Those Herebefore Paid

1907.

No. 14

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO

Mrs. M. A. Walker

OF

Fulton County,

Widow of J. L. Walker

Co.

Regiment 4th Ga.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

46 1907.

AND HANDED TO

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

M. A. Walker

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since 1834. That she is the Widow of J. S. Walker who was a soldier in Company 4th of the Regiment of Pa Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to 1863. That he lost his life on the day of 1863 (State here particulars of the husband's death, when, where and from what cause.)

Lied 1862

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

I have been paid a pension as a resident of Fulton County, for the year ending December 31, 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 2nd day of JAN 2, 1907.

John R. Williamson Ordinary.

Post Office Walker

State of Georgia,

Fulton

County.

I, John R. Williamson Ordinary of said County, certify that I am well acquainted with Mrs. M. A. Walker 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 1862.

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

Official Seal

John R. Williamson

Ordinary of Fulton County.

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

year ending December 31, 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

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

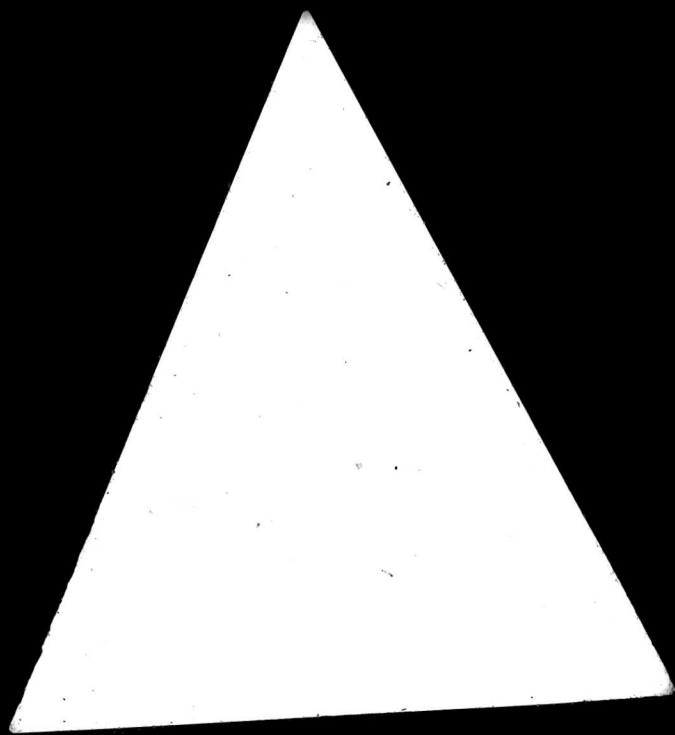
State of Georgia,
County of Clayton.
I, John R. Williamson, Ordinary of said County, certify that I am well acquainted with Mrs. M. A. Walker, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18.

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

John R. Williamson
Ordinary of Clayton County.

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

Georgia
Clayton County, J. D. Manson Ordinary and for
said County do hereby certify that Mrs.
M. A. Walker has been drawing a pension of sixty
dollars in said County, as a widow of a Confederate
soldier.
Given under my hand and seal this January 14 1907.
J. D. Manson Ordinary
Clayton County Georgia



Widow's Application
Fulton County

Under Act of 1910—As Amended by Act

County. **FULTON**

Name Mrs. Maria E. Rodgers

Widow of... Walker.

Date of Marriage August 5th, 18...76

Company... I

Regiment... 48th Georgia Inf.

Approved _____

Write, if necessary, to
J. H. Lovell
973 Oglethorpe Ave.
Atlanta Ga.

JOHN W. ~~STARK~~,
Commissioner of Pension

Ordinary certificate

STATE OF GEORGIA,

Pulmon COUNTY.

Thomas H. Jeffries, Ordinary of said County, do certify

Mrs. Mamie E. Walker the applicant for pension; that

she is the person she represents herself to be, and that she has been, continuously, a bona fide resi-

dent citizen of said State since January 1st, 1920; ~~that he has~~ ^{she is} ~~the same person as the person~~ now residents of said ~~the same person as the person~~ ^{she is} that ~~was a citizen of the~~

was
County and ~~year~~ daily sworn by me before signing the foregoing affidavits, and that ~~the~~ ~~year~~ ~~circu-~~
~~her~~ statements are entitled to full faith and credit.

Given under my hand and official seal of office this 21 day of July 1924
(SEAL OF ORDINARY)
J. M. T. Higgins, Ordinary.

INSTRUCTIONS:

[illegible]

Widow's Application

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

County **FULTON.** *WATSON 3A*
Name **Mrs Marie B. Hodges**
Widow of **6304 C.V. Walker.**
Date of Marriage **August 5th. 18 75**
Company **I**
Regiment **48th Georgia Inf.**
Approved

write, if necessary, to
J. M. Lovett
973 Ogden Ave.
St. Louis, Mo.

JOHN W. GARK,
Commissioner of Pensions.

Ordinary Certificate

STATE OF GEORGIA,
Fulton COUNTY.

I, Thomas H. Jeffries, Ordinary of said County, do certify
that I know Mrs. Mamie E. Walker the applicant for pension; that
she is the person she represents herself to be, and that she has been, continuously, a bona fide resi-
dent citizen of said State since January 1st, 1920; ~~that she was~~
~~the person who was sworn by me before signing the foregoing affidavits,~~ ^{she is} now residents of said
County and ~~were~~ ^{was} duly sworn by me before signing the foregoing affidavits, and that ~~to the best of my~~ ^{she is} truth-
ful and trustworthy and ~~her~~ statements are entitled to full faith and credit.

Given under my hand and official seal of office this 21 day of July, 1931
(SEAL OF ORDINARY) Wm. H. [Signature], Ordinary.
of Polton County

INSTRUCTIONS

- INSTRUCTIONS:**
1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will give true answers made to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
 2. Additional affidavits may be attached if blank space is insufficient.
 3. Affidavits must be sworn to and signed by the applicant and the witness on or before January 1st, 1981, are entitled.
 4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by the Ordinary.
 5. Attached certified copies of marriage license if obtainable. If not, prove marriage, by some person, or, by general reputation.
 6. Do not take out the back of the application carefully.
 7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

APPLICATION FOR PENSION BY A WIDOW

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA.

FULTON.....COUNTY

Personally appears before me, Mrs. Marie E. Baker, of said State and County and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, and submits testimony to support the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name, and where do you reside? (Give Post Office and County) Mrs. Mamie E. Walker, 973 Oglethorpe S. W. Atlanta, Georgia.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? Entire life. -
3. When, where and to whom were you married? Aug 5th, 1875 To Clarence Vale
entine Walker, in Augusta, Richmond County, Georgia.
- a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.) Company I - 48th Regiment, latter Georgia Militia, Col.
William Gibson, enlisted March 4th, 1862
5. When and where did the commands of your husband surrender or discharge from the Service? Augusta, Richmond County, Georgia.
6. Was your husband personally present with his command when it was surrendered or discharged? Yes.
7. If he was not present, state specifically and clearly where he was? I
8. When did he leave the Command? When war closed.
- a. For what cause did he leave? " " "
- b. By whose authority did he leave? " " "
- c. For how long was his leave of absence granted? I In what way? I
- e. What was his physical condition when he left his command? Poor.
- f. What effort did he make to return to his Command? I
- g. In what way was he prevented from going back to Command? Disability.
- h. Was he captured by the enemy at any time? No.
- i. If so, when and where? In what prison was he held and when was he released?
- None.
- j. When and where did your first husband die? Sept 4th, 1904, Atlanta, Ga.
- k. Were you residing together when he died? Yes.
- l. If not, how long have you resided apart? I
- m. Are you now a widow? Yes.
- n. Have you or your husband heretofore been paid a pension by the State? No.
- o. In and for what cause were you or your husband placed on the roll? I

Sworn to and subscribed before me, this the
21 day of July 1931
J. S. Bauman Ordinary
of Fulton County
(SEAL OF ORDINARY)

Memie E Walker
Applicant

County and was duly sworn to me before signing the foregoing affidavits, and that ~~these~~ ^{her} statements are entitled to full faith and credit.

Given under my hand and official seal of office this 21 day of July, 1931
(SEAL OF ORDINARY) of Fulton County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1931, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

- None.
- J. When and where did your first husband die? Sept 4th, 1904, Atlanta, Ga.
k. Were you residing together when he died? Yes.
l. If not, how long have you resided apart? 1
m. Are you now a widow? Yes.
n. Have you or your husband heretofore been paid a pension by the State? No.
o. If so, when and for what cause were you or your husband placed on the roll? 1

Sworn to and subscribed before me, this the
21 day of July, 1931
C. S. R. Hunt Ordinary
of Fulton County.
(SEAL OF ORDINARY)

Mamie E. Walker
Applicant.

State of Georgia
Pension Department
Atlanta

JOHN J. HUNT
Commissioner of Pensions

August 18th, 1931

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

Dear Judge:

IN RE: Pension application of Mrs. Mamie R.
Walker, widow of Lt.-Col. C. V. Walker.

The pension law requires that a pension shall be granted only upon Confederate service for at least six months and "an honorable accounting to the end of the War," except in the case of a soldier who enlisted less than six months prior to the end of the War and is proven to have served until the Surrender. The husband of applicant is not shown to have performed as much as six months of actual military service, nor is he accounted for until the end of the War. In the absence of the proof indicated, I do not feel authorized to approve the application as it now stands.

I regret very much that I cannot have the pleasure of writing my approval in this case, and hope it will be possible for Mrs. Walker to successfully amend her case.

With best wishes,

Your friend,

John J. Hunt,
COMMISSIONER OF PENSIONS.

Georgia Soldier Roster Commission

403 State Capitol

COMMISSION:
RICHARD E. RUSSELL, Jr., Governor
JOHN J. HUNT, Commissioner of Pensions
CHARLES H. COX, Adjutant General

LILLIAN HENDERSON, Superintendent
SOPHIA MYERS, Clerk

Atlanta, Ga., July 7, 1931.

I, Lillian Henderson, Superintendent Georgia Soldier Roster Commission, hereby certify that the following is a true copy of an original paper in the possession of Mrs. Mary R. Walker, 975 Oglethorpe Ave. S. W., Atlanta, Ga.:

"POLICE AND PROVOST GUARDS OF ATLANTA, GEORGIA,

Will pass Lt. Col. Walker of Co.- Regt. Georgia Militia for six hours from 1 October '64.

By order of R. I. Wilson, Colonel Commanding Regiment.

Approved:

By command of Brig. Gen. M. I. Wright.

C. W. Pessen, Capt. and Provost Marshal.

N. B. Present this Pass at the Provost Marshal's Office, on reaching the City.

Approved:

H. K. McCoy, Col. Commanding."

Above verified by

Lillian Henderson Supt. Ga. Soldier Roster Commission.

War. In the absence of the proof indicated, I do not feel authorized to approve the application as it now stands.

I regret very much that I cannot have the pleasure of writing my approval in this case, and hope it will be possible for Mrs. Walker to successfully amend her case.

With best wishes,

Your friend,

John J. Hunt,
COMMISSIONER OF PENSIONS.

the City.

Approved:

H. K. McCoy, Col. Commanding."

Above verified by

William Henderson - Supt. Ga. Soldier Roster Commission.

August 18th, 1931.

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

Dear Judge:

IN RE: Pension application of Mrs. Mamie B.
Walker, widow of Lt. Col. C. V. Walker.

The pension law requires that a pension shall be granted only upon Confederate service for at least six months and "an honorable accounting to the end of the War," except in the case of a soldier who enlisted less than six months prior to the end of the War and is proven to have served until the Surrender. The husband of applicant is shown to have performed as much as six months of actual military service, and is to be accounted for until the end of the War. In the absence of the proof indicated, I do not feel authorized to approve the application as it now stands.

I regret very much that I cannot have the pleasure of writing my approval in this case, and hope it will be possible for Mrs. Walker to successfully amend her case.

With best wishes,

Your friend,

John J. Hunt,
COMMISSIONER OF PENSIONS.

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes Mrs. Mamie E. Walker, who upon oath says:

That she is the widow of Clarence Valentine Walker, who was a member of Co. I, 48th Ga. Reg. and who served for three years as a soldier in the Confederate Army; that she has made a diligent search for members of the same company and regiment who could make affidavit as to the service of her husband in the Confederate Army but she has been unable to find any such members and she now knows of no living member of said company and regiment.

Sworn to and subscribed before me
this July 21 1931.

A. S. Baccant
C. C. Ordinary, Fulton Co., Ga.

Mamie E. Walker

STATE OF GEORGIA.)
RICHMOND COUNTY.)

TO ANY MINISTER OF THE GOSPEL, JUDGE, JUSTICE OF THE PEACE, OR
ANY PERSON AUTHORIZED TO CELEBRATE:

These are to authorize and permit you to join in the
Honorable State of Matrimony Clarence V. Walker of the one part,
and Mamie E. Rodgers of the other part, according to the Rites
of your Church: Provided there be no lawful cause to obstruct
the same, and this shall be your authority for so doing.

Given under my Hand, as Ordinary for the County aforesaid,
this 3 day of August 1875.

Sam'l Levy, Ordinary.

I HEREBY CERTIFY, That Clarence V. Walker and Mamie
Rodgers were duly joined in marriage by me, this fifth day of
August 1875.

Habm. J. Adams, M.G.

Georgia Soldier Roster Commission

403 State Capitol

COMMISSION:
RICHARD B. RUSSELL, Jr., Governor
JOHN J. HUNT, Commissioner of Pensions
CHARLES H. COX, Adjutant General

LILLIAN HENDERSON, Superintendent
SOPHIA MYERS, Clerk

Atlanta, Ga., July 7, 1931.

Walker, Clarence Valentine, Richmond County, Ga.
Elected 1st Lieutenant of Co. I, 48th Regt. Georgia Infantry Mch. 4,
1862. Wounded, 1862. Resigned, disability, June 10, 1862. Elec-
ted Lieutenant Colonel, 18th Military District Georgia Militia May 9,
1864.

Above is true copy of record of Clarence Valentine Walker on file of-
fice Georgia Soldier Roster Commission.

Lillian Henderson Supt.
Georgia Soldier Roster Commission.

I HEREBY CERTIFY, That Clarence V. Walker and Mamie
Rodgers were duly joined in marriage by me, this fifth day of
August 1875.

Habm. J. Adams, M.G.

STATE OF GEORGIA,
COURT OF ORDINARY
COUNTY OF RICHMOND

Elizabeth White

Clerk of the Court of Ordinary of said

County do hereby certify that I have compared the foregoing copy of marriage license
and certificate of marriage of Mamie E. Rodgers and Clarence V.
Rodgers.

with the original record and files thereof, now remaining in this office, and the same is a correct
transcript therefrom, and of the whole of such original record and file, and that said Court is a
Court of Record.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the
Court of Ordinary this the 20th day of July 19 31.

Elizabeth White
Clerk Court of Ordinary, Richmond County, Georgia.

with the original record and files thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record and file, and that said Court is a Court of Record.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the Court of Ordinary this the 20th day of July 19 31.

Elizabeth White
Clerk Court of Ordinary, Richmond County, Georgia.



Widow's Application

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

County FULTON
Name Mrs. Mattie E. Walker
Widow of J. R. Walker
Date of Marriage Oct. 22, 1891
Date of Husband's Death Mar. 22, 1919
Company Co. B, 4th Regt. Ala. Inf.
Regiment 14th Ala. Inf.
Approved DEC 27 1937, 1937
Director.

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

Joe. R. Walker enlisted as a private in Co. B, 4th Regt. Ala. Inf. Jan. 3, 1865. Wounded, Richmond, Va.

Captured, Richmond, Va. hospital Apr. 3, 1865. Escaped from said hospital Apr. 30, 1865.

(Washington record).

He also enlisted in Co. F, 12th Regt. Ala. Inf. in 1861, and was discharged May 21, 1862.

Wm. D. Anderson
Director Confederate Records Div.

Ordinary's Certificate

STATE OF GEORGIA,
Fulton

COUNTY.

THOMAS R. FORTNER,

Ordinary of said County, do certify

that I know Mrs. Mattie E. Walker

the applicant for pension, that

she is the person she represents herself to be, and that she has been, continuously, a bona fide resident

citizen of said State since January 1st, 1920, that I also know Miss Idaella Ballah

the witnesses who swear to the ~~validity of said~~ marriage, that both of them are now residents

of said County and were duly sworn by me before signing the foregoing affidavits, and that they are

truthful and trustworthy, and their statements are entitled to full faith and credit.

Given under my hand and seal of office this August day of August, 1937.

Ordinary.

SEAL OF ORDINARY

Wm. D. Anderson
Director Confederate Records Div.

of Fulton County.

INSTRUCTIONS

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will give accurate answers to each of the questions asked you and the evidence you shall give will be the truth, so help you God."
2. Additional affidavits may be attached if blood papers are insufficient.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be recorded in each original copy of marriage license if obtainable. If not, prove marriage by sworn persons, or by general reputation.
4. Fill out the back of the application according to the requirements in regard throughout the State. A short sample form is shown to handle.
5. Do not take an application from any witness who is already receiving a pension.

AUG 19 1937

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

Joe. E. Walker enlisted as a
Private in Co. B, 4th Regt. Ala-
bama Inf. Jan. 3, 1865. Wounded.
Richmond, Va.

Captured, Richmond, Va. Hospital
Apr. 3, 1865. Escaped from said
hospital Apr. 30, 1865.

(Washington record).

He also enlisted in Co. F, 12th
Regt. Ala. Inf. in 1861, and was
discharged May 21, 1862.

Director Confederate Records

Widow's Application

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

County..... FULTON

Name..... Mrs. Mattie E. Walker

Widow of..... J. R. Walker

Date of Marriage Oct. 29, 1891

Date of Husband's Death Mar. 22, 1919

Company..... 12th Regt. Ala. Inf.

Regiment..... 12th Regt. Ala. Inf.

Approved..... Dec 27 1937

Director

AUG 19 1937

Ordinary's Certificate

STATE OF GEORGIA,
Fulton COUNTY.

I, THOMAS H. JEFFRIES, Ordinary of said County, do certify
that I know Mrs. Mattie E. Walker, the applicant for pension; that
she is the person she represents herself to be, and that she has been, continuously, a bona fide resident
citizen of said State since January 1st, 1920; that I also know Miss Idella Bellah
the witness who swears to the ~~marriage~~ 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 19 day of August, 1937.
(SEAL OF ORDINARY)

INSTRUCTIONS:

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

FULTON

COUNTY.

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

SECTION I.

1. What is your name, and where do you reside? (Give Post Office and County).
Mrs. Mattie E. Walker, Route 7, Box 201, Atlanta, Ga. Fulton County

2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? Thirty Seven Years

Give date, or year, of your birth. Oct. 1, 1862 Age? 74

3. (1) When, (2) where and (3) to whom were you married? Oct. 29, 1891
LaGrange, Ga. J. R. Walker

a. Have you married since the death of first and soldier husband? No

b. When and where did your first husband die? March 22, 1919 Egan, Ga.

c. Were you residing together when he died? Yes

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

e. Are you now a widow? Yes

f. Have you or your husband heretofore been paid a pension by the State? Husband (Fulton County)

g. If so, when and for what cause were you or your husband placed on the roll? Transferred from
Fulton County 7-7-16

SECTION II.

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

1. When, where and in what Company and Regiment did your husband enlist as a soldier in
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-
try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.

2. When and where did the Commands of your husband surrender or discharge from the Service?

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

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

5. When did he leave the Command?

a. For what cause did he leave?

b. By whose authority did he leave?

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

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

f. What effort did he make to return to his Command?

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

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

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

Sworn to and subscribed before me, this the

19 day of July, 1937.

H. S. Ramsey, C., Ordinary

of Fulton County.

(SEAL OF ORDINARY)

Mrs. Mattie E. Walker
Applicant.

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

31 day of July 1937.
H. J. Ramsey C. Ordinary
 of *Fulton* County.
 (SEAL OF ORDINARY)

Mrs. Mattie E. Walker
 Applicant.

State of Georgia, Troup County

Ordinary's Office--ss:

I, *J. Forrest Johnson*, Ordinary and ex-officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of

Marriage License of *J. R. Walker and Mattie C. Christopher*

with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and 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 23 day of March 1937.

J. Forrest Johnson
 Ordinary and ex-officio C. O.

State of Georgia
 County of Fulton.

Personally before the undersigned authority now comes *Miss Idella Bellah* who upon oath says that she knows *Mrs. Mattie E. Walker* and knows that she was living with her husband *J. R. Walker* 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 31 day of July 1937

Idella Bellah
Harold D. Marshall
 O. O. Ordinary, Fulton Co. Ga.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. MATTIE E. WALKER, WIDOW OF J. R. WALKER,

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

ORDERED:

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

This, the 27th day of December 1937.

L. H. "Pat" Williams

Director, Confederate Division
 State Department of Public Welfare

says that she knows Mrs. Mattie E. Walker and
knows that she was living with her husband J. B. Walker
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 31 day of July 1937

Samuel D. Young
C. C. Ordinary, Fulton Co. Ga.

Mrs. P. B. Clark

L. H. "Pat" J. W.

Director, Confederate Division
State Department of Public
Welfare

MARRIAGE LICENSE

OF

J. B. Walker

AND

Mattie E. Christopher

Issued Oct. 24 1937

and Recorded on Page 272 Book

2 of Marriage Licenses

W. M. Young

Ordinary

No. 236

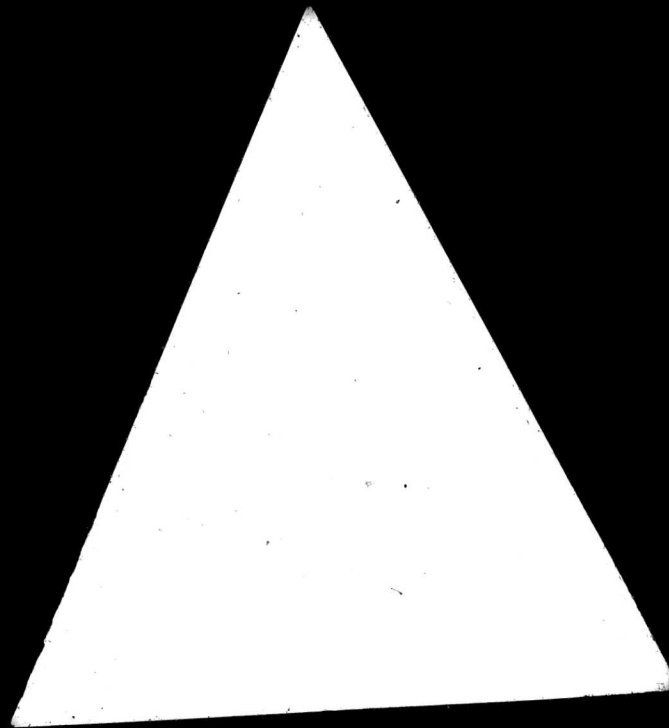


You are hereby authorized to join
 J. P. Walker and Mattie E. Christopher
 in the Holy State of Matrimony according to the Constitution
 and Laws of this State and for so doing this shall be your license.
 And you are hereby required to return this license to me
 with your Certificate hereon of the fact and date of the Marriage,
 within thirty days after the date of said Marriage.
 Given under my hand and seal this 24 day of
 October 1891 R. M. Young (L.S.)
 Ordinary.

LICENSE GRANTED UNDER ACT OF

STATE OF GEORGIA **CERTIFICATE** TROUP COUNTY
 I Certify that J. P. Walker and Mattie E. Christopher
 were joined in Matrimony by me this 29 day of October Eighteen Hundred
 and 91
 Recorded 12/30/91 1891 W. T. Bell, W. T.
 R. M. Young Ordinary (Sign here)

STATE OF GEORGIA
JURY COURT
I Certify that J. B. Walker and Mattie E. Christopher
were joined in Matrimony by me this 29 day of October Eighteen Hundred
and 01
Recorded 12/30/91 1891 W. T. Bell, V. J.
(Sign Here)
M. Young Ordinary
PARTY FORFEITS SEVERAL DOLLARS TO SURETHER WITH FACT AND DATE OF
MARRIAGE WITHIN THIRTY DAYS AFTER THE DATE OF SAID MARRIAGE



*Disapproved As
Fulton County*

CONFEDERATE SOLDIER'S APPLICATION

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

County *Fulton Co.*
Name *Nathaniel J. Walker*
Company *H.*
Regiment
Approved

C. E. McGREGOR.
Commissioner of Pensions.

29-26

1/26/37 2 ack of sufficient evidence to approve

STATE OF GEORGIA.

COUNTY.

Ordinary's Certificate

Walden *11/11/1910* *11/11/1910*
I, *Walden*, 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 *11/11/1910* the witness who
swears to the service; that both of them are now residents of said County and were duly sworn by
Walden signing the foregoing affidavit, and then are *11/11/1910* faithful and trustworthy and their
statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *11/11/1910* 1926
County

(SEAL OF ORDINARY)

Instructions:

1. Before any questions are answered the Ordinary, as it is
You do solemnly swear that you will keep the secrets of the
and confidential affidavits may be attached if blank paper is
3. All affidavits must be sworn to in the presence of the Ordinary
4. Fill out the back of the application carefully.

January 26, 1937.

Hon. Thos. H. Jeffries,
Ordinary of Fulton County,
Atlanta, Ga.

My dear Judge:

The evidence submitted is not sufficient to
warrant the approval of the application of Mr. Nathaniel J.
Walker for a pension.

With kind regards,

Very truly yours,

Commissioner of Pensions

1/10/27 Lack of sufficient evidence to approve

CONFEDERATE
SOLDIER'S APPLICATION

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

County: *Fulton*
Name: *Nathaniel J. Walker*
Company: *1st*
Regiment: *1st*
Approved: *[Signature]*

C. E. McGREGOR
Commissioner of Pensions

8-29-26

Ordinary's Certificate

STATE OF GEORGIA,

COUNTY,

I, *Nathaniel J. Walker*, 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 *Nathaniel J. Walker*, the witness who swears to the service; that both of them are now residents of said County and were duly sworn by *[Signature]*, signing the foregoing affidavits, and they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this *10th* day of *April*, 1926
of *Fulton* County
(SEAL OF ORDINARY.)

Instructions:

1. Before any questions are answered the Ordinary shall swear to the applicant and the witness in the following words: "You do solemnly swear that you will true answers make to the questions asked you and the evidence you give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are sufficient.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
4. Fill out the back of the application carefully.

APPLICATION FOR PENSION BY A SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

COUNTY,

Personally appears before me, *Nathaniel J. Walker*, said State and County, and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, and submits testimony to support the same and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post Office)
Nathaniel J. Walker, Fulton County, Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia?
Since 1920.
3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State from 1861 to 1865?
Yes.
4. When and where, and in what Company and Regiment did you enlist? (State the arm and class of service, and give name of Colonel and Captain.)
Company H, 1st Regiment, Georgia Infantry, 1861-1865.
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge.)
Discharged in Atlanta, Georgia, Feb. 1, 1867.
6. When and where was your Company and Regiment surrendered or discharged from the Service?
Discharged in Atlanta, Georgia, Feb. 1, 1867.

If you were not actually present, state specifically and clearly where you were

- a. Where was your Command when you left it?
When discharged in Feb. 1, 1867.
- b. When did you leave the Command?
Discharged.
- c. For what cause did you leave?
Discharged.
- d. By whose authority did you leave?
- e. For how long was your leave of absence granted? In what way?
- f. Why did you not return to your Command after leave expired?
X
- g. In what way were you prevented?
X
- h. What effort did you make to return?
No.
- 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?
No.
10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was it not allowed?
No.

Sworn by and subscribed before me, this the *28th* day of *April*, 1926.
of *Fulton* County
(SEAL OF ORDINARY.)

Nathaniel J. Walker
Applicant.

Instructions:

1. Before any questions are answered the Ordinary shall swear that he is a Justice of the Peace and the witness in the following words: "You do solemnly swear that you will true answers make to all the questions asked you and the evidence you give shall be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
4. Fill out the back of the application carefully.

28th day of September, 1926
 Ordinary
 County
 (SEAL OF ORDINARY.)

Applicant.

Questions of Witness as to Service

STATE OF GEORGIA
 County of Chatham
 I, Samuel Morgan Roby of said State and County is hereby presented as a witness in support of the application of William J. Walker 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. Who is your name and where do you reside? Samuel Morgan Roby
1609 Gordon St. Atlanta, Ga.
2. How long and since when have you known William J. Walker the applicant?
70 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? Atlanta, Ga. Since 1917
associating with him
4. When, where and in what Company and Regiment did William J. Walker fight?
(Give date and place) April 1864 - Tall Springs, Ga.
5. How did you obtain your information of his service?
He was present
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) About six months
from June 1864 to fall 1864
7. When and where was his Command surrendered or discharged? (Give date and place.)
at Tall Springs, 1864
8. Were you personally present when it was surrendered?
No
9. If not, where were you? Eastman, Ga. and how came you there? Lived there
10. Was the applicant personally present with his Command when it was surrendered?
yes
11. If not, where was he? X and how came him there?
12. When, where and for what cause did he leave his Command? (Give date)
X
13. By whose authority did he leave his Command?
X and how long was he granted leave?
X
14. In what way, if you know of your own knowledge, was he prevented from returning to his Command? (State clearly and specifically.)
Personnel acquainted with Applicant and
Autumn 1864 he was prevented from returning to his Command
Applicant was with his Command when discharged
15. Was applicant captured as a prisoner? No. If so, when and where?
X and when released?
X

Sworn to and subscribed before me, this the
 28th day of September, 1926
 Ordinary
 County
 (SEAL OF ORDINARY.)

S. M. Roby Witness.

15. Was applicant captured as a prisoner? *No*. If so, when and where? *X* and
in what prison was he held? *X*
when released? *X*
Sworn to and subscribed before me, this the
28th day of *September*, 192*6*
Ordinary
County
of
(SEAL OF ORDINARY)

D. H. Raby
Witness.

FULTON COUNTY



GEORGIA

THOMAS H. JEFFRIES
Judge of the Ordinary of Fulton County
ATLANTA, GA.
September 28th, 1926.

Hon. John W. Clark,
Pension Commissioner,
State Capitol,
Atlanta, Ga.

Dear Sir:-

Enclosed please find application by
Nathaniel J. Walker, for your information will state
that Mr. Walker claims that he is now an inmate of the
Soldiers Home, but will get his discharge, and leave
the home before October 1st, 1926.

Yours truly,

Thos H. Jeffries
ORDINARY.

No Capt. Nitchcock

*5-Regt
Co. H. shows Capt. Adams
and Walker not on roll*

Confederate Soldiers Home of Georgia

R. DET. LAWRENCE, PRESIDENT
MARIETTA, GA.
J. P. WEBB, VICE PRESIDENT
LOWENSVILLE, GA.

W. E. MCALLISTER, SUPERINTENDENT
SOLDIERS HOME, ATLANTA, GA.

J. S. KENNEDY, TREASURER
ATL. NATL. BANK, ATLANTA, GA.

SAM J. BELL, SECRETARY
SOLDIERS HOME, ATLANTA, GA.



ATLANTA, GA. Oct. 27th, 1926.

Hon. Jas. W. Clark,
Commissioner of Pensions,
State Capitol,
Atlanta, Ga.,

Dear Sir:-

The records in this office show that N. J. Walker en-
listed in Company "H" of the Georgia Reserves as a Private in June,
1864, participated in the battle of Atlanta and was discharged for
disability the latter part of 1864.

His record in the Home is as follows:

Entered first Aug. 13th, 1927.
Honorably Discharged Dec. 28th, 1928
Re-entered March, 10th, 1923.
Honorably Discharged June, 23rd, 1924,
Re-entered Oct. 1st, 1924
Honorably Discharged Sept. 30th, 1926.

During Mr. Walker's occupancy of the Home, he obeyed the
regulations and never gave the officials any trouble, behaving him-
self in a gentlemanly manner.

Yours very truly,

WETO/B.

W. E. McAllister
W. E. McAllister, Supt.

ORDINARY.

No Capt. Nitchcock

5 Regt.
Co. H. shows Capt. Adams
and Walker not on roll

Honorably Discharged Sept. 30th, 1926.

During Mr. Walker's occupancy of the Home, he obeyed the regulations and never gave the officials any trouble, behaving himself in a gentlemanly manner.

Yours very truly,

WEMc/B.

W E McAllister
W. E. McAllister, Supt.

Confederate Soldiers Home of Georgia

R. DET. LAWRENCE, PRESIDENT
MARIETTA, GA.

W. E. McALLISTER, SUPERINTENDENT
SOLDIERS HOME, ATLANTA, GA.

J. B. KENNEDY, TREASURER
ATL. NATL. BANK, ATLANTA, GA.

J. P. WEBB, VICE PRESIDENT
LAURENSVILLE, GA.

SAM J. BELL, SECRETARY
SOLDIERS HOME, ATLANTA, GA.



ATLANTA, GA. Sept. 30th, 1926.

To Whom It May Concern:-

This is to certify that Veteran
W. J. Walker is an inmate of the Confederate Soldiers'
Home of Georgia and he is hereby granted an Honorable
Discharge at his own request.

Signed,

WEMc/B.

W E McAllister
W. E. McAllister, Supt.

Discharge at his own request

Signed,

WEM/B.

W. E. McAllister
W. E. McAllister, Supt.

January 26, 1927.

Hon. Thom. H. Jeffries,
Ordinary of Fulton County,
Atlanta, Ga.

My dear Judge:

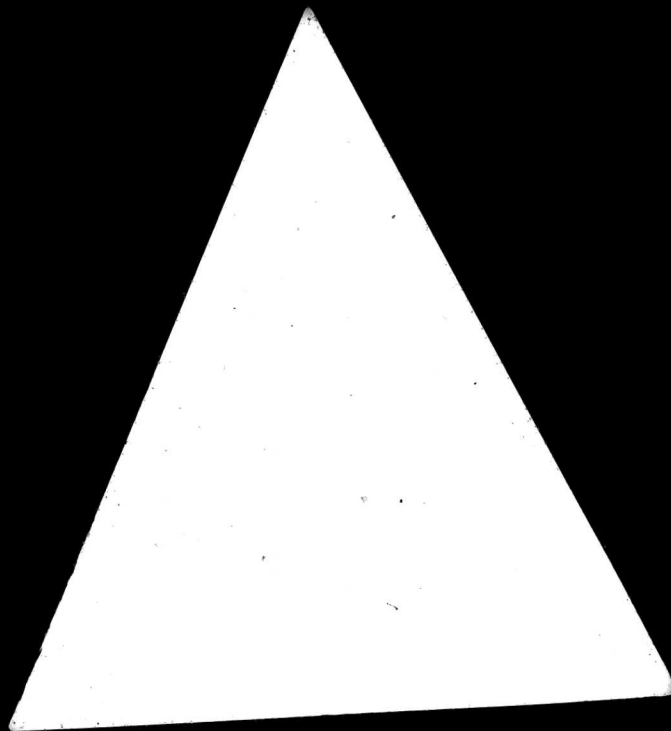
The evidence submitted is not sufficient to
warrant the approval of the application of Mr. Nathaniel J.
Walker for a pension.

With kind regards,

Very truly yours,

Commissioner of Pensions

Commissioner of Pensions



Walker, Robert James
Fulton County
 No. _____
Approved - 1902
INDIGENT PENSION,
1902.
 Name *Robert M. Walker*
 County *Fulton*
 Co. *Company* Reg't *1st*
 Approved _____ 1902.

JOHN W. LINDSEY,
 Commissioner of Pensions.

 WARRANT HANDED TO _____

 Ordinary will write Name of Applicant, Company and Regiment on back as indicated above.
 Geo. W. Harrison, State Printer, Atlanta.
920-1902

This man does
not Military duty
is in command
of a company
and is not
Military duty but
is at duty and
is command of
the institution to him
1902

POWER OF ATTORNEY.
STATE OF GEORGIA.
 COUNTY, _____
 I, _____ of _____
 do hereby authorize _____
 to receive and receipt for the pension allowed, and request that he send same to _____
 at _____ day of _____ 1902.
 Witness my hand and seal, this _____ day of _____ 1902.
 Executed in presence of _____
 [L. S.]

Warrant 1
Name: Andrew Jackson Johnson
County: Fulton
Approved: [Signature]
JAN 11 1902
Ordinary will write his and Regiment on back as follows:
9/20-1902

Sworn to and subscribed before me this the 10th day of Jan 1902.
John Williamson
Ordinary,
Fulton County.
KARNEY IV X
COSTELLO
Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

Andrew Jackson Johnson of said State and County, having been presented as a witness in support of the application of Robert Ramon Walker for pension under Section 1254, Code, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?
Andrew Jackson Johnson, reside at 416 Thayer St., Atlanta Ga.
2. Are you acquainted with Robert Ramon Walker, the applicant; if so, how long have you known him?
Yes, Sir, forty years ever since 1862.
3. Where does he reside, and how long and since when has he been a resident of this State?
In Atlanta Ga, at 718 Jackson St; lived not at all his life.
4. When, where and in what company and regiment did he enlist, and how do you know?
May 1862, Macon Ga, Company B, because I was there personally.
5. Were you a member of the same company and regiment?
Yes, Sir.
6. How long did he perform regular military duty?
About 3 years.
7. When and where was he captured and surrendered?
April 1865, by the Surrender of the forces of the Confederacy.
8. Were you present when it surrendered?
Yes, Sir.
9. Was applicant present?
Yes, Sir.
10. If he was not present, where was he?
He was there.
11. When did he leave his command?
Never left.
12. By what authority he left?
Command of Surrender.
13. How do you know all of this?
I was there and with him, I know by my own personal knowledge.
14. What property, effects or income has the applicant? (Give your means of knowledge)
None that I know of.
15. What property, effects or income did the applicant possess in 1898, 1897, 1896, 1899, 1900 and 1901, and what disposition, if any, did he make of same?
None that I know of. I have known him 7 years and I know if he had any.
16. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
No, Sir, none that I know of. None to convey.
17. What is the applicant's occupation and physical condition?
He is a way a car-fitter by trade, but he is now too feeble to do any work at all, and has been so a long time.
18. Is the applicant unable to support himself by labor of any sort, if so, why?
Yes, he is unable to do anything as laborer. He is almost totally blind, and very feeble.
19. How was he supported during the years 1898, 1899, 1900 and 1901?
By his own knowledge, but he lives with an old man, formerly blind, his time for his life.
20. What portion of his support for those four years was derived from his own labor or income?
None that I know of.
21. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
He is very old and very feeble, not able to do any work, and cannot do. He is an old man, formerly blind, his time for his life.
22. What interest have you in the recovery of a pension by this applicant?
None whatever.

Sworn to and subscribed before me, this the 10th day of Jan 1902.
John Williamson
Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me Dr. J. H. Manning and Dr. W. C. Martin, both known to me as reputable physicians

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

That his left eye is not count see much out of the other one. His right eye is about worn out. It is his opinion he has not enough life left to make help a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 10th day of Jan 1902.

John Williamson
Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John Williamson, Ordinary in and for said County, hereby certify that the applicant, Robert R. Walker, resides in said County, and has been a bona fide resident of this State since the day of 189.

and that the witness, viz: A. J. Johnson, is of trustworthy character, and that their statements are entitled to full faith and credit.

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

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

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

Witness my hand and seal of office, this 10th day of Jan 1902.
John Williamson
Ordinary,
Fulton County.

NOTE.

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

INDEX

I have known him & would know if he was or is
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
No, Sir, none that I know of - none to convey.
14. What is the applicant's occupation and physical condition?
He is a way a car-
printer by trade, but he is now too feeble
to do any work at all, & has been so a long time.
15. Is the applicant unable to support himself by labor of any sort, if so, why?
Yes, he is
unable to do anything as labor. He is almost
totally blind, and very feeble.
16. How was he supported during the years 1898, 1899, 1900 and 1901?
By my own
knowledge, but he lives with an son
17. What portion of his support for these four years was derived from his own labor or income?
None that I know of.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under
Section 1254, Code?
He is very old and very feeble, not able
to do any work, and cannot do. He is an old
man, simply living his time for this life.
19. What interest have you in the recovery of a pension by this applicant?
None whatever.
Sworn to and subscribed before me, this the 15th day of September, 1902.
John F. Williamson Ordinary.

(and that the witness, viz.: J. F. Williamson, is of trustworthy character, and that their statements are entitled to full faith and credit.
I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.
I further certify that the tax digest of _____ County show that applicant returned for taxation in his name in 1899 _____ Dollars of property, and in 1900 _____ Dollars of property.
In my opinion the foregoing claim is _____ made in good faith.
Witness my hand and seal of office, this 15th day of September, 1902.
John F. Williamson Ordinary,
of Fulton County.

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

STATE OF GEORGIA.

Modern

COUNTY

I, Wm H. Jeffries (Ordinary of said County, do certify
Wm Rosa Walker the applicant for pension. She
that I know

and was on the 14 November 1985. ~~that he was~~ *Alger*
~~the witness who was to be interviewed~~ *Alger* now resident of said County and
witnessed *Winkler* signing the foregoing affidavit and that *Alger*
witnessed *Alger* signing the foregoing affidavit and that *Alger* truthful, trust-

Sworn under my hand and official seal of office this 28 day of Sept, 1920

(SEAL)

County:

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
 "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence"

Additional affidavits may be attached if blank spaces are insufficient.

3. Only widows who married prior to January 1st, 1961, are entitled.

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

reputation.

10

Walker, Rosa (M)

[Handwritten signature]

No. 11311

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton

Name Mrs Rosa Walker

Widow of John Baker

Company

Regiment 21st Ga

Approved -----

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1920

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY,
I, Thos H. Jeffries, Ordinary of said County, do certify
that I know Mrs Rosa Walker the applicant for pension. She
is the person she represents herself to be and she is a bona fide continuing resident citizen of said County
and was on the 4th November 1908, ~~that I know~~ she is
now residing in the County of Fulton Georgia
and were duly sworn by me before signing the foregoing affidavits and that she is truthful, trust-
worthy, and their statements are entitled to full faith and credit.
Sworn under my hand and official seal of office this 28 day of Oct, 1920
(SEAL) Fulton County.

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

Walker, Rosa (Mrs)
Fulton County
No
1770
Widow's Pension
Under Act 1880 - as Amended by Act of 1919
County Fulton
Name Mrs Rosa Walker
Widow of John Walker
Company K
Regiment 1st Ga
Approved N
10-30-1920
J. W. LINDSEY
Commissioner of Pensions
State Printing Co. State Printer, Atlanta

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY,

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

1. What is your name, and where do you reside? Mrs. Rosa Walker, Fulton Co., Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? 1861
3. When, where and to whom were you married? Jan 14, 1861, John Walker
- a. Have you married since the death of first and sole husband? No
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.) 1861 at Summerville
in Co. "K" 21st Ga. under Capt K. R. Forrester
5. When and where did the commands of your husband surrender or discharge from the army?
Appomattox
6. Was your husband personally present at the time of the surrender or discharge of this command?
Yes
7. If he was not present state closely where he was? Fort Sumter
8. Where was his command when he left?
a. For what cause did he leave his command?
b. By whose authority did he leave his command?
c. For how long was he granted leave of absence?
d. What was his physical condition when he left his command?
e. What effort did he make to return to his command?
f. In what way was he prevented from going back to Command?
g. Was he captured by the enemy at any time?
h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
i. When and where did your first husband die? Sep 23 1913, Chattooga County, Ga.
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? Never resided apart
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No
- If so, when and for what cause were you or your husband placed on the roll?
Applied from Fulton Co. about 1919 but was disallowed

Sworn to and subscribed before me this the

15 day of Oct, 1920

Thos H. Jeffries Ordinary

of Fulton County.

(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA.

Chattahoochee COUNTY.

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

1. What is your name and where do you reside? J. G. Handrick
Seaside, near the Sea, near the Sea, near the Sea
2. How long and since when have you known J. G. Handrick applicant? about 10 years
3. How long and since when has she continuously resided in this State? (Give date.) about 10 years
4. When and to whom was she married? about 10 years How do you know? about 10 years
5. How long and since when did you know J. G. Handrick her husband? about 10 years
6. When and where did J. G. Handrick the husband of applicant, die? in Chattahoochee County, near the Sea
7. Were the applicant and her husband living together as husband and wife at the date of his death? about 10 years
8. If not, how long did they live apart before his death? about 10 years
9. Were they divorced? about 10 years
10. When, where and in what Company and Regiment did J. G. Handrick enlist? in the 1st Regiment of the 1st Division of the 1st Army
11. Were you a member of the same Company? yes
12. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from 1861 to 1862
13. When and where did his Command surrender, and was discharged? about 10 years
14. Were you personally present when it was surrendered? yes If not, where were you and how came you there? about 10 years
15. Was the husband of applicant personally present at surrender? no If not where was he? about 10 years When, where and for what cause did he leave Command? (Give date.) about 10 years By whose authority did he leave his Command? about 10 years And how long was he granted leave? about 10 years How do you know all this?
16. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? about 10 years
17. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? about 10 years

Sworn to and subscribed before me this the

10 day of April 1862
J. G. Handrick Ordinary
of Chattahoochee County.
(SEAL)

of Polk County
(SEAL)

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you will give."
2. Additional affidavits may be attached if blank spaces are furnished.
3. Only widows who married prior to January 1st, 1921 are entitled.
4. Affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attest certain copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Don't use the back of the application carefully.
7. Don't put the seal on the back of the application.

Instructions:

I, Ordinary of said County, do certify that I know the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know the applicant for pension; that she is the person who swears to the correctness of her statement; 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 true and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 192 day of May, 1920.

(SEAL OF ORDINARY)

County of Polk

Ordinary's Certificate

STATE OF GEORGIA.

COUNTY.

WIDOW'S APPLICATION

Under Act of 1910—As Amended by Act of 1915, and Constitutional Amendment of 1920.

County Polk
Name Widow R. W. W. W.
Widow of W. W. W.
Date of Marriage May 12, 1920
Company 1st
Regiment 1st
Approved May 12, 1920

Commissioner of Pensions

Disapproved for the reason that no proof of husband's service is submitted by applicant and the official records do not account for him from Aug. 31, 1864 to the end of the War.

V. E. Harris
Commissioner of Pensions



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Walter Ross (Type)
OK for 1925
Fullton, County
WIDOW'S APPLICATION
Under Act of 1910--As Amended by Act of
1913, and Constitutional Amendment
of 1920.
County Fullton
Name-Walter Ross, Walter
Widow of J. B. Walker
Date of Marriage 1874
Company N
Regiment 11th
Approved May 12, 1925

STATE OF GEORGIA.

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
of each shall give you will be the whole truth." So help you God."
- Additional affidavits may be attached and sworn to by witnesses as early as January 1st, 1881.
- All affidavits must be made before the Ordinary or Clerk of the Court, at which the applicant or witness reside and be certified by such Officer or Clerk.
- All affidavits must be made before the Ordinary if obtainable. If not, prove marriage, by some person, or by general reputation.
- Attach certified copies of marriage license if obtainable.
- Fill out the back of the application carefully.
- To use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

Sworn to and subscribed before me, this the
17 day of Oct, 1924.
William R. Marshall, Ordinary
of Fulton County.
(SEAL OF ORDINARY)

- Instructions:
1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
 2. Additional affidavits may be attached if blank spaces are insufficient.
 3. Only widows who married prior to January 1st, 1881 are entitled.
 4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
 5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
 6. Fill out the back of the application carefully.
 7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

Sworn to and subscribed before me, this the
17 day of Oct, 1924
William R. Henson Ordinary
of Fulton County.
(SEAL OF ORDINARY)

Mrs Rosa Walker
Applicant.

TO PAY-
1930. \$ 76.50
Cig. & C. Tax. \$
TOTAL

FILED
NOV 7 1933
VETERAN SERVICE OFFICE
A. L. HENSON, Director

Walter, Rosa (Mrs) 50
Fulton Co.

For Fulton County

Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

Thomas H. Jeffries Ordinary
For Mrs Rosa Walker
(Name of Pensioner)

Date of Death: Oct 26, 1923

Amount: \$ 76.50

PAID TO ORDINARY ON THIS CLAIM:

FUND FROM WHICH PAID	
2.27	6.44
2.27	7.13
14.30	
TOTAL 136.50	

Approved, and ordered paid,

FEB 27 1934

A. L. Henson
A. L. HENSON,
Director, Veterans Service Office.

WAR DEPARTMENT.

THE ADJUTANT GENERAL'S OFFICE.
1000 WASHINGTON, D. C. 1, 1930.

Respectfully returned to
Commissioner of Prisons
Atlanta
Georgia.

with the information that
Application in
the case of John M. B.
Walker (also found as
John Walker), Det. Co. K,
31 Reg. Ta. Inf. C. D. U.
was furnished your
office July 6, 1914
the fact that you
at that time invited

R. C. Harris
Per 71-71
The Adjutant General.

Form No. 100-A (4-11)
Ed. Oct. 1920-15,000

Received of Thomas H. Jeffries, Ordinary, \$ 76.50
for the account of Mrs Rosa Walker. This amount has
not previously been paid and is now owing to me.
March 24 1933.
Arthur J. Lander
Per Paul V. Ray

Received of Thomas H. Jeffries, Ordinary, the sum of
\$ 60.00 to apply on funeral expenses of Rosa Walker.
This 6 day of March, 1934.
Arthur J. Lander
By R. C. Harris

5147

JOHN W. LINDSEY
Commissioner of Pensions
Atlanta, Georgia

11/17/20

Adjutant-General,
Washington, D. C.
Dear Sir:

Please furnish me with such record as may be found in the
Adjutant-General's Office of the War Department of
Walker, John, Private; Co. K, 21st Regt. Ga. Vol. Inf.

He is an applicant under the Georgia law for a Confederate
soldier's pension, and his record in your Department, whether it
is of his company roll or prison record, is wanted as evidence in
his claim for a pension.

Yours respectfully,

John W. Lindsey
Commissioner of Pensions of Georgia.

JOHN W. AWTRY, Pres. & Treas.
FRANK H. LOWNDES, Vice-Pres. & Mgr.

PHONES: WALNUT TREE
WALNUT TREE

AWTRY & LOWNDES COMPANY FUNERAL DIRECTORS

AMBULANCE SERVICE

31 Cain Street, N. W.

ATLANTA, GA.

Oct 10/22

IN ACCOUNT WITH

Mr. August Walker,

No. 403 Orchard Street N.W.

Atlanta, Ga.

For Mrs. Rosa Walker,

Oct 10/22

One Funeral Home St.

Tobacco

Coffin

Constitution

Journal

Certified Certificate to

174.00

8.00

10.00

5.00

4.40

.50

136.50

State of Georgia,
County of Fulton.

Personally appeared H. B. Bankston of
Awtry & Lowndes Company, who swears the above bill is
true and was for funeral expenses of Mrs. Rosa Walker,
deceased.

Sworn to and subscribed before
me This Nov. 4, 1923.

H. B. Bankston
H. B. Bankston, C. C. Ordinary.

Application for Payment of Expenses of Last Illness and Funeral

(Under Act of 1919)

(To be disbursed by the Ordinary)

GEORGIA, *Fulton* County:

Before me, the Ordinary of said County, comes *H. B. Bankston, with*
Awtry & Lowndes Co. of said County, who, after being duly sworn, on oath says
that he knew *Mrs. Rosa Walker* late of said County, a Confed-
erate pensioner, and that said person is the identical person named and described in the attached
certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of
ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted
to the sum of \$136.50, as shown by sworn statements FULLY and COMPLETELY
ITEMIZED, hereto attached.

Sworn to and subscribed before me,

this the *4th* day of *Nov*, 1923

Arthur R. Usabrey Ordinary.

CERTIFICATE OF THE ORDINARY

GEORGIA, *Fulton* County.

I certify that *H. B. Bankston* who subscribed
to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and
credit. I further certify that I knew *Mrs. Rosa Walker* the deceased
pensioner referred to in the foregoing affidavit and that said deceased was at the time of death
regularly enrolled as a pensioner on the records of file in my office. I further certify that said de-
ceased pensioner is the identical person named and described in the attached certified copy of burial
certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses
of last illness and burial for which claim is made.

Given under my hand and seal of office, this the *6th* day of *Nov*, 1923.
(Seal of Ordinary) *Arthur R. Usabrey* Ordinary.

INSTRUCTIONS:

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

Attry & Lowndes Company, true and was for funeral expenses of Mrs. Rosa Walker, deceased.

Sworn to and subscribed before me This Nov. 4, 1933.

W. B. Bankston
William R. Bankston C. C. Ordinary.

you have paid the bill, and obtained a receipt for each payment, return the vouchers, with the bill, to 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.

GEORGIA, FULTON COUNTY.

Personally appeared Mrs. Rosa Walker, who swears that she has made diligent search and has been unable to find any witness to her husband's service as a Confederate Veteran.

Sworn to and subscribed before me, this 27th day of October, 1924.

William R. Bankston
 C. C. Ordinary.

STATE OF GEORGIA.
 COUNTY OF FULTON.

Personally appeared Mrs. Mary York who makes affidavit that she is the sister of John B. Walker who died several years ago leaving as his widow Mrs. Rosa Walker. She further swear that she is not able to give the Command Company or Regiment that her brother served in during the Civil War, but she knows positively that her brother John B. Walker enlisted in the Confederate Service at the beginning of the War in 1861 at Summerville, Chattooga, Co. Ga. served during the entire war and returned to his home in Summerville, Chattooga County, Ga. at the close of the War in 1865.

Sworn to and subscribed before me, this 6th day of May, 1925.

William R. Bankston
 Clerk Court of Ordinary.

State of Georgia, County of Brooks

COURT OF ORDINARY

I, *W. B. Bankston*, Ordinary and Ex-Officio Clerk of the Court of Ordinary of Brooks County, Georgia, do hereby certify that the foregoing and within is a true and correct copy of *Marriage license and Certificate of John Walker and Rosa Walker*

as appears of record and of file in this office.

In Witness Whereof, I have hereto set my official signature and affixed the seal of the Court of Ordinary, at the City of Quinman, County and State aforesaid, this *11th* day of *August* in the year of our Lord Nineteen Hundred and *Twenty-five*

W. B. Bankston
 Ordinary and Ex-Officio Clerk of said Court of Ordinary, Brooks County, Georgia.

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally appeared Mrs. Mary York who makes affidavit that she is the sister of John B. Walker who died several years ago leaving as his widow Mrs. Rosa Walker. She further swears that she is not able to give the Command Company or Regiment that her brother served in during the Civil War, but she knows positively that her brother John B. Walker enlisted in the Confederate Service at the beginning of the War in 1861 at Summerville, Chattooga Co. Ga. served during the entire war and returned to his home in Summerville, Chattooga County, Ga. at the close of the War in 1865.

Mrs Mary J York

Sworn to and subscribed before me,
this 6th day of May, 1925.

William B. Marshall
Clerk Court of Ordinary.

as appears of record and of file in this office.

In Witness Whereof, I have hereto set my official signature and affixed the seal of the Court of Ordinary, at the City of Quitman, County and State aforesaid, this the 11th day of August in the year of our Lord Nineteen Hundred and Twenty five

W. B. Marshall
Ordinary and Clerk of Court
of Ordinary, State of Georgia

March 6th, 1925.

Fulton County,
Mrs. Rosa Walker.

DISAPPROVED, for the reason that no proof of husband's service is submitted by applicant and the official records do not account for him from Aug. 31st, 1864 to the end of the War.

H. L. Harris,
COMMISSIONER OF PENSIONS.



CERTIFICATE OF DEATH
GEORGIA STATE BOARD OF HEALTH
Bureau of Vital Statistics

Registered No. 4158

1. PLACE OF DEATH		County <u>Fulton</u> Mileage District (Number and Name) _____ State of Georgia _____	
City or Town <u>Atlanta</u> Length of residence in this city or town: Yrs. _____ Mos. _____ Days _____		NON-RESIDENT (Yes or No.) _____	
Street and Number (No.) <u>208 Orchard St. N.W.</u> Ward _____		(If death occurred in a hospital, give its name (instead of street and number)) _____	
2. FULL NAME <u>Mrs. Rosa Walker</u> (Street and Number) <u>208 Orchard St.</u> (State) _____			
PERSONAL AND STATISTICAL PARTICULARS			
3. SEX <u>Female</u>	4. COLOR or RACE <u>White</u>	5. Single, Married, Widowed, Divorced (write the word) <u>Widowed</u>	16. DATE OF DEATH <u>Oct. 26, 1933</u> at <u>6:30 P.</u>
6. DATE OF BIRTH (month, day, year) <u>8/21/1882</u>			(Month, Day, Year) _____ at _____ (Hour)
7. AGE <u>51</u>	Months _____ Days _____	It was then one day _____	17. I HEREBY CERTIFY that I attended the deceased from <u>10/15/33</u> to <u>10/26/33</u>
(a) Trade, profession or particular kind of work done, as engineer, Sawyer, bookkeeper, etc. _____			I last saw _____ or _____ on <u>10/26/33</u> death is said to have occurred on the date and hour stated above.
(b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc. _____			The principal cause of death and related causes of importance in the order of onset and duration of each: <u>Influenza (Pleurisy)</u>
(c) Date deceased last worked at this occupation (month and year) _____			(d) Total years spent in this occupation _____
8. OCCUPATION _____			
9. BIRTHPLACE <u>Ga.</u> (P. O. Address) _____			
10. NAME <u>Mr. McAuley</u>			
11. BIRTHPLACE <u>Ga.</u> (P. O. Address) _____			
12. MAIDEN NAME <u>Dont know</u>			
13. BIRTHPLACE <u>Dont know</u> (P. O. Address) _____			
14. INFORMANT <u>Ernest Walker</u> (Signed) _____ (Address) <u>RFD 5, Box 196</u>			
15. BURIAL PLACE <u>Hollywood</u> (Cemetery) <u>Atlanta</u> (Date) <u>10/28/33</u> (Funeral) _____			
16. UNDERTAKER <u>Awtry & Lowndes Co.</u> (Signed) _____ (Address) <u>By Mrs. G.W. Hatcher</u>			

OFFICE OF THE REGISTRAR OF VITAL STATISTICS
For the City of Atlanta

Atlanta, Ga., 10/30/33

GEORGIA,
FULTON COUNTY.

I hereby certify that the foregoing is a true and correct copy of the record of death Number 4158 of the series of 1933 for Mrs. Rosa Walker as appears on file in the office of the Registrar of Vital Statistics of the City of Atlanta.
(Signed) L. Shornton LOCAL REGISTRAR.

SEAL



CERTIFICATE OF DEATH
GEORGIA STATE BOARD OF HEALTH
Bureau of Vital Statistics

Registered No. 4158

1. PLACE OF DEATH
County Fulton Militia District (Number and Name) _____ State of Georgia
City or Town Atlanta Length of residence in this city or town: Yrs. _____ Mos. _____ Ds. _____ NON-RESIDENT (Yes or No) _____
Street and Number (No.) 208 Orchard St. N.W. Ward _____
(If death occurred in a hospital, give its name instead of street and number)

2. FULL NAME Mrs. Rosa Walker
Residence (City or Town) 208 Orchard St. (Street and Number) _____ (State) _____

PERSONAL AND STATISTICAL PARTICULARS
3. SEX Female 4. COLOR White 5. Single, Married, Widowed, Divorced (write the word) Widowed

6. DATE OF BIRTH (month, day, year) 8/21/1882
7. AGE 51 Years 81 Months 0 Days 0 Hours 0 Minutes

8. OCCUPATION
(a) Trade, profession or particular kind of work done, as cleaner, sewer, bookkeeper, etc. Housework
(b) Industry or business in which work was done, as cotton mill, sawmill, bank, etc. _____
(c) Date deceased last worked at this occupation (month and year) _____ (d) Total years spent in this occupation _____

9. BIRTHPLACE Ga.
(P. O. Address) _____

10. NAME Mr. McAuley
11. BIRTHPLACE Ga.
(P. O. Address) _____

12. MAIDEN NAME Dont know
13. BIRTHPLACE Dont know
(P. O. Address) _____

14. INFORMANT Ernest Walker
(Signed) _____ (Address) RFD 5, Box 196

15. BURIAL PLACE Hollywood
(Cemetery) Atlanta (Date) 10/28/33
(Postoffice) _____

16. UNDERTAKER Attery & Lowndes Co.
(Signed) by Mrs. C.W. Hatcher
(Address) _____

MEDICAL CERTIFICATE OF DEATH
14. DATE OF DEATH Oct. 26, 1933 at 6:30 P.
(Month, Day, Year) (Hour)

15. I HEREBY CERTIFY That I attended the deceased from 10/15/33 to 10/26/33
I last saw him at alive on 10/26/33 death is said to have occurred on the date and hour stated above.

The principal cause of death and related causes of importance in the order of onset and duration of each:
Influenza (Pleurisy)

Other contributory causes of importance:
Chr. Myocarditis

What test confirmed diagnosis? clinical
(Specify whether autopsy, operation, laboratory, or clinical)

If death was due to external causes (violence) fill in also the following:
Was injury an accident, suicide, or homicide?
Where did injury occur?
Did injury occur in a home, public place or industry?

Manner or injury:
Nature of injury:
(Signed) Mason I. Lowance M. D.
(Address) 719 Drs. Bldg.

16. FILED 10/28/33
(Signed) Lohman (Local Registrar)

OFFICE OF THE REGISTRAR OF VITAL STATISTICS
For the City of Atlanta

Atlanta, Ga., 10/30/33

GEORGIA,
FULTON COUNTY.

I hereby certify that the foregoing is a true and correct copy of the record of death Number 4158
of the series of 1933 for Mrs. Rosa Walker
as appears on file in the office of the Registrar of Vital Statistics of the City of Atlanta.
(Signed) Lohman

SEAL

LOCAL REGISTRAR

(P. O. Address)		Manner or Injury	
14. INFORMANT <u>Ernest Walker</u>		Nature of Injury	
(Signed) <u>Ernest Walker</u>		(Signed) <u>Mason I. Lowance</u>	
(Address) <u>RFD 5, Box 196</u>		(Address) <u>719 Drs. Bldg.</u>	
15. BURIAL PLACE <u>Hollywood</u>		(Address)	
(County) <u>Atlanta</u>		(Date) <u>10/28/33</u>	
(Funeral) <u>by Mrs. C.W. Hatchers</u>		16. FILED <u>10/29/33</u>	
(Signed) <u>by Mrs. C.W. Hatchers</u>		(Signed) <u>[Signature]</u>	
(Address)		(Local Registrar)	

OFFICE OF THE REGISTRAR OF VITAL STATISTICS
For the City of Atlanta

Atlanta, Ga., 10/30/33

GEORGIA
FULTON COUNTY.

I hereby certify that the foregoing is a true and correct copy of the record of death Number 4258
of the series of 1933 for Mrs. Rosa Walker
as appears on file in the office of the Registrar of Vital Statistics of the City of Atlanta.

(Signed) [Signature]
LOCAL REGISTRAR

SEAL

MARRIAGE LICENSE
COUNTY OF BROOKS
STATE OF GEORGIA

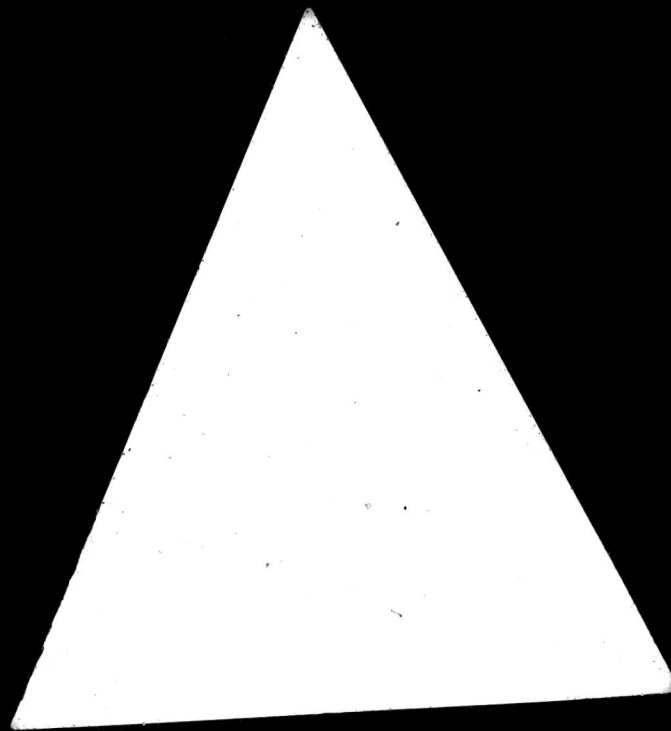
TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL

You are hereby authorized to join
John Walker and Rosa McAnley
in the Holy State of Matrimony according to the Constitution
and Laws of this State and for so doing this shall be your license.
And you are hereby required to return this license to me
with your certificate hereon of the fact and date of the Marriage.
Given under my hand and seal this 22nd day of
December 1933 A. D. Perkins (L.S.)
[Signature] Ordinary

CERTIFICATE
STATE OF GEORGIA **BROOKS COUNTY**

I certify that John Walker and Rosa McAnley
were joined in Matrimony by me this 24th day of December Nineteen Hundred
and Twenty Nine
Recorded 193 [Signature]
Ordinary

STATE OF MICHIGAN
I Certify that John Barker and Rosa M. C. Wiley
were joined in Matrimony by me this 24th day of December Nineteen Hundred
and Twenty nine
Recorded 192
Ordinary. Est. Harman, M. G.



Not on rolls of
any company
of 2nd Cavalry (M)

Walker, Susan G.
Fulton Co Mo
No. 100

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton
Name Susan G. Walker
Widow of Jas. H. Walker
Company 1st Reg
Regiment 4th X Caval
Approved _____

J. W. LINDSEY,
Commissioner of Pensions

Byrd Printing Co., State Printers, Atlanta.

10-31-1919

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY

I, T. H. Phillips Ordinary of said County, do hereby

that I know Madison Quisenberry the applicant for pension. She

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

and was on the 4th November 1908 that I also know McCallum

the witness who swears to the correctness of testimony, that both of them are now residents of said County and

were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trust-

worthy, and their statements are entitled to full faith and credit.

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

(SEAL) T. H. Phillips Ordinary.

County _____

NOTES: 1. Before any affidavit is returned the Ordinary shall answer applicant and the witness in the following words: "I do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall present will be the truth. So help me God." 2. Affidavits made by persons who are not residents of said County are inadmissible. 3. Only persons who married prior to January 1st, 1881, are entitled to pension. 4. Any Ordinary must be sworn before the Ordinary of the County of the person to be sworn and certified by such Ordinary. 5. Always certified copies of marriage license if obtainable. If not, prove marriage by some person, or by general reputation.

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

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

Sworn under my hand and official seal of office this 27th day of Oct, 1919.

(SEAL)

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

Walker, Susan Q.
Fulton Co. Ga.
No. 10-31-1919

Widow's Pension

Under Act 1910-as Amended by Act of 1919.

County Fulton
Name Susan Q. Walker
Widow of Jas. H. Walker
Company 4th Reg. Cal.
Regiment 4th Reg. Cal.
Approved T. H. Joffe

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

10-31-1919

Not on rolls of
any company
4th Reg. Cavalry (Ga.)

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes Mrs. Susan Quale Walker 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? Susan Quale Walker, Atlanta Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? 25 years
3. When, where and to whom were you married? 14 Jan 1866, Edgar C. 8074
- a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) Regiment Ky. Co. 8th Reg. Calvary 1861-
5. When and where did the commands of your husband surrender or discharge from the army? Washington Ga May 1865
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes
7. If he was not present state clearly where he was? _____
8. Where was his command when he left? _____
- a. For what cause did he leave his command? _____
- b. By whose authority did he leave his command? _____
- c. For how long was he granted leave of absence? _____
- d. What was his physical condition when he left his command? Good
- e. What effort did he make to return to his command? _____
- f. In what way was he prevented from going back to Command? No
- g. Was he captured by the enemy at any time? _____
- h. If so, when and where captured and where held as a prisoner, and when and for what cause released? _____
- j. When and where did your first husband die? Atlanta Ga. 1896
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? _____
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No
- If so, when and for what cause were you or your husband placed on the roll? _____

Sworn to and subscribed before me this the

10 day of Oct, 1919.

Edgar C. Walker Ordinary
of Fulton County.
(SEAL)

Mrs. Susan Q. Walker

Not on
any no
4 Feb. Co

of _____ County,)
(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

COUNTY, }

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

- * 1. What is your name and where do you reside? G. H. Burton
- * 2. How long and since when have you known Mrs. J. B. Walker applicant? 20 yrs.
- 3. How long and since when has she continuously resided in this State? (Give date.) Oct. 1894
- * 4. When and to whom was she married James H. Walker How do you know? James H. Walker her husband?
- 5. How long and since when did you know James H. Walker her husband? 50 years
- 6. When and where did James H. Walker the husband of applicant, die? Atlanta Ga. 1896 - February
- 7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes
- 8. If not, how long did they live apart before his death? No
- 9. When, where and in what Company and Regiment did James H. Walker enlist? Magdalen Co. 1st Regt. Calvary
- * 10. Were you a member of the same Company? Yes
- 11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? 4 years
- * 12. When and where did his Command surrender, and was discharged? May 65
- * 13. Were you personally present when it was surrendered? Yes If not, where were you Washington D.C. and how came you there? By train Johnson
- * 14. Was the husband of applicant personally present at surrender? Yes If not where was he? Not present When, where and for what cause did he leave Command? (Give date.) Not known By whose authority did he leave his Command? No one And how long was he granted leave? Not known How do you know all this? I was present
- 15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? None left
- 16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? None

Sworn to and subscribed before me this the 17 day of Oct 1914 } G. H. Burton

J. B. Walker Ordinary
of Hammerwood County.
(SEAL)

G. H. Burton

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? never left
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? _____

Sworn to and subscribed before me this the

17 day of Oct

1919

J. R. Cook, Major 2d Ordinary

of Hammwood County.

(SEAL)

R. H. Burton

R. H. Burton

I do hereby certify that I saw
James H Walker and Susan Quarles
marry on the 7th day of June 1866
in the County of Edgefield South Carolina
Sworn to before me
this 7th day of Oct 1919-
W B Lawson
A-B-C

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
J. V. WELLS, who on oath says:

That Mrs. Susan Quarles Walker is the widow of James H. Walker, who died in Atlanta, Fulton County, Georgia, in 1896, and that she has not since his death remarried and is now his dependent widow.

Sworn to and subscribed before me
this October 24 1919.

J. V. Wells

Arthur R. Wells

STATE OF GEORGIA.

COUNTY OF FULTON.

Personally before the undersigned authority now comes
J. V. WELLBORN, who on oath says:

That Mrs. Susan Charles Walker is the widow of James H.
Walker, who died in Atlanta, Fulton County, Georgia, in 1896, and that
she has not since his death remarried and is now his dependent widow.

Sworn to and subscribed before me
this October 24, 1919.

J. V. Wellborn

Arthur R. MacArthur

Wm. H. Williams
Spec. Sub. 1879
Wm. H. Williams
No. *12*

APPLICATION FOR

Wm. H. Williams

FOR CONFEDERATE SOLDIER.

Applicant *Wm. H. Williams*

County *Franklin*

Lim. *Reg. to 2nd Reg. 1st Div.*

Amount *500*

Date of Warrant

Page

Wm. H. Williams

Oct 20th 1879
6-1952

STATE OF GEORGIA.

County.) *William S. Mather*

Personally appeared before me, *John R. R. R.* of the county of *Fulton*, State of Georgia, who, being duly sworn, deposes and says that he was on the 29th day of September, 1879, a bona fide resident of this State; that he *was appointed* in the military service of the Confederate States, or of this State, as a *Captain* in the *Regular Army of the Confederate States* in Company *Volunteers* that while engaged in such military service, he was at the battle or engagement of *Clay's Tavern near Bermuda Hundred Virginia* on the *twentieth* day of *May* 1864, he was wounded in the *leg* and that the same was amputated *below the knee where it joined the bone* that he has not received the payment allowed him for such loss under an Act entitled an Act to carry into effect the last clause of Paragraph 1, Section 1, Article 1st of the Constitution of 1877, approved September 20th, 1879; that he has *never* supplied himself with an artificial *limb* or that, not having done so, he prefers to supply himself with an artificial *limb*

Sworn to and subscribed before me this *29th* day of *May* 1879

John R. R. R. J. R. R.

NOTE.—The above affidavit must be made before some officer authorized to administer oaths, a Judge of the Superior or County Court, Justice of the Peace, Clerk of the Superior Court, or Ordinary.

COMMISSIONED OFFICER'S AFFIDAVIT

STATE OF GEORGIA,

County.)

Personally came before me, *John R. R. R.* of the county of *Fulton*, State of Georgia, who, being duly sworn, deposes and says that he was *in the military service of the Confederate States* in Company *Volunteers* and that *the above deponent, was a* in said Company, and that this deponent knows that said *deponent* lost a *limb* in the military service as said in the above affidavit.

Sworn to and subscribed before me this *29th* day of *May* 1879

NOTE.—If the affidavit of the commissioned officer is not obtained, the following affidavit of three responsible citizens must be furnished.

APPLICATION FOR

FOR COMPENSATION

Applicant *Wm. S. Mather*

County *Fulton*

Rank *8th Lt.*

Amount *800*

Date of Warrant *Dec 20th 1879*

Page *1*

Dec 20th 1879

AN ACT

To carry into effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 1877:

SECTION 1. Be it enacted by the General Assembly of the State of Georgia, That any person now a bona fide resident of this State, who enlisted in the military service of the Confederate States, or of this State, who, while engaged in said military service, lost a limb or limbs, may furnish to the Governor of this State proof that such applicant has supplied himself with such useful artificial limb or limbs, and the Governor, on reception of such proof, is hereby authorized to draw his warrant on the Treasurer of this State in favor of such applicant for either amount hereinafter mentioned, to wit: For a leg extending above the knee, one hundred dollars; for a leg not extending above the knee, seventy-five dollars; for an arm extending above the elbow, sixty dollars; for an arm not extending above the elbow, forty dollars. Provided the said amounts of money may be allowed to any one entitled to the benefits of this Act who may prefer to supply himself with the said artificial limb.

Sec. 11. Be it further enacted by the said authority, That such application shall contain proof of such applicants being entitled to the benefits of this act, and shall further state whether arm or leg has been supplied. If an arm, whether extending above the elbow or not, if a leg, whether extending above the knee or not, and the Governor shall decide the sufficiency of the proof submitted.

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

Sec. 1V. Be it further enacted by the authority aforesaid, That all laws and parts of laws in conflict with this Act be and the same are hereby repealed.

HENRY H. GOETCHUS,
Secretary House Representatives
W. A. HARRIS,
Secretary Senate
Approved, September 9th, 1879

A. O. BACON,
Speaker House Representatives
RODOLPH E. LUTHER,
President Senate
ALFRED H. COLQUHOUN, Governor

State of Georgia

Executive Department

Atlanta, Ga. Oct 20th 1879

George W. Foster 3 Personally appeared before me Alfred H. Colquhoun who being duly sworn deposes that he was present at the engagement near Bermuda Hundred in Virginia in May 1864, that he knows that Mr. Foster was wounded in that engagement and was taken prisoner, that he knows from information then received and was convinced that Mr. Foster's leg was amputated in consequence of the wound then received. Susan H. Colquhoun 2
Left me this 20th Oct 1879
Alfred H. Colquhoun
John A. H. R. L. H. H.

STATE OF GEORGIA,

Fulton County.

PERSONALLY came *John Morrison, No. 1000*
and A. M. Moore
 citizens of *Fulton* county, in said State,
 who being duly sworn, say that they are well acquainted with *Ben W. S. Walker*
Walker and know, from having been with him in the army, that
 he received the wounds (or contracted the disease) in the military service, as stated by him
 in the foregoing affidavit; that said wounds (or disease) permanently disabled applicant, as
 stated by him: the said applicant is a *bona fide* citizen of this State, and resides in
Fulton county, and we are well satisfied that all the
 statements in his affidavit are true.

Sworn to and subscribed before me, this
23rd day of *June* 1890.

W. L. Ballman *John Morrison*
Ordinary *Att. 1000*

Note: These affidavits must be made by three citizens who personally know the signature of applicant and can state of their
 own knowledge each is long in the office and can state of their
 own knowledge each is long in the office and can state of their

STATE OF GEORGIA,

Fulton County.

PERSONALLY comes before me *W. L. Ballman* Ordinary of said county
John C. Umsted and both known to
 me as reputable physicians of said county, who, being severally sworn, say on oath that
 they have carefully examined *Ben W. S. Walker* and after such
 examination say that the applicant has been injured as follows.

He has had the
left leg amputated, at four inches below
the knee joint.

Sworn to and subscribed before me, this
23rd day of *June* 1890.

W. L. Ballman *John C. Umsted M.D.*
Ordinary *J. H. Powell M.D.*

Note: The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability result-
 ing therefrom.
 Note 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier.
 Also state how long physicians have known and treated applicant.

STATE OF GEORGIA,

Fulton County.

I, *Mr. L. Ballman* Ordinary of said county,
 do certify that I am well acquainted with *Mr. S. Walker* the
 applicant in the foregoing affidavit, and am well satisfied that the statements made by him
 in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual
 he represents himself to be, and that he resides in this county. I also certify that the
 foregoing witnesses are persons of respectability, and that their statements are worthy of
 full credit and belief.

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

Given under my official signature and seal, this *23rd* day of *June* 1890.

W. L. Ballman
 Ordinary *Fulton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

Know all Men by these Presents, That I,
 _____ of

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

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

[L. S.]

Executed in the presence of us:

DIRECTION.

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

Mr. L. L. Callahan, Ordinary.
 Note.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.
 Note 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier.
 Also state how long physicians have known and treated applicant.

If allowed, send amount by
 me at

, and oblige,

STATE OF GEORGIA,

Hullon County.
 I, *M. L. Callahan*, Ordinary of said County, do certify that I am well acquainted with *M. L. Walker* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.
 I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *3rd* day of *February* 189*2*.
M. L. Callahan
 Ordinary *Hullon* County.

Walker, W. L.

1891.

2nd 1031, No. 1

Application for Allowance

FOR THE YEAR BEGINS OCTOBER 31, 1891.

Walker, W. L.
 Applicant, *Hullon*
 County, *Georgia*
 Amount, *100.00*
 Date of Warrant, *Feb 11 1892*
 Entered on record *Feb 11 1892*

SECRETARY EXECUTIVE DEPARTMENT.

WARRANTS RETURNED TO

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

Callahan

STATE OF GEORGIA,

Hullon County.
 I, *M. L. Callahan*, Ordinary of said County, do certify that I am well acquainted with *M. L. Walker* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.
 I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *14th* day of *January* 189*2*.
M. L. Callahan
 Ordinary *Hullon* County.

Walker, W. L.
 1890.
 1892.

APPLICATION FOR ALLOWANCE

FOR THE YEAR BEGINS OCTOBER 31, 1891.

Walker, W. L.
 Applicant, *Hullon*
 County, *Georgia*
 Amount, *100.00*
 Date of Warrant, *Feb 11 1892*

Entered on record *Feb 11 1892*

SECRETARY EXECUTIVE DEPARTMENT.

WARRANTS RETURNED TO

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

Callahan

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears W. S. Walker 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 1st Nov day of November 1867; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Captain in Company of 1st of 1st Regiment of C.S. Regular Volunteers's Brigade; that whilst engaged in such military service at the battle of Chap's Farm in the State of Georgia on the 25th day of May 1864, he was wounded as follows: In the left leg, shot thru the right arm & in the back - the leg was amputated the same day at the time of his wound - was being taken to S. Carolina Brigade.

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

Sworn to and subscribed before me, this, the 15th day of Feb, 1891, W. S. Walker

W. S. Walker Deponent

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Know all Men by these Presents, That I, W. S. Walker of Fulton County, State of Georgia, do hereby appoint W. S. Walker 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 14th day of January, 1891.

Executed in the presence of us:

Send money to me as follows, by

to County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

PERSONALLY appears W. S. Walker of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the 1st Nov day of November 1867; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Captain in Company of 1st of 1st Regiment of C.S. Army's Brigade; that whilst engaged in such military service at the battle of Chap's Farm in the State of Georgia on the 25th day of May 1864, he was wounded as follows: In the left leg, shot thru the right arm & in the back - the leg was amputated the same day at the time of his wound - was being taken to S. Carolina Brigade.

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

Sworn to and subscribed before me this the 14th day of January, 1891, W. S. Walker

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Know all Men by these Presents, That I, W. S. Walker of Fulton County, State of Georgia, do hereby appoint W. S. Walker 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 14th day of January, 1891.

Executed in the presence of us:

W. S. Walker Deponent

Send money to me as follows, by

to County, Georgia.

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

POWER OF ATTORNEY. STATE OF GEORGIA.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
_____ day of _____ 1893.

Executed in the presence of us:

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

W. H. H. H.
1893.

Application for Allowance

No. 1276

For the Year Ending October 31, 1892.

Applicant, _____
County, _____
Amount, _____
Date of Warrant, _____
Entered on record, _____

1893.

WARRANT HANDED TO

Applicant

POWER OF ATTORNEY. STATE OF GEORGIA.

Know all Men by these Presents, That I _____
County, State of Georgia, do hereby appoint
of _____ my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to
from the State of Georgia by reason of 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
30th day of October 1893.

Executed in the presence of us:

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

W. H. H. H.
1893.

Application for Allowance

No. 1278

For the Year Ending October 31, 1892.

Applicant, _____
County, _____
Amount, _____
Date of Warrant, _____
Entered on record, _____

1893.

WARRANT HANDED TO

Applicant

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Personally appears W. S. Walker 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 November 1867; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 1, of 1st Regiment of Co. 8, 8th Infantry Volunteers attached to 3rd Brigade; that whilst engaged in such military service at the battle of Shiloh's Farm in the State of Tennessee, on the 20 day of April 1864, he was wounded as follows: left leg where our ambulance also in left side arm right arm

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of no dollars, for the above disability.

Sworn to and subscribed before me, this, 30 day of March 1893, W. L. Leathrum County Ordinary

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

STATE OF GEORGIA, }

I, W. L. Leathrum Ordinary of said County, do certify that I am well acquainted with W. S. Walker the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a Justice of the Peace of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 15 day of March 1893.

W. L. Leathrum Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Personally appears William S. Walker 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 November 1867; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 1, of 1st Regiment of Co. 8, 8th Infantry Volunteers attached to 3rd Brigade; that whilst engaged in such military service at the battle of Shiloh's Farm in the State of Tennessee, on the 20 day of April 1864, he was wounded as follows: left leg where our ambulance also in left side arm right arm

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of no dollars, for the above disability.

Sworn to and subscribed before me, this, 30 day of March 1893, W. L. Leathrum County Ordinary

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

STATE OF GEORGIA, }

I, W. L. Leathrum Ordinary of said County, do certify that I am well acquainted with William S. Walker the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a Justice of the Peace of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 30 day of March 1893.

W. L. Leathrum Ordinary Fulton County.

STATE OF GEORGIA
POWER OF ATTORNEY

do certify that I am well acquainted with

M. S. Walker the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that

before whom the foregoing affidavits were made and power of attorney was signed, is a _____ of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 15 day of March 1893.

M. L. Leal

Ordinary

County.

do certify that I am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is 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 30 day of March 1893.

Ordinary

County.

STATE OF GEORGIA

COMMISSIONER OF ATTORNEY

Ex. Del. Oct. 1891
In March 1891 received
of \$100.00 and before
the claimant from the
applicant in the foregoing
affidavit, and I know he is the
individual he represents himself to be, and that he resides in this County.

John H. Walker
entitled to a pension
in the sum of \$100.00
per month and I know
he is the individual he
represents himself to be,
and that he resides in this
County.

Fugate Co.
1893
1895
Walker, Wm.
No. 164

Application for Allowance

For the Year Ending October 31, 1891

Applicant, W. S. Walker

County, Fugate

Amount, 100

Date of Warrant, 34 1891

Entered on record, _____ 1893.

Rich. Johnson

Secretary, Register's Office.

WARRANT HANDED TO

att

One of the men, made by the State

No data

Send money for me as follows, by _____
to _____
County, Georgia.

P. O.

STATE OF GEORGIA.

POWER OF ATTORNEY.

Know all Men by these Presents, That _____
County, State of Georgia, do hereby appoint
_____ my true and lawful attorney in fact, for
and in full power to receive and collect for me
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, by the Governor
or my said attorney to receive in my name for any
sum of money which may be coming to me for the
reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1893.

STATE OF GEORGIA,

of Atlanta, Ga. 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.

Executed in the presence of us:

Send money to me as follows, I

甲子

1895

Walter A. D.

No. 164

Application for ADMISSION

For the Year Ending October 26, 1933

Applicant, W.S. Walker

County, Franklin
1861

[illegible]

Entered on record.

1803

Rich Johnson

SECRETARY HANDED TO

21

my

Geo. W. Harrison, Natchez, Miss.
Mr. Latta

Ex. Dep't Dec. 1894

In March 1896 - *Paris*

\$100.00 would be paid

Further down B
opulent is in life of

that date & there has been
no change in it & last;

10. *Ad. Harrison*

See at report
by area of persons

FILE

3

entitled to a fund of 100,000

11/11/17 11:11 AM

Prof. and Ed. Schwartz

1000 + 1112

Don't permit in will

12-1-1942

Chas. H. & Co. printed

Chafed - 12/27/2000

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

PERSONALLY appears William S. Wacker 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 first

day of November 1867; 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 Captain in Company A, of 1st Regiment of Inf. C. S. A., and brigadier general of _____'s Brigade; that whilst engaged in

such military service at the battle of Chancellorsville in the State of Virginia, on the 20th day of May 1864, he was

wounded as follows: in the left leg requiring amputation, in the right arm and left knee

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

hundred dollars, for 1894

Sworn to and subscribed before me, this, William P. Parker

17th day of October 1894

W. L. Kaulhorn

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

STATE OF GEORGIA, }

Fulton County. }

I, W. L. Kaulhorn Ordinary of said County,

do certify that I am well acquainted with William S. Wacker the

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

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

I further certify that

before whom the foregoing affidavits were made and power of attorney was signed, is a

_____ of said County, and the said affidavits and

signatures thereto are genuine.

Given under my official signature and seal, this 17th day of October 1894

W. L. Kaulhorn

Ordinary

Fulton

County.

POWER OF ATTORNEY

The amount for pension due Gen. H. A. Hatcher
 will be presented at this office
 Richard Johnson
 Attest W

William H. Hatcher
 1896
 (For Those Already Enrolled)
 No. 367
SOLDIER'S PENSION.
1896.
 Name Gen. H. A. Hatcher
 County ...
 Disability ...
 Amount \$ 100.00
 2/27
 RICHARD JOHNSON,
 Recording Assistant Department.
 WARRANT ISSUED BY
 att.
 Gen. H. A. Hatcher

STATE OF GEORGIA,
 County of ...
 Know all Men by these Presents, That I, *H. A. Hatcher*
 at *Atlanta*
 County, State of Georgia, do hereby appoint
Richard Johnson
 my true and lawful attorney in fact, for
 me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the
 State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate
 States (or of this State) as stated in the foregoing affidavit, to receive and receipt for the same, and to
 be coming to me for the reason aforesaid.
 IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
2 Oct 1895.
H. A. Hatcher
 day of ... 1895.
 Executed in presence of me
Richard Johnson
 DIRECTIONS
 Pay the amount of my pension
 to *H. A. Hatcher*
 County, Georgia.

The amount for pension due Gen Walker
will be presented at City office
Richard E. H. H.
H. H. H.

The within application is correct
and Gen Walker will be entitled
to warrant for \$1,000.00 payable
about first of March next. The
warrant will be paid at that
time on presentation.
Dec. 12 '96

Col. Wm. Walker
No. 733
(For Those Already Enrolled.)
1897.

SOLDIER'S PENSION.

Name W. S. Walker
County Sullivan Co.
Disability 100%
Amount, \$ 100.00
3/1 1896

RICHARD JOHNSON,
Secretary Executive Department.

W. S. Walker
No. 733
1896

SOLDIER'S PENSION.

Name W. S. Walker
County Sullivan Co.
Disability 100%
Amount, \$ 100.00
2/27 1896

RICHARD JOHNSON,
Secretary Executive Department.

W. S. Walker
No. 733
1896

STATE OF GEORGIA,
County, State of Georgia, do hereby appoint
of Sullivan County, Georgia,
KNOW ALL MEN BY THESE PRESENTS, That I,
W. S. Walker,
do hereby authorize and empower my said attorney to receive and receipt for whatever amount of money I may be entitled to from the
State of Georgia by reason of an injury received as described in the military service of the Confederate
States (or of this State) as stated in the foregoing application, and to receive and receipt for the same, and to execute and deliver
in my name for any reason thereof, I have hereunto set my hand and seal, this 20th day of December, 1896.

W. S. Walker
20th day of December, 1896.

W. S. Walker
20th day of December, 1896.

STATE OF GEORGIA,
County, State of Georgia, do hereby appoint
of Sullivan County, Georgia,
KNOW ALL MEN BY THESE PRESENTS, That I,
W. S. Walker,
do hereby authorize and empower my said attorney to receive and receipt for whatever amount of money I may be entitled to from the
State of Georgia by reason of an injury received as described in the military service of the Confederate
States (or of this State) as stated in the foregoing application, and to receive and receipt for the same, and to execute and deliver
in my name for any reason thereof, I have hereunto set my hand and seal, this 20th day of December, 1896.

W. S. Walker
20th day of December, 1896.

W. S. Walker
20th day of December, 1896.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

KNOW ALL MEN BY THESE PRESENTS, That I, *W. S. Walker* of *Fulton* County, State of Georgia, do hereby appoint *S. M. Johnson* my true and lawful attorney in fact, for

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *26th* day of *October*, 1895. *W. S. Walker*

Executed in presence of us

J. S. McKee
W. S. Walker
National Public

DIRECTIONS.

Pay the amount of my pension to *S. M. Johnson* by *W. S. Walker*
County, Georgia.

Walker, W. S. McKee

Fulton

(For Those Already Enrolled.)

No. *367*

SOLDIER'S PENSION.
1896.

Name *W. S. Walker*
County *Fulton*
Disability *100%*
Amount \$ *100.00*
2/27

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
city.
Geo. W. Harrison, State Printer, Atlanta.

W. S. Walker

W. S. Walker
Richard Johnson
at City office
W. S. Walker

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, *William S. Walker* hereby authorize *Thos. Peoples or Verdy Dunlop* of *Atlanta Ga.*

to receive and receipt for the pension paid hereon and request that he remit same to *Madley Rucker Cookin* by *Atlanta* at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *12th* day of *December*, 1896.

William S. Walker

Executed in presence of us

Thos. Peoples
National Public
Fulton Ga.

Walker, W. S. McKee

Fulton

(For Those Already Enrolled.)

No. *733*

SOLDIER'S PENSION.
1896.

Name *W. S. Walker*
County *Fulton*
Disability *100%*
Amount, \$ *100.00*
3/1

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
city.
Geo. W. Harrison, State Printer, Atlanta.

W. S. Walker

W. S. Walker
Richard Johnson
at City office
W. S. Walker

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Tullahoma County.

Personally appears *William S. Walker* of *Tullahoma*

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 ~~middle~~ day of *November* 1867; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Captain* in Company *A*, of *1st* Regiment of *Inf. C. S. A.* *(formerly S. Landrum's)* Brigade; that whilst engaged in such military service at the battle of *Clay's Farm* in the State of *Virginia* on the *20th* day of *May* 1864, he was wounded as follows: *in the left leg requiring amputation four inches below the knee, through right arm partially, & permanently disabling it, also in left side.*

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 *one hundred* dollars, for the year 1895.

Sworn to and subscribed before me, this, *34th* day of *October* 1895, *William S. Walker*

W. L. Calhoun Ordinary

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

STATE OF GEORGIA,

Tullahoma County.

I, *W. L. Calhoun* Ordinary of said County, do certify that I am well acquainted with *William S. Walker* 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 *24th* day of *October* 1895.

W. L. Calhoun

Ordinary *Tullahoma* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Tullahoma County.

Personally appears *William S. Walker* of *Tullahoma*

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 *November* 1867; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Captain* in Company *A*, of *1st* Regiment of *Regular A. Volunteers, Army C. S.*'s Brigade; that whilst engaged in such military service in the State of *Virginia* on the *20th* day of *May* 1864, he was wounded, injured *permanently* as follows: *Left leg requiring amputation, in the right arm & in the left side.*

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, 1895. I have heretofore as a resident of *Tullahoma* county been allowed a pension of *one hundred* dollars, for the year 1895.

Sworn to and subscribed before me, this, the *1st* day of *December* 1895,

W. L. Calhoun Ordinary

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

STATE OF GEORGIA,

Tullahoma County.

I, *W. L. Calhoun* Ordinary of said County, do certify that I am well acquainted with *William S. Walker* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *5th* day of *December* 1895.

W. L. Calhoun

Ordinary *Tullahoma* County.



I certify the true and correct nature of the foregoing statements.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Hamilton County.

I, Wm. S. Walker hereby authorize Richard Johnson to receive and receipt for the pension paid hereon and request that he remit same to himself by check at Atlanta.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2nd day of March 1897. W. S. Walker [L. S.]

Executed in presence of

Richard Johnson

Walker, W. S.
ACT OF 1847, SEC. 10
(For Those Already Enrolled.)

No. 2317

INVALID
SOLDIER'S PENSION.
1898.

Name W. S. Walker
County Hamilton
Disability
Amount, \$ 100

2/24 1898

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
H. C. Phelps

REC'D BY HAMILTON, STATE ARCHIVE, AT ATLA
W. S. Walker

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1899. [L. S.]

Executed in presence of

Walker, W. S.
ACT OF 1847, SEC. 10
(For Those Already Enrolled.)

No. 1438

INVALID
SOLDIER'S PENSION.
1899.

Name W. S. Walker
County Hamilton
Disability
Amount, \$ 100

2/15 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
W. S. Walker

REC'D BY HAMILTON, STATE ARCHIVE, AT ATLA

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *M. S. Walker* 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 *Fulton* day of *November* 18 *67*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Captain* in Company *B*, of *1st* Regiment of *Volunteers*, *S. C.* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *20th* day of *May* 1864, he was wounded, injured or diseased as follows:
Wounded left leg requiring amputation - shot through right arm, and in left side

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, 1888. I have heretofore under said law as a resident of *Fulton* county been allowed an invalid pension of *eighteen* Dollars, for the year 1887.

Sworn to and subscribed before me, this, the *10th* day of *November* 1897, *M. S. Walker* POST OFFICE *Atlanta, Ga.*

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

STATE OF GEORGIA,

Fulton County.

I, *M. S. Walker* Ordinary of said County, do certify that I am well acquainted with *M. S. Walker* 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 *24th* day of *November* 1897, *M. S. Walker*

Ordinary *Fulton* County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *H. S. Walker* 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 *14th* day of *Nov* 18 *67*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Captain* in Company *A*, of *1st* Regiment of *Volunteers*, *S. C.* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *20th* day of *May* 1864, he was wounded, injured or diseased as follows:

Loss of left leg.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1888. I have heretofore under said law as a resident of *Fulton* County been allowed an invalid pension of *eighteen* Dollars, for the year 1887.

Sworn to and subscribed before me, this, the *15th* day of *May* 1897, *M. S. Walker* POST OFFICE *Atlanta, Ga.*

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

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this *15th* day of *May* 1897, *M. S. Walker*

Ordinary *Fulton* 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 24th day of March 1897.



Ordinary Fulton County.

applicant in the foregoing affidavit, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15th day of May 1899.



Ordinary

Fulton County.

United States Post Office,

Fulton County,
State of Georgia
Oct. 18, 1894

Mrs. W. S. Wacker.

My dear Sir: I have received from
this amount of one hundred dollars
in payment in advance of my pension
due from the State of Georgia.
In the event of my death, or any
change in the law changing the
amount, please refund the sum
advanced, with such additional in-
terest as may have accrued, out of
the widow's pension to which you
will be entitled.

W. S. Wacker

advanced, with such annual in-
 -terest as may have accrued, out of
 the widow's pension to which you
 will be entitled.
 W. S. Walker

Audited

189

COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. 2935

Amount \$ 100.

Paid to - W. S. Walker

For Loss of leg

June 23 1890

Included in Warrant No.

issued to Treasurer

189

WARRANT CLERK

W. J. Campbell, State Printer, Contractor to Job Office

Applicant

Audited

1891.

COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. 30

Amount \$ 100.

Paid to - W. S. Walker

For Loss of leg

July 3 1891.

Included in warrant No.

issued to Treasurer

1891.

WARRANT CLERK

Geo. W. Harrison, State Printer, Atlanta.

Applicant

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 2985
Atlanta, Ga. June 23 1890

Mr. *W. S. Walker* of the County
of *Butler* 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
Loss of Leg
He is entitled to receive the sum of *One Hundred & 00* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890.

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

By the Governor,

W. A. Harrison

CLERK EXECUTIVE DEPARTMENT.

\$ 100

RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

One Hundred & 00 Dollars,
per above voucher, this *23* of *June* 1890
W. S. Walker

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 30
1891.
Atlanta, Ga. July 3 1891.

Mr. *W. S. Walker* of the County
of *Butler* 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. 21, 1889, and the same having been examined and allowed for
Loss of Leg
He is entitled to receive the sum of *One Hundred & 00* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

By the Governor,

W. A. Harrison

Sec'y EXECUTIVE DEPARTMENT.

\$ 100

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

One Hundred & 00 Dollars,
per above voucher, this *3* of *July* 1891.
W. S. Walker

W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

\$ 100

RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

One Hundred & 00/100 Dollars,
per above voucher, this *23* of *June* 189*0*
W. L. Wacker

By the Governor,
W. H. Harrison
SECY EXECUTIVE DEPARTMENT.

\$ 100

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

One Hundred & 00/100 Dollars,
per above voucher, this *23* of *June* 1891.
W. L. Wacker

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

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

remits the same to me at _____ day of _____ 190

Witness my hand this _____ day of _____ 190

Executed in presence of _____

County, }

L. S.

SEAL

Walter Whitfield Walker
Fulton County

No. *OK*

WIDOW'S
Indigent Pension,
1901.

Name, *Walter Whitfield Walker*
County *Fulton*

Widow of *Walter Whitfield Walker*
Edith E. Walker

Approved *4/22* 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

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

Witness my hand this

day of

190

Executed in presence of

Ordinary.

L. S.

County

(- - -)
S.E.
(- - -)

Widow of William Walker
Fulton County

No

OK

WIDOW'S

Indigent Pension.
1901.

Name *Widow of William Walker*

County

Widow of *William Walker*

Approved *4/22* 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

Questions for Applicant.

STATE OF GEORGIA,

Fulton

County.

Mrs. Winifred Amanda Walker of said State and County, desiring to
avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
1900, hereby submits her proofs, and after being duly sworn true answers to make to the
following questions, depose and answers as follows:

1. What is your name and where do you reside? (*Give State, County and Post Office*)
Mrs. Winifred Amanda Walker 276 South St. Atlanta Ga Fulton Co

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

See life 68 years

3. When and where were you born? *Jefferson Co. Ga. April 23, 1832*

4. When and where was your husband born—state his full name, and when were you and he married?
Oct 1st 1824 Green Co. Va James Fleming Walker

5. When and where, and in what Company and Regiment did your husband enlist or serve during the
war between the States? *July 4-1861 Atlanta Ga Co. B Fulton*

6. How long did your husband serve in said Company and Regiment? *From Aug 1-*

7. When and where did your husband's Company and Regiment surrender and was discharged?
May 1865 near Raleigh N.C.

8. Was your husband present at the time and place when his Company and Regiment surrendered?

9. If not with his command at surrender, state clearly and specifically where he was, when he left com-
mand, for what cause, and by what authority?

10. When and where did your husband die? *Nov 3rd 1894*

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

12. If upon the first ground, state how long you have been in such a condition that you cannot earn
your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the
third, state whether you are totally blind, and when and where you lost your sight? *Since 1894*

13. What has been your occupation since your husband's death? *Nothing*

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

15. What property, real or personal, or income do you have or possess, and its gross value?
Personal to extent of one bed room furniture

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? *The above*

17. What counties did you reside in 1899 and 1900, and what property did you return for taxation?
Fulton Co. Property returned on one

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

19. How much did your support cost for each of those years, and how much did you contribute by your
own labor or income? *Support was with my children and my contributions nothing*

20. What was your employment during 1899 and 1900—how much did you receive for each year?
Nothing with exception of little thing my sons gave

21. Have you a family? If so, who composes such family? Give their means of support? Have they
any lands or other property? *Two sons & one daughter supported by their own work*

22. Have you ever made an application for pension before?

23. How many applications have you made for a Pension, and under what class?
none other than this

Sworn to and subscribed before me this *27* day of *Feb* 1901.

John R. Wetherington Ordinary,
of *Fulton* County.

Widow of William Walker
Fulton County

Questions for Witnesses.

STATE OF GEORGIA,

Fulton County.

J. N. Langston & *J. N. Wood* of said State and County, having been presented as a witness in support of the Application of Mrs. *Winifred Amanda Walker* for a Pension under the Act of Oct. 1900, and after having been duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside?
Atlanta, Ga. Fulton Co.
2. Are you acquainted with the applicant, Mrs. *Winifred Amanda Walker*?
Yes
3. How long have you known her?
48 years
4. Where does she reside, and how long and since when has she been a resident of this State?
Fulton Co. Ga. resident since 1852 and for life
5. When and where was she born?
April 13-1832 Jefferson Co. Ga.
6. Were you ever acquainted with her husband?
Yes
7. Where did he reside in 1861?
Fulton Co. Ga.
8. When and to whom was he married?
Mrs. Winifred Amanda Walker
9. When and where was he born?
Oct. 1824 Green Co. Ga.
10. How long have you known him?
25 years
11. When and where did *John R. Walker* enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this?
Fulton Co. Ga. in July 1861 Co. B 1st Georgia Cavalry Regt. 2nd Div. 1st Corps.
12. Were you a member of the same Company and Regiment?
Yes
13. How long did he perform regular military duty?
from Aug 1861 to
14. When and where was his Company and Regiment surrendered and discharged from service?
Nov. 1865 near Raleigh N.C.
15. Were you with the command when it surrendered?
Yes
16. Was *John R. Walker* the husband of applicant present?
Yes
17. If not present, where was he?
Yes
18. When and where did he leave his Command?
Yes
19. For what cause?
By whose authority he left?
20. How do you know all this? (State fully and clearly)
By personal acquaintance and conversation before, during, & since the war
21. When and where did *John R. Walker* die?
Nov. 18 94 Atlanta Ga. Fulton Co.
22. Where did he reside at his death and how long had he been a resident of Georgia at his death?
Fulton Co. Resident for life
23. Do you of your own knowledge know that applicant is the lawful widow of *John R. Walker*?
Yes
24. Has she remained unmarried since her soldier husband's death, and is now his widow?
Yes
25. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
Nothing except a few personal effects
26. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it?
nothing
27. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom?
no
28. What is applicant's physical condition and her chances and ability to earn a support?
On account of age would be unable to earn a living

28. Is applicant able to earn a support at labor of any sort, if not, why? *No*

29. How was she supported for 1899 and 1900? *By children*

30. How much did applicant contribute to her support for last two years? *nothing*

31. Give a full and complete statement of applicant's physical condition?
in fairly good health for one of her age

32. What interest have you in the recovery of this pension by the applicant?
no interest other than welfare of the widow of my friend & friend

Sworn to and subscribed before me this *27* day of *Feb* 1901

J. N. Langston
J. N. Wood

John R. Walker
Fulton County.

Witnesses

Affidavits of Physicians.

STATE OF GEORGIA,

Fulton County.

Personally before me comes *W. A. Smith M.D.* and *G. W. Patterson M.D.* both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. *Winifred Amanda Walker* applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this: *She is 68 years old and feeble and she is unable to work or support for herself as any being.*

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this *27* day of *Feb* 1901

John R. Walker
Fulton County.

Witnesses

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, *John R. Walker* Ordinary in and for said county, hereby certify that the applicant, Mrs. *Winifred Amanda Walker* reside in said county, and has been a bona fide resident of this State since *1852* day of *April* 18, and that the witnesses, Mr. *J. N. Langston* and *J. N. Wood* are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of *Fulton* county shows that applicant returned for taxation in her own name in 1899 *nothing* dollars worth of property, and in 1900 *nothing* dollars worth of property.

Witness my hand and official seal, this *27* day of *Feb* 1901

John R. Walker
Fulton County.

Notes—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.

make of it.

24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? *no*

25. What is applicant's physical condition and her chances and ability to earn a support? *On account of age would be unable to earn a living*

SEAL
Fulton County.
Notes—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County. }

I,

, hereby authorize

of

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

at

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

day of

1902.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I,

, hereby authorize

of

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

at

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

day of

1903.

[L. S.]

Executed in the presence of

Walker, Winifred A.
To Those Heretofore Paid

1902.

No. 33

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1902.

paid to

Winifred A. Walker

Fulton

County.

Widow of *James E. Walker*

Co. *1st Regt.*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDLED TO

Winifred A. Walker

Walker, Winifred A.
To Those Heretofore Paid

1903.

No. 91

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Winifred A. Walker

OR

James E. Walker

Widow of *James E.*

Co. *1st Regt.*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1903

AND HANDLED TO

Winifred A. Walker

Form No. 1.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

County of **Fulton**.

PERSONALLY COMES MRS.

*Winifred A Walker*who, being sworn, says on oath, that she is a bona fide resident of said County of **Fulton**, State of Georgia, and that she has RESIDED in said Statecontinuously ever since *Birth*. That she is the Widow of *James F Walker* who was a soldier in Company *B* of the *Fulton Georgia Cobb Legion Cavalry Co* Volunteers, that he enlisted in said regiment on or about the month of *Aug 14* 186*1*, and served in the Army up to *Nov 94* 186*2*. That he died on the *3rd* day of *Nov* 18*94*.*Age 67 poverty*Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year *53* (53).I have been allowed an Indigent pension as a resident of **Fulton**, County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the year ending December 31, 1902.Sworn to and subscribed before me, *John R. Williamson*, this *13th* day of *Jan* 1903. *Winifred A Walker* Ordinary Post Office

State of Georgia.

I, *John R. Williamson*, Ordinary of said County, certify that I am well acquainted with Mrs. *Winifred A Walker*, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *Birth* 18*53*.Given under my official signature and seal, this *13th* day of *Jan* 1903. *John R. Williamson* Official Seal Ordinary of **Fulton** County.NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

Form No. 1.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

County of **Fulton**.

PERSONALLY COMES MRS.

Winifred A Walker

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

State of Georgia, and that she has RESIDED in said State continuously ever since *Birth*. That she is the Widow of *James F Walker* who was a soldier in Company *B* of the *Cobb Legion Cavalry* Regiment of *Ga* *Aug 14* 186*1*, and served in the Army up to *Nov 94* 186*2*. That he died on the *3rd* day of *Nov* 18*94*.*A F P*Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year *53*.I have been allowed an Indigent pension as a resident of **Fulton**, County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the year ending December 31, 1902.Sworn to and subscribed before me, *John R. Williamson*, this *13th* day of *Jan* 1903. *Winifred A Walker* Ordinary Post Office

State of Georgia,

I, *John R. Williamson*, Ordinary of said County, certify that I am well acquainted with Mrs. *Winifred A Walker*, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of *Birth* 18*53*.Given under my official signature and seal, this *13th* day of *Jan* 1903. *John R. Williamson* Official Seal Ordinary of **Fulton** County.NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

NOTE:--All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

NOTE:--All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 1904.

[L. S.]

Executed in presence of

William W. Winfield
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. *V 7*

**INDIGENT
WIDOW'S PENSION**
FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. W. W. Winfield

Fulton County.

Widow of *W. W. Winfield*
Co. *B. Cavalry Regt.*

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

422 1904

AND HANDED TO

W. W. Winfield

One W. Winfield, State Printer Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____
In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____ 1905.

[L. S.]

Executed in presence of

William W. Winfield
Fulton County
TO THOSE HERETOFORE PAID.

1905.

No. *133*

**INDIGENT
WIDOW'S PENSION,**
For year ending Dec. 31, 1905.

PAID TO *Mrs. W. W. Winfield*

OF

Fulton County,
Widow of *W. W. Winfield*
Co. *B. Cavalry Regt.*

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

130 1905

AND HANDED TO

W. W. Winfield

One W. Winfield, State Printer Atlanta.

Form No. 2. FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES MRS.

Imfred A. Walker

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State continuously ever since Birth. That she is the Widow of Joe F. Walker, who was a soldier in Company B of the 1st Leg Co Regiment of Vol Volunteers, that he enlisted in said regiment on or about the month of Aug 14 1861, and served in the Army up to Apr 1865. That he died on the 3rd day of Nov 1894.

A & P

Dependent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1853.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1908, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this 17 day of Nov 1904.

Mrs. A. A. Walker

Post Office

State of Georgia,

Fulton County.

I, John R. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. Imfred A. Walker who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of Birth 1853.

Given under my official signature and seal, this 17 day of Nov 1904.



John R. Wilkinson
Ordinary of Fulton County

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

Form No. 2. FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES MRS.

Imfred A. Walker

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State continuously ever since all my life. That she is the Widow of Joe F. Walker, who was a soldier in Company B of the 1st Leg Co Regiment of Vol Volunteers, that he enlisted in said regiment on or about the month of Aug 14 1861, and served in the Army up to Apr 1865. That he died on the 3rd day of Nov 1894.

A & P

Dependent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1853.

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

Sworn to and subscribed before me,

this 17 day of Nov 1905.

Mrs. A. A. Walker
Post Office Atlanta

State of Georgia,

Fulton County.

I, John R. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. Imfred A. Walker, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of all my life 1853.

Given under my official signature and seal, this 17 day of Nov 1905.



John R. Wilkinson
Ordinary of Fulton County

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



Ordinary of John R. Walker County Fulton

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize
of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
at _____
In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____, 1906. [L. S.]

Executed in presence of _____

1906, Dec. 31, 1906
John R. Walker
To Those Herebefore Paid

1906.

No. 142

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1906

Mustang A. Walker
OF

Fulton
County,
Widow of *John R. Walker*
Co. *Fulton* Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT ISSUED

4/8 1906.

AND HANDED TO

John R. Walker

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

Walker, Winifred A.
Fulton Co

To Those Herebefore Paid.

1907.

No. 146

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1907.

Mustang A. Walker
PAID TO OF

John R. Walker
County,
Widow of *John R. Walker*
Co. *Fulton* Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT ISSUED

4/8 1907.

AND HANDED TO

John R. Walker

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize
of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
at _____
In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____, 1907. [L. S.]

Executed in presence of _____

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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

PERSONALLY COMES Mrs.

Winifred A. Walker

who, being sworn says on oath, that she is a bona fide resident of said County of **Fulton**, State of Georgia, and that she has resided in said State continuously ever since **1852**. That she is the Widow of *Joseph F. Walker* who was a soldier in Company *of the Fulton Dragoons* Regiment of *Volunteers*, that he enlisted in said regiment on or about the month of *June of war* 1861, and served in the Army up to *June of war* 1865. That he died on the *1st* day of *June* 1865.

Age and poverty.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18.

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

Sworn to and subscribed before me

day of **JAN** 1906.

John R. Wilkinson Ordinary.

Mr W A Walker

Post Office *Atlanta*

State of Georgia,
Fulton County.

County.

Ordinary of said County, certify that I am well

acquainted with Mrs. *Winifred A. Walker*, 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 *1852*.

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

Official Seal

John R. Wilkinson Ordinary of **Fulton** County.

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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

PERSONALLY COMES Mrs.

Winifred A. Walker

who, being sworn says on oath, that she is a bona fide resident of said County of **Fulton**, State of Georgia, and that she has resided in said State continuously ever since **1837**. That she is the Widow of *James G. Walker* who was a soldier in Company *of the Fulton* Regiment of *Dragoons* Volunteers, that he enlisted in said regiment on or about the month of *June of war* 1861, and served in the Army up to *June of war* 1865. That he died on the *1st* day of *June* 1865.

Age and poverty.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 *before the war*.

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 *1st* day of *June* 1907.

John R. Wilkinson Ordinary.

Mrs W A Walker

Post Office

State of Georgia,
Fulton County.

County.

Ordinary of said County, certify that I am well acquainted with Mrs. *Winifred A. Walker*, 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 *1832*.

Given under my official signature and seal, this *1st* day of *June* 1907.

Official Seal

John R. Wilkinson Ordinary of **Fulton** County.

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

Day of JAN 1906.
 Post Office Atlanta
 Ordinary John R. Wilkinson
 State of Georgia,
Fulton County.
 Ordinary of said County, certify that I am well acquainted with Mrs. Winifred A. Walker, 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 1852.
 Given under my official signature and seal, this 10 day of JAN, 1906.
John R. Wilkinson
 Ordinary of Fulton County.
 {Official Seal}
 NOTE.—All blanks must be filled.
 Vouchers and Affidavits must bear date after January 1st, 1906.

Day of JAN 1907.
 Post Office Atlanta
 Ordinary John R. Wilkinson
 State of Georgia,
Fulton County.
 Ordinary of said County, certify that I am well acquainted with Mrs. Winifred A. Walker, 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 1852.
 Given under my official signature and seal, this 10 day of JAN, 1907.
John R. Wilkinson
 Ordinary of Fulton County.
 {Official Seal}
 NOTE.—All blanks must be filled.
 Vouchers and Affidavits must bear date after January 1st, 1907.

Walker, W.A. (Mrs.)
Fulton Co.
1913

Application for Pension Due
 Deceased Pensioner Under Act 1904.

Ordinary
 For Mrs. W.A. Walker
 of Fulton County.
 of Co. Fulton Regiment

Approved and ordered paid
1913

J. W. LINDSEY,
 Commissioner of Pensions.

Georgia Fulton County.
 I hereby authorize and constitute
 County, my lawful attorney, to collect and receive
 for me in my name, the pension due to 1913, now deceased, who was on the
 County at his death.
 Witness my hand and seal, this 10 day of JAN, 1913.
 ATTEST BY
 Note 1.—Use this blank only when the Pension is wanted to pay funeral expenses

H. M. PATTERSON & SON
ESTABLISHED 1880
FURNERAL DIRECTORS
100 NORTH FOREST STREET
ATLANTA, GEORGIA

Atlanta, Ga. February 16, 1913

Added to Funeral Expenses of Mrs. Winifred Walker

Casket & box
Coffin
Embalming
Robe
Grave & lining
Hose
Constitution notice
Drap for box
Carriages

149.25

Application for Pension Due to a Deceased Pensioner

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

Georgia, Tullahoma County.

Personally before me, the Ordinary of said County, comes F. W. Patterson

of said County, who, after being sworn, on oath says that
he knew Mrs. Winifred A. Walker of said County, and that she was on
the Pension Roll Tullahoma County at the
time of her death, which occurred in Tullahoma County, in this
State, on the 15th day of February, 1912, and that
a Pension of Eighty Dollars was due him and
unpaid at the time of her death. That he left no widow or dependent children surviving her and no
estate of any value sufficient to pay the funeral expenses, which amounted to the sum of \$49.25
Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me

this 17th day of March, 1913.
John P. Weems Ordinary
Tullahoma County

Georgia, Tullahoma County.

I, F. W. Patterson Ordinary of said County, do certify
that I personally know Mrs. Winifred A. Walker, who is a resident
citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and
credit.

I also knew Mrs. Winifred A. Walker while in life; that he
was the same person whose name appears on the Pension
Roll of Tullahoma County, and was paid a Pension
of Eighty Dollars in said County for 1912 and
I now believe him to be dead.

Given under my hand and official seal, this 17th day of March, 1913.
F. W. Patterson Ordinary,
Tullahoma County.

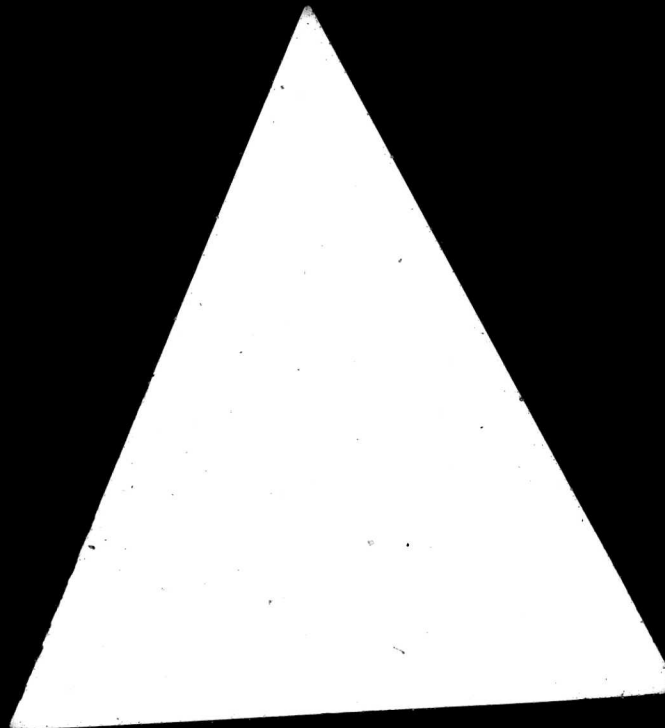
Hose
Constitution notice
Dray for box
Carriages

14925

that I personally know while in life; that he
citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and
credit.

I also knew Pension
was the same person whose name appears on the County, and was paid a Pension
Roll of Dollars in said County for 191... and
I now believe him to be dead.

Given under my hand and official seal, this day of 1913.
..... Ordinary.
..... County.



WALL, ARAH COFFEE (Mrs.)
Widow of J. B. L. Wall

FULTON COUNTY.
Not eligible. Married
Nov. 25, 1922.

Husband's record O. K.
Was a pensioner in Fulton County,
Ga. in 1920.

Responded under amendment #6 and approved.
Widow's Application

Under Act of 1910—As Amended by Act of
1919, and Constitutional Amendments
of 1920 and 1927.

County FULTON

Name WALL, ARAH COFFEE, Mrs.

Widow of J. B. L. WALL

Date of Marriage Nov. 25, 1922

Date of Husband's Death May 1929

Company E, 24th Regt. Ga. Inf.

Responded and approved 1923
See Act of 1910

Approved Did not marry prior

to Jan. 1, 1920.

Edison Henderson
Director.

CONFEDERATE *Pension*

State Department of Public Welfare

404 State Capital

See back application.

*Responded; under
amendment #6,
Name Bill #160,
and approved for
mrs. and child
1923.*

WALL, ABRAH COFFEE (Mrs.)
Widow of J.B. L. Wall

FULTON COUNTY.
Not entitled to
pension in 1922.



Refused
under Act of 1910
and Amendments
of 1919 and 1920.

Widow's Application

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

County FULTON
Name WALL, ABRAH COFFEE, Mrs.
Widow of J. B. L. WALL
Date of Marriage Nov. 25, 1922

Date of Husband's Death May 1929
Company E, 24th Regt. Ga. Inf.
Killed in action at
Battle of Atlanta, Ga.
April 1, 1920.

Sworn to and subscribed before me, this the
1st day of March, 1930.
J. M. Beck, Jr.,
Notary Public for the State of Georgia.

CONFEDERATE SOLDIER
404 State Capital
San Yack Steppington

Husband's record O. K.
Has a pensioner in Fulton County,
Ga. in 1922.

Refused under
Act of 1910
and Amendments
of 1919 and 1920.
Have Bill # 160
and approved for
man and child
1/53.

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,
FULTON COUNTY.

Personally appeared before me, Mrs. Abrah Coffee Wall of said State and County,
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and
the Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and,
after being duly sworn, true answers to make to the questions propounded, answers as follows, to-
wit:

SECTION I.

1. What is your name, and where do you reside? (Give Post Office and County)
Mrs. Abrah Coffee Wall, 615 Moreland Ave., S.E., Atlanta, Fulton County, Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? All my life - 77 years
Give date, or year, of your birth Jan. 1, 1873 Age 77
3. (1) When, (2) where and (3) to whom were you married? Nov. 25, 1922, in Atlanta, Ga.,
to John Beck Lafayette Wall.
4. a. Have you married since the death of first and soldier husband? No
b. When and where did your soldier husband die? May, 1929, Atlanta, Fulton County, Ga.
c. Were you residing together when he died? Yes
d. If not, how long had you resided apart?
e. Are you now a widow? Yes
f. Have you or your husband heretofore been paid a pension by the State? Yes - husband had.
g. If so, in what county was first pension drawn and what year were you or your husband placed
on rolls? In Fulton County. Do not know year husband was on rolls.

SECTION II.

1. When, where and in what Company and Regiment did your husband enlist as a soldier in
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry,
Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
Co. G, 24th Regt. Ga. Inf.

2. When and where was the Command of your husband surrendered?
3. Was your husband personally present with his Command when it was surrendered?
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? In what way?
6. What was his physical condition when he left his Command?
7. What effort did he make to return to his Command?
8. In what way was he prevented from going back to his Command?
9. Was he captured by the enemy at any time?
10. If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the
1st day of March, 1930
J. M. Beck, Jr.,
Notary Public for the State of Georgia.
of FULTON County.
(SEAL OF ORDINARY)

Abrah Coffee Wall
Applicant.

Sworn to and subscribed before me, this the
1st day of March, 1950
of Eugene Bunby Ordinary
of FULTON County.
(SEAL OF ORDINARY)

Arah Coffee Wall
Applicant.

Questions for Witness as to Marriage

STATE OF GEORGIA,

_____ COUNTY.

_____ of said State and County is hereby presented
as a witness in support of the application of _____ for the pension
provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments
of 1920 and 1937, in said State, who, after being sworn true answers to make to the questions
propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County) _____
2. How long and since when have you known _____ applicant _____
3. Where does she now reside, and since when has she been, continuously, a bona fide resident
citizen of this State? _____
4. When and to whom was she married? _____ How do you know? _____
5. How long and since when did you know _____ her
husband? _____
6. When and where did _____
the husband of applicant, die? _____
7. Were the applicant and her husband living together as husband and wife at the date of his
death? _____
8. If not, how long did they live apart before his death? _____

Were they divorced? _____

Sworn to and subscribed before me, this the
_____ day of _____, 1950
_____ Ordinary
of _____ County.
(SEAL OF ORDINARY)

(Witness)

Ordinary's Certificate

STATE OF GEORGIA,
FULTON

_____ COUNTY.

I, EUGENE GUNBY, Ordinary of said County, do certify
that I know Mrs. Arah Coffee Wall the applicant for pension; that
she is the person she represents herself to be, and that she has been, continuously, a bona fide resi-
dent citizen of said State since January 1st, 1920; that I also know _____ she is
the witness who swears to the service of husband and/or the marriage; that both of them are now
residents of said County and were duly sworn by me before signing the foregoing affidavit, and
that _____ truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 1st day of March, 1950, 1950.
(SEAL OF ORDINARY) Eugene Bunby Ordinary
of FULTON County.

INSTRUCTIONS:

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

dent citizen of said State since January 1st, 1920; that I also know ^{she is} the witness who swears to the service of husband and/or the marriage; that both of them are now residents of said County and ^{was} duly sworn by me before signing the foregoing affidavit, and that ^{the} ~~these~~ statements are entitled to full faith and credit.

Given under my hand and seal of office this 1st day of March, 1950, 1950
(SEAL OF ORDINARY) Eugene Sunby Ordinary
of FULTON County.

INSTRUCTIONS:

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

Court of Ordinary

FULTON COUNTY
STATE OF GEORGIA

CERTIFIED COPY OF
MARRIAGE LICENSE
AND
CERTIFICATE OF MARRIAGE
OF

MR. LAFAYETTE WALL
AND

MISS ARAH COFFEE

Recorded in Book 32 Page 452

THOS. H. JEFFRIES
Ordinary.

1959- FULTON
Mrs. A. C. Wall

For FULTON County

Application for Payment of Pension
to Estate When Pensioner Dies
Without Cashing Check for
Current Month.

Eugene Sunby Ordinary

For: estate of Mrs. ARAH C. Wall
(Name of Pensioner)

Date of Death: June 11, 1959

Amount: \$ 110.00

TO THE ORDINARY: Fill out in full and return this application to Confederate Pension and Record Department, 404 State Capitol, Atlanta 3, Georgia.

Approved and ordered paid,
June 30, 19 59

Director
Director.

Confederate Pension and Record
Department

Marriage License

State of Georgia--Fulton County

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

You are hereby authorized and permitted to join in the Honorable State of Matrimony

MR. LAFAYETTE WALL

and

MISS ARAH COFFEE

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

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

Given under my Hand and Seal this 25th day of November 19 22

THOS. H. JEFFRIES I. S.
Ordinary

I hereby Certify that
and

MR. LAFAYETTE WALL

MISS ARAH COFFEE

were joined together in the HOLY BONDS OF MATRIMONY

on the 26th day of November 19 22 by me.

HOWELL E. NEWTON, M.G.

State of Georgia,
Fulton County

ORDINARY'S OFFICE
ATLANTA, GA. March 1st 19 50.

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

MR. LAFAYETTE WALL

MISS ARAH COFFEE

and as the same appears of record in this office.

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



V. J. Yarbrough
Clerk Court of Ordinary

Application for

Payment of Pension to Estate When Pensioner Dies Without
Cashing Check for Current Month

(To be disbursed by the Ordinary)

GEORGIA, Fulton County

Before me, the Ordinary of said County, comes

that he knew

of said County, who, after being duly sworn, on oath says
late of said County, a Confed-
erate pensioner, and that said person is the identical person named and described in the attached
certified copy of burial certificate.

Sworn to and subscribed before me,

this 30th day of June 19 59

Ordinary.

CERTIFICATE OF THE ORDINARY

GEORGIA, Fulton County

I certify that

who subscribed
to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and
credit. I further certify that I knew the deceased
pensioner referred to in the foregoing affidavit and who was at the time of death regularly enrolled as
a pensioner on the records of file in my office. I further certify that said deceased pensioner is the
identical person named and described in the attached certified copy of burial certificate.

Given under my hand and seal of office, this 30th day of June 19 59

(Seal of Ordinary)

INSTRUCTIONS:

- 1st. Certified copy of Burial Certificate must accompany this application.
- 2nd. Return this application, properly signed, to the Confederate Pension and Record Department.
- 3rd. Ordinary should see that the back of this blank, when folded, is filled out.

State of Georgia,
Fulton County } S. S.

ORDINARY'S OFFICE
ATLANTA, GA. March 1st 19 50

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



MR. LaFAYETTE WALL

MISS ARAH COFFEE

and as the same appears of record in this office.

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

V. J. Yarbrough
Clerk Court of Ordinary

a pensioner on the record on the attached certified copy of burial certificate.

Given under my hand and seal of office, this the 30th day of June 19 59

(Seal of Ordinary)

Ordinary.

INSTRUCTIONS:

- 1st. Certified copy of Burial Certificate must accompany this application.
- 2nd. Return this application, properly signed, to the Confederate Pension and Record Department.
- 3rd. Ordinary should see that the back of this blank, when folded, is filled out.

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

CERTIFICATE OF DEATH
GEORGIA DEPARTMENT OF PUBLIC HEALTH

State File No.

L. S. File No. 2316

1. Place of Death		2. Usual Residence of Deceased	
(a) County <u>Fulton</u>	(b) State <u>GA.</u>	(c) City <u>Atlanta</u>	(d) County <u>Fulton</u>
(3) Town <u>Atlanta</u>		(4) R.F.D. and Box No. <u>1285 Howell Mill Rd.</u>	
(5) Name of Hosp. <u>1235 Howell Mill Rd.</u>		(6) R.F.D. and Box No. <u>1285 Howell Mill Rd.</u>	
(7) Length of Stay Hosp. or Before Death <u>1235 Howell Mill Rd.</u>		(8) Foreign Country <u>(Yes) N.Y. Name (No) N.Y. Name</u>	
3. Name <u>LaFayette Wall</u>		4. Name <u>LaFayette Wall</u>	
5. Sex <u>Male</u>		6. Race <u>White</u>	
7. Marital Status <u>Married</u>		8. Age <u>86</u>	
9. Date of Birth <u>1/21/1844</u>		10. Date of Death <u>May 24 1929</u>	
11. Usual Occupation <u>Retired</u>		12. Primary Cause of Death <u>Arteriosclerosis</u>	
13. Secondary Cause of Death <u>Hypertension</u>		14. Apoplexy <u>Yes</u>	
15. Name of Physician <u>P. Well</u>		16. Name of Hospital <u>Mary Peck</u>	
17. Name of Burial Place <u>GA.</u>		18. Name of Burial Place <u>GA.</u>	
19. Name of Burial Place <u>GA.</u>		20. Name of Burial Place <u>GA.</u>	
21. Name of Burial Place <u>GA.</u>		22. Name of Burial Place <u>GA.</u>	
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97. Name of Burial Place <u>GA.</u>		98. Name of Burial Place <u>GA.</u>	
99. Name of Burial Place <u>GA.</u>		100. Name of Burial Place <u>GA.</u>	

CERTIFIED COPY

State of Georgia

County of Fulton

I hereby certify that the foregoing is a true and correct copy of a record on file in this office.

(Signed)

J. F. Hackney M.D.

(Ordinary)

(Medical Officer)

SEAL

Doc 1108

DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

CERTIFICATE OF DEATH
GEORGIA DEPARTMENT OF PUBLIC HEALTH

State File No. _____

2316

1. Place of Death (a) County Fulton (b) City or Town Atlanta		2. Usual Residence of Deceased (a) State GA. (b) County Fulton	
(c) City or Town Atlanta		(c) City or Town Atlanta	
(d) Name of Hosp. or Institution 1235 Howell Mill Rd.		(d) R.F.D. and Box No. 1235 Howell Mill Rd.	
(e) Length of Stay Hosp. or Before Death - Institution		(e) Foreign Country? (Yes) <input type="checkbox"/> No <input checked="" type="checkbox"/>	
3. Name LaPayette Wall		Social Security Number	
PERSONAL AND STATISTICAL PARTICULARS			
4. Sex Male	5. Race White	6. Marital Status (date) W. D.	7. Date of Death May 24 1929
8. Married or Widowed Mrs. Arden Wall		9. Date of Birth 1/21/1844	
10. Age 85	11. Months 85	12. Days 85	13. Birth Place Georgia
14. Usual Occupation Retired		15. Primary Cause of Death Arteriosclerosis	
16. Industry Retired		17. Contributory Cause Hypertension	
18. Name P. Wall		19. Apoplexy Apoplexy	
20. Maiden Name Mary Peck		21. Operation Operation	
22. Name GA.		23. Date of Death May 24 1929	
24. Signature Mrs. LaPayette Wall		25. If death was due to external violence please answer the following questions:	
26. Signature 1235 Howell Mill Rd.		(a) Accident, Date of Occurrence 5/26/29	
27. Signature P. O. Address of		(b) Cause of Death Arteriosclerosis	
28. Signature Atlanta, GA.		(c) Date of Death May 24 1929	
29. Signature Atlanta, GA.		(d) Name of Physician J. C. Fieback	
30. Signature Atlanta, GA.		(e) Name of Physician J. C. Fieback	
31. Signature Atlanta, GA.		(f) Name of Physician J. C. Fieback	
32. Signature Atlanta, GA.		(g) Name of Physician J. C. Fieback	
33. Signature Atlanta, GA.		(h) Name of Physician J. C. Fieback	
34. Signature Atlanta, GA.		(i) Name of Physician J. C. Fieback	
35. Signature Atlanta, GA.		(j) Name of Physician J. C. Fieback	
36. Signature Atlanta, GA.		(k) Name of Physician J. C. Fieback	
37. Signature Atlanta, GA.		(l) Name of Physician J. C. Fieback	
38. Signature Atlanta, GA.		(m) Name of Physician J. C. Fieback	
39. Signature Atlanta, GA.		(n) Name of Physician J. C. Fieback	
40. Signature Atlanta, GA.		(o) Name of Physician J. C. Fieback	
41. Signature Atlanta, GA.		(p) Name of Physician J. C. Fieback	
42. Signature Atlanta, GA.		(q) Name of Physician J. C. Fieback	
43. Signature Atlanta, GA.		(r) Name of Physician J. C. Fieback	
44. Signature Atlanta, GA.		(s) Name of Physician J. C. Fieback	
45. Signature Atlanta, GA.		(t) Name of Physician J. C. Fieback	
46. Signature Atlanta, GA.		(u) Name of Physician J. C. Fieback	
47. Signature Atlanta, GA.		(v) Name of Physician J. C. Fieback	
48. Signature Atlanta, GA.		(w) Name of Physician J. C. Fieback	
49. Signature Atlanta, GA.		(x) Name of Physician J. C. Fieback	
50. Signature Atlanta, GA.		(y) Name of Physician J. C. Fieback	
51. Signature Atlanta, GA.		(z) Name of Physician J. C. Fieback	
52. Signature Atlanta, GA.		(aa) Name of Physician J. C. Fieback	
53. Signature Atlanta, GA.		(ab) Name of Physician J. C. Fieback	
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55. Signature Atlanta, GA.		(ad) Name of Physician J. C. Fieback	
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62. Signature Atlanta, GA.		(ak) Name of Physician J. C. Fieback	
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64. Signature Atlanta, GA.		(am) Name of Physician J. C. Fieback	
65. Signature Atlanta, GA.		(an) Name of Physician J. C. Fieback	
66. Signature Atlanta, GA.		(ao) Name of Physician J. C. Fieback	
67. Signature Atlanta, GA.		(ap) Name of Physician J. C. Fieback	
68. Signature Atlanta, GA.		(aq) Name of Physician J. C. Fieback	
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70. Signature Atlanta, GA.		(as) Name of Physician J. C. Fieback	
71. Signature Atlanta, GA.		(at) Name of Physician J. C. Fieback	
72. Signature Atlanta, GA.		(au) Name of Physician J. C. Fieback	
73. Signature Atlanta, GA.		(av) Name of Physician J. C. Fieback	
74. Signature Atlanta, GA.		(aw) Name of Physician J. C. Fieback	
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76. Signature Atlanta, GA.		(ay) Name of Physician J. C. Fieback	
77. Signature Atlanta, GA.		(az) Name of Physician J. C. Fieback	
78. Signature Atlanta, GA.		(ba) Name of Physician J. C. Fieback	
79. Signature Atlanta, GA.		(bb) Name of Physician J. C. Fieback	
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81. Signature Atlanta, GA.		(bd) Name of Physician J. C. Fieback	
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93. Signature Atlanta, GA.		(bp) Name of Physician J. C. Fieback	
94. Signature Atlanta, GA.		(bq) Name of Physician J. C. Fieback	
95. Signature Atlanta, GA.		(br) Name of Physician J. C. Fieback	
96. Signature Atlanta, GA.		(bs) Name of Physician J. C. Fieback	
97. Signature Atlanta, GA.		(bt) Name of Physician J. C. Fieback	
98. Signature Atlanta, GA.		(bu) Name of Physician J. C. Fieback	
99. Signature Atlanta, GA.		(bv) Name of Physician J. C. Fieback	
100. Signature Atlanta, GA.		(bw) Name of Physician J. C. Fieback	

CERTIFIED COPY

State of Georgia

County of **Fulton**

I hereby certify that the foregoing is a true and correct copy of a record on file in this office.

(Signed)

J. F. Hackney M.D.

(Ordinary)

(Notary Public)

SEAL

200-110

11. Date of Birth of 12. Date of Birth of		Date Filed with U. S. 5/28/28	13. Date of Birth of J. C. Plalock	Date Signed
14. Date of Birth of 15. Date of Birth of		16. Date of Birth of 210 MeB. Arts Bldg.		

CERTIFIED COPY

State of Georgia
 County of Fulton

I hereby certify that the foregoing is a true and correct copy of a record on file in this office.

(Signed) J. F. Hackney M.D.
 (Ordinary) (Judge Clerk)

SEAL
 REC 118



This is to certify that the above is a true and correct copy of the original
 certificate, which has become a perpetual record in the archives of the Georgia
 Department of Public Health. Not valid unless countersigned in the Division
 of Vital Records.

This is to certify that the above is a true and correct copy of the original
 certificate, which has become a perpetual record in the archives of the Georgia
 Department of Public Health. Not valid unless countersigned in the Division
 of Vital Records.

(Signature)
 DIRECTOR
 Georgia Department of Public Health

(Signature)
 Records Custodian, Director
 Division of Vital Records

DATE



Aug 1947 1947
J. M. STEVENSON
DEPT. OF HEALTH, ATLANTA
GA.

This is to certify that the above is a true and correct copy of the original
certificate, which has become a perpetual record in the archives of the Georgia
Department of Public Health. Not valid unless countersigned in the Division
of Vital Records.

R. E. Brown
DIRECTOR
Georgia Department of Public Health

L. M. Stacy
Records Custodian, Director
Division of Vital Records

DATE [REDACTED]

David M. Hill
Division of Vital Records



State of Georgia
Department of Public Health

V. F. GILLER, M. D., Director
ATLANTA
CERTIFIED COPY

50363

CERTIFICATE OF DEATH

7-11-64



State of Georgia
Department of Public Health
ATLANTA
CERTIFIED COPY



5036

CERTIFICATE OF DEATH

1. Name of Deceased: *William H. Patterson*
2. Date of Birth: *1884*
3. Date of Death: *1954*
4. Place of Birth: *Wood County, N.C.*
5. Place of Death: *Atlanta, Ga.*
6. Cause of Death: *Heart Disease*
7. Duration of Illness: *Several Months*
8. Name of Physician: *H. M. Patterson & Son*
9. Name of Hospital: *None*
10. Name of Undertaker: *None*
11. Name of Burial Place: *None*
12. Name of Funeral Home: *None*
13. Name of Minister: *None*
14. Name of Pastor: *None*
15. Name of Chaplain: *None*
16. Name of Musician: *None*
17. Name of Organist: *None*
18. Name of Singer: *None*
19. Name of Reader: *None*
20. Name of Officiant: *None*

This is to certify that the above is a true and correct copy of the original certificate, which has become a perpetual record in the archives of the Georgia Department of Public Health. Not valid unless countersigned in the Division of Vital Records.

R. S. [Signature]
Director
Georgia Department of Public Health

L. M. [Signature]
Records Division, Director
Division of Vital Records

[Signature]
Division of Vital Records

DATE: *1954*



State of Georgia
Department of Public Health
ATLANTA
CERTIFIED COPY



CERTIFICATE OF DEATH

State File No.

Division
Georgia Department of Public Health

DATE

Records Custodian, Director
Division of Vital Records

Atlanta
Division of Vital Records



State of Georgia
Department of Public Health
ATLANTA
CERTIFIED COPY



CERTIFICATE OF DEATH

Form with fields for: Name of Deceased, Sex, Age, Date of Birth, Date of Death, Cause of Death, Place of Death, etc. Includes a section for the physician's signature and a section for the registrar's signature.

This is to certify that the above is a true and correct copy of the original certificate, which has become a permanent record in the archives of the Georgia Department of Public Health. Not valid unless countersigned in the Division of Vital Records.

Division
Georgia Department of Public Health

Records Custodian, Director
Division of Vital Records

Atlanta
Division of Vital Records

DATE

JUNE 25, 1959

RECEIVED
L. M. LAG
Records Custodian, Director
Division of Vital Records
DATE: JUNE 25, 1959

Aug 28, 1861.
Captured, and paroled
Athens, Ga. May 5, 1865.

No. *Am AR*

Confederate Soldier's Application

Under Act 1910—As Amended by Act of 1916

County *Ellen*
Name *J. P. Wall*
Company *E*
Regiment *1st Ga. Inf*
Approved _____

E R Q 1957

J. W. LINDBERT,
Commissioner of Pensions.

Reed Printing Co., State Printers, Atlanta.

10-23-1919

Ordinary's Certificate

STATE OF GEORGIA

COUNTY

I, *W. H. Jeffries*, Ordinary of said County, certify that I know

the applicant, *J. P. Wall*, for pension is the person he represents himself to be and

resides in said county. That I also know _____

and that the _____ of said county and _____ duly sworn by me before signing the foregoing affidavit and _____ truthful and trustworthy and their statements are entitled to full faith and

credit.

Sworn to before me and at office this *10* day of *Oct* 19*19*

of _____ County }
Ordinary

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall read the questions and witnesses in the following words: "I certify that the foregoing statements are true to the best of my knowledge and belief." 2. Additional affidavits may be taken before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.

I, T. H. Joffe, Ordinary of said County, certify that I know the applicant, J. B. Wall, for pension in the person he represents himself to be and resides in said county. That I also know the witness swearing to the same; that these residents of said county and was duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 12 day of Oct, 1914

T. H. Joffe Ordinary
of Fulton County

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. So help you God."
2. Additional affidavits may be attached (if blank space are insufficient).
3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

No.

Confederate

Soldier's Application

Under Act 1910—As Amended by Act of 1919.

County Fulton

Name J. B. Wall

Company E

Regiment 17th Ga. Inf.

Approved

E. P. G. 1917

J. W. LINDSEY,

Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-23-14-17

Application for Soldier's Pension Under Act 1910 Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA.

Fulton COUNTY.

J. B. Wall of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office) J. B. Wall Fulton 533 Duval St.
2. How long and since when have you been a continuous resident citizen of this State? All my life 75 years
3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865? Yes
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Co. E, 17th Ga. Inf., Aug. 1862
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge) Full Class of Honor Apr. 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service? Approximate On
7. Were you actually present with your command when it was surrendered or discharged? Yes
8. If you were not actually present, state specifically and clearly where you were At sea on detached duty to procure provisions for the Co.
- a. Where was your command when you left it? Not Approximate of
- b. When did you leave the command? As on duty near the command
- c. For what cause did you leave? Detached to procure provisions
- d. By whose authority did you leave? By the Col. commanding
- e. For how long was your leave granted? In what way? Substantially was
- f. Why did you not return to your command after leave expired? Leave not returned
- g. In what way were you prevented? Being out of the army by the opposing Army
- h. What effort did you make to return? The army was broken
- i. Were you captured during the war? Yes
- j. If so, when, and where? In what prison were you held and when were you released? In not released Exchanged
9. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Not did not apply

Sworn to and subscribed before me, this

12 day of Oct, 1914

T. H. Joffe Ordinary

of Fulton County

(SEAL)

Questions for Witness as to Service

STATE OF GEORGIA.

COUNTY.

Isaac Hunter of said State and County is hereby presented
as a witness in support of the application of J. B. L. Hall for the pension provided
by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to
make to the questions propounded, answers as follows.

- make to the questions propounded, answers as follows.
1. What is your name and where do you reside? *My name is Jacob Hunter. I reside at Clayton, Ga.*
 2. How long and since when have you known *J. B. L. Wall* the applicant? *I have known him ever since June 1862*
 3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State, and how do you know? *He resides in Fulton County, Ga. He is a member of this State since the year 1865 that is to say*
 4. When, where and in what Company and Regiment did *J. B. L. Wall* enlist during war from 1861 to 1865? (Give date and place.) *I did not see him enlist and when I enlisted he was a soldier in Company C, 24th. at Richmond, Va.*
 5. How did you obtain your information of this Service? *I heard in the army with him for about 3 years in Petersburg.*
 6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date.) *At the time from June 1862 until the close of the war except for about while when he was captured.*
 7. When and where was his command surrendered or discharged (give date and place) *At Appomattox Va. April 1865*
 8. Were you personally present at the surrender? *I was*
 9. If not, where were you and how came you there? *—*

[illegible][illegible]

15th day of October 1919
J. J. Smith Ordinary
Clerk Court of O. and A.
Kalamazoo County

(SEAL)

Some time of the year I have been and I am
after the present of the year.

I Smith
 Clerk of Court of Ordinary
 of Fulton County
 (SEAL)

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.
 I, Thos H. Jeffries Ordinary of said County, do certify
 that I personally know Mrs. Myrtle Wall, the applicant, and that she
 is the lawful widow of Joe B. Wall, who was on
 the Pension Roll of said Fulton County, and was paid
 a Pension from Fulton County for 1929, and at the time
 of his death on the 24 day of May, 1929, there was due to
 him and unpaid his Pension of _____ Dollars from the State
 of Georgia, and I know C. F. Boffee, the within
 witness, and he is of a truthful and trustworthy character and entitled to full credit.
 Given under my hand and seal this 5 of July, 1929
 (Seal of Ordinary) Thos H. Jeffries Ordinary
Fulton County

WALL, J. B. L.
 SECOND QUARTER 1929

Fulton County
 1929

Application for Pension Due
 Deceased Soldier
 (UNDER ACT 1891)
 (To be paid to his Widow)

BY
Myrtle Wall
 Widow of Joe B. Wall
 Date of Marriage May 19 1914
 Date of Death May 24 1929
 Amount undischarged 24
July 7 1929
 JOHN W. CLARK,
 Commissioner of Pensions.

Ordinary: Fill out above in full and send
 this blank to Pension Department for ap-
 proval before you pay out the money, and
 then return it with your receipt and per-
 mission filing in the Pension Department.

09

Application for Pension Due Deceased Soldier

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

STATE OF GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Mrs. LaFayette Wall of said County, who after being duly sworn, on oath says that she is the widow of J. B. L. Wall and that said Pensioner was on the Pension Roll of Fulton County and was paid a Pension of Fifty (\$50.00) Dollars from said County for 1st Quarter, 1929, and that the said Pensioner died in Fulton County on the 24th day of May, 1929. Applicant further swears that she married the said J. B. L. Wall on the 22nd day of Nov., 1922, in Fulton County and State of Georgia, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the 2nd Qr. Pension, 1929 due and unpaid be paid to her.

Sworn to and subscribed before me this 29th day of June, 1929.
William R. Marshall Ordinary } Mrs. LaFayette Wall (S.)
Fulton County }
(Seal of Ordinary)

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Fulton County.

Personally before me comes C. F. Coffee who on oath says that he knew J. B. L. Wall while in life and that he knows Mrs. LaFayette Wall the above applicant; and knows that the said J. B. L. Wall and Mrs. LaFayette Wall were in due form of law married in the County of Fulton in the State of Georgia on the 22nd day of November, 1922, and that they were residing together as husband and wife at the time of his death on the 24th day of May, 1929, and that she is his dependent widow.

Sworn to and subscribed before me this 29th day of June, 1929.
William R. Marshall Ordinary } C. F. Coffee
Fulton County }
(Seal of Ordinary)

INSTRUCTIONS:

1st. Proof of marriage must be made.
2nd. Do not use the accompanying form of marriage certificate inasmuch as same is not valid in this State, suitable only for transfer to the State of Georgia. A plain certificate written on the back of the copy of marriage license is the proper thing.
3rd. The Ordinary of the County where the death of the soldier occurred, and the County of the widow's residence, when filled in, and sent to the Pension Department, will be returned to you as your authority to make the application.
4th. The widow of a soldier killed in the war of 1861-65, or who died of disease while in the service, may receive the pension by signing name, as widow, opposite the name of husband on the back of the application.
5th. Only the one pension is covered by this application. Take another application, on the white blank, to admit widow to roll in her own right.

Wall, J.B.L.
THIRD QUARTER 1929

Fulton County

1929

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs. Fayette Wall
Widow of J.B.L. Wall
Date of Marriage: May 24, 1929
Date of Death: May 24, 1929

Approved and ordered paid

John W. Clark, Jr.
April 12, 1929

Commissioner of Pensions.
Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money. If you have not received the money, you may pay out the money for permanent filing in the Pension Department.

Wall, J.B.L.
THIRD QUARTER 1929

Fulton County

1929

Application for Pension Due Deceased Soldier

(UNDER ACT 1891)

(To be paid to his Widow)

BY

Mrs. Fayette Wall
Widow of J.B.L. Wall
Date of Marriage: May 24, 1929
Date of Death: May 24, 1929

Approved and ordered paid

John W. Clark, Jr.
April 12, 1929

Commissioner of Pensions.
Ordinary: Fill out above in full and send this blank to Pension Department for approval before you pay out the money. If you have not received the money, you may pay out the money for permanent filing in the Pension Department.

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Mrs. Fayette Wall, the applicant, and that she is the lawful widow of J.B.L. Wall, who was on the Pension Roll of said Fulton County, and was paid a Pension from Fulton County for 1929, and at the time of his death on the 24 day of May, 1929, there was due to him and unpaid his Pension of Dollars from the State of Georgia, and I know the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 10 of Sept, 1929

(Seal of Ordinary)

Thos H. Jeffries
Fulton, County

CERTIFICATE OF ORDINARY

STATE OF GEORGIA, Fulton County.

I, Thos H. Jeffries, Ordinary of said County, do certify that I personally know Mrs. Fayette Wall, the applicant, and that she is the lawful widow of J.B.L. Wall, who was on the Pension Roll of said Fulton County, and was paid a Pension from Fulton County for 1929, and at the time of his death on the 24 day of May, 1929, there was due to him and unpaid his Pension of Dollars from the State of Georgia, and I know the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 10 of Sept, 1929

(Seal of Ordinary)

Thos H. Jeffries
Fulton, County

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Tulsa County.

Personally before me, the Ordinary of said County, comes Mrs. Fayette Wall
of said County, who after being duly sworn, on oath says that she is the widow of _____

and that said Penaloner was on the Pension Roll of Fullon County
and was paid a Pension of Fifty (50.00) Dollars
from said County for no Quarter, 1927 and that the said Pensioner died in
Fullon County on the 24 day of May, 1929

Applicant further swears that she married the said J. H. Waley
on the 22 day of Nov, 1922, in Fulton County and
State of Ga, and resided with him from the date of marriage to his death as his
lawful wife, and is now his dependent widow, and she asks that the 3rd Gr. Pension, 1922
due and unpaid be paid to her.

Sworn to and subscribed before me this 10 day of Sept, 1929
William B. Markate, Ordinary } Mr. La Fayette Wall (L. S.)
Fulton County
 (Seal of Ordinary)

STATE OF GEORGIA, _____ County.

Personally before me comes _____, who
on oath says that he knew _____ while in life
and that he knows Mrs. _____, the
above applicant; and knows that the _____
and _____ were in due form of law married in the County
of _____ in the State of _____ on
the _____ day of _____, 18____, and that they were residing
together as husband and wife at the time of his death on the _____ day of
_____, 19____, and that she is his dependent widow.

Sworn to and subscribed before me this _____ day of _____, 192____

Ordinary

County

(Seal of Ordinary)

INSTRUCTIONS

[illegible]

(UNDER ACT APPROVED OCTOBER 9, 1891)

STATE OF GEORGIA, Fulton County

STATE OF GEORGIA, Fulton County. Lafayette Wells
Personally before me, the Ordinary of said County, comes Mrs. Lafayette Wells
of said County, who after being duly sworn on oath says that she is the widow of _____

and that said Pensioner was on the Pension Roll of Fulton County
and was paid a Pension of Fifty (50.00) Dollars
from said County for 3 Quarter, 1929, and that the said Pensioner died in Fulton
County on the 24 day of May, 1929.

Applicant further swears that she married the said JOHN C. WALKER
on the 22 day of Nov 1988 in Franklin County and
State of Pa 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 Gr. Pension, 1988
due and unpaid be paid to her.

due and unpaid be paid to her.

Sworn to and subscribed before me this 22 day of Nov., 1928

Opie L. MacIntyre Ordinary } Mrs. L. Fayette Wall S.
Fulton County }

(Seal of Ordinary)

STATE OF GEORGIA, _____ County.

STATE OF GEORGIA

Personally before me comes _____, who
on oath says that he knew _____ while in life
and that he knows Mrs. _____, the
above applicant; and knows that the said _____
and _____ were in due form of law married in the County
of _____, State of _____ on
the _____ day of _____, 18____, and that they were residing
together as husband and wife at the time of his death on the _____ day of
_____, 19____, and that she is his dependent widow.

Sworn to and subscribed before me this _____ day of _____, 192____
_____, Ordinary }
_____, County }
(Seal of Ordinary)

INSTRUCTIONS

1st. Proof of marriage must be made.
2nd. The names of the parties to the marriage must be given in capital letters throughout the document, and be suitable only for tracing.
3rd. The names of the parties to the marriage must be given in capital letters throughout the document, and be suitable only for tracing.
4th. The names of the parties to the marriage must be given in capital letters throughout the document, and be suitable only for tracing.
5th. The names of the parties to the marriage must be given in capital letters throughout the document, and be suitable only for tracing.
6th. The names of the parties to the marriage must be given in capital letters throughout the document, and be suitable only for tracing.
7th. The names of the parties to the marriage must be given in capital letters throughout the document, and be suitable only for tracing.
8th. The names of the parties to the marriage must be given in capital letters throughout the document, and be suitable only for tracing.
9th. The names of the parties to the marriage must be given in capital letters throughout the document, and be suitable only for tracing.
10th. The names of the parties to the marriage must be given in capital letters throughout the document, and be suitable only for tracing.

Ordinary
(Seal of Ordinary) County

INSTRUCTIONS:

1st. Form of certificate must be made.
2nd. You are to use the ordinary form of certificate to receive votes throughout the State, suitable only for tracing.
3rd. The certificate is to be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
4th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
5th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
6th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
7th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
8th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
9th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
10th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.

Ordinary
(Seal of Ordinary) County

INSTRUCTIONS:

1st. Form of certificate must be made.
2nd. You are to use the ordinary form of certificate to receive votes throughout the State, suitable only for tracing.
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7th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
8th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
9th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.
10th. The certificate must be made in any form of certificate. A plain certificate written on the back of the copy of certificate.

NAME Wall, J.B.L. YEAR 1880 COUNTY Fulton.

WHEN AND WHERE BORN? Resident of Georgia all his life since 1844.

ENLISTED WHEN AND WHERE? Aug. 1861 in Clayton, Rabun Co. Ga.

RANK:

COMPANY AND REGIMENT? Co. E 24th Co. Infantry.

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE? Does not state when nor where except was in detail duty to procure rations and was cut off by the enemy.

RELEASED? Exchanged from Fort Delaware May 5, 1865.

WHEN AND WHERE SURRENDERED? Command surrendered at Appomattox, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Detailed to procure rations and was captured and in prison at Fort Delaware.

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: Jacob Hunter-----same Command-----no data.

WHEN AND WHERE SURRENDERED? Command surrendered at Appomattox, Va.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? Detailed to procure
rations and was captured
and in prison at Fort
Delaware.

DIED, WHEN AND WHERE?

BURIED:

WITNESSES: Jacob Hunter-----Same Command-----no data.

Wall, Mrs. Robert
Fulton County
OK

No. _____

**WIDOW'S
Indigent Pension
1901.**

Name *Mrs. R. J. Wall*
County *Fulton*
Widow of *R. J. Wall*
D. 5 May
Approved *4/22* 1901

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO _____

_____, 1901.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.


County _____

I, _____ hereby authorize _____ of _____ County to receive and receipt for the pension allowed and due, he remit the same to me at _____ day of _____ 1901.

Witness my hand this _____ day of _____ 1901.

Executed in presence of _____ Ordinary _____ County _____

L. S.



POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

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

Witness my hand this _____ day of _____ 1901.

Executed in presence of _____

Ordinary.

County.

L. 8.

REAL

WIDOW'S

Indigent Pension

1901.

Name of R. P. Wall.

County of Fulton

Residence of R. P. Wall.

City of Atlanta

Approved 4/22/01

JOHN W. LINDSEY, Commissioner of Pensions

WARRANT HANDLED TO

W. S. Lindsey, State Printer, Atlanta

Questions for Applicant.

STATE OF GEORGIA.

Fulton County.

Mrs Robert J. Wall of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Post Office)
Mrs Robert J. Wall, Fulton County, Atlanta, Georgia, Fulton County.
2. How long and since when have you been a resident of this State?
all my life
3. When and where were you born?
June 2nd 1838, Hardee County, Georgia
4. When and where was your husband born—state his full name, and when were you and he married?
Richard J. Wall, Hardee County, Georgia, August 2nd 1861
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States?
in May 1861, Company D, 5th Georgia Regiment
6. How long did your husband serve in said Company and Regiment?
18 months
7. When and where did your husband's Company and Regiment surrender and was discharged?
don't know. Discharged at Murfreesboro and
8. Was your husband present at the time and place when his Company and Regiment surrendered?
He was not
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?
was discharged for going miss to assist Governor's authority. Subsequently he was discharged in Company at Murfreesboro, Tennessee, in May 1862
10. When and where did your husband die?
1882, 23rd of May, Hardee County, Georgia
11. Which of the following grounds do you have your application for Pension, viz: First—Age and Poverty; Second—Infirmary and Poverty; or Third—Blindness and Poverty?
age and poverty also infirmity
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight.
since since husband's death
13. What has been your occupation since your husband's death?
no occupation
14. How much can you earn gross, by your own exertion or labor?
nothing
15. What property, real or personal, or income do you have or possess, and its gross value?
nothing
16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899-1900, and what disposition, if any, by sale or gift, have you made of the same?
no property
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Fulton County, no property
18. How have you been supported since death of husband, and especially for 1899 and 1900?
have been with married daughter
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income?
support cost 5 dollars per month, nothing by my own
20. What was your employment during 1899 and 1900—how much did you receive for each year?
no employment, receiving no income
21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property?
have no family
22. Have you ever made an application for pension before?
never have
23. How many applications have you made for a Pension, and under what class?
have never applied before

Sworn to and subscribed before me this 26th day of June 1901. Mrs Robert J. Wall
John W. Lindsey, Ordinary.
Fulton County.

Approved by the Commissioner of Pensions, John W. Lindsey, on April 22nd 1901, and returned to the applicant.

24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? *None of my knowledge*

25. What is applicant's physical condition and her chances and ability to earn a support? *Can't say, not able to earn support*

SEAL

Notarize-1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God?"

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

3. All affidavits must be made before Ordinary.

4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 20th April, 1866, not entitled.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County: }

I, _____, hereby authorize

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

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

day of _____, 1902.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County: }

I, _____, hereby authorize

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

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

day of _____, 1903.

[L. S.]

Executed in the presence of _____

Widow Robert G. Fulton

To These Herefore Paid

1902.

No. 1

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1902.

Robert G. Fulton

Fulton County,

Widow of *Robert G. Fulton* Regiment

Co. _____

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT ISSUED

4/15 1903

AND PASSED TO *ABT*

OFFICE OF THE COMMISSIONER OF PENSIONS, GEORGIA.

Widow Robert G. Fulton

To These Herefore Paid

1903.

No. 31

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1903.

Robert G. Fulton

Fulton County,

Widow of *Robert G. Fulton* Regiment

Co. *C 5th Ia*

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT ISSUED

1/22 1903

AND PASSED TO *ABT*

OFFICE OF THE COMMISSIONER OF PENSIONS, GEORGIA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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

PERSONALLY COMES MRS.

*Mrs Robert J Wall*who, being sworn, says on oath, that she is a bona fide resident of said County of **Fulton**, State of Georgia, and that she has RESIDED in said Statecontinuously ever since *Birth*. That she is the Widow of *Robert J Wall* who was a soldier in Companyof the *5th* Regiment of *the*Volunteers, that he enlisted in said regiment on or about the month of *May* 186*1*, and served in the Army up to *15th Mo* 189*2*. That he died on the *23rd* day of *May* 189*2*.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been allowed an Indigent pension as a resident of **Fulton**, County, under Act 1906, for the year 1902, and now apply for the pension provided by law for the year ending December 31, 1902.Sworn to and subscribed before me, this *13* day of *June* 1902.*John P. Wilkinson*
State of Georgia, *John P. Wilkinson*
Fulton, County, Ordinary of said County, certify that I am well acquainted with Mrs. *Robert J Wall*, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since theday of *1st* 18*60*.Given under my official signature and seal, this *13* day of *June* 1902.
Official Seal, *John P. Wilkinson*
Fulton, County, Ordinary of.NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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

PERSONALLY COMES MRS.

*Robert J Wall*who, being sworn, says on oath, that she is a bona fide resident of said County of **Fulton**, State of Georgia, and that she has RESIDED in said Statecontinuously ever since *Birth*. That she is the Widow of *Robert J Wall* who was a soldier in Companyof the *5th* Regiment of *the*Volunteers, that he enlisted in said regiment on or about the month of *May* 186*1*, and served in the Army up to *15th Mo* 189*2*. That he diedon the *23rd* day of *May* 189*2*.*A. & P.*

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been allowed an Indigent pension as a resident of **Fulton**, County, under Act 1906, for the year 1902, and now apply for the pension provided by law for the year ending December 31, 1902.Sworn to and subscribed before me, this *13* day of *JAN 23rd* 1903.*John P. Wilkinson*
Ordinary.State of Georgia, *Mrs. Robert J Wall*
County, Ordinary of said County, certify that I am well acquainted with Mrs. *Robert J Wall*, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since theday of *Birth* 18*60*.Given under my official signature and seal, this *13* day of *June* 1902.Official Seal, *John P. Wilkinson*
Ordinary of **Fulton**, County.NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

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

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

day of _____ 1904.

[L.S.]

Executed in presence of

PAID TO
THOSE HERETOFORE PAID.

1904.

No. 64

INDIGENT
WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. Robert J. Wall

Widow of

Fulton,

County.

On 10/15/04

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

1/22/04

AND HANDLED TO

OFF

One W. Lindsey, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, Mrs. Robert J. Wall, 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 January 1905.

Executed in presence of

Edgar H. Em.

1905.

No. 50

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. Robert J. Wall

Widow of

Fulton,

County.

On 10/15/04

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

1/22/05

AND HANDLED TO

Edgar H. Em.

One W. Lindsey, State Printer, Atlanta.

Form No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

Robert J. Wall

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State continuously ever since Birth. That she is the Widow of Robert J. Wall who was a soldier in Company C of the 5th Regiment of Gen Volunteers, that he enlisted in said regiment on or about the month of May 1861, and served in the Army up to 15 Nov 1861. That he died on the 23rd day of May 1892.

a & p

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this 22 day of JAN 1904.Mrs R. J. Wall

Post Office

Ordinary

State of Georgia,

I, John R. Williamson

County

Ordinary of said County, certify that I am well acquainted with Mrs. Robert J. Wall who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of Birth 1860.

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

John R. Williamson

Ordinary of

Fulton County

Official Seal

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

Form No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

Robert J. Wall

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State continuously ever since for 60 or 70 years. That she is the Widow of R. J. Wall who was a soldier in Company D of the 5th Regiment of Gen Volunteers, that he enlisted in said regiment on or about the month of May 1861, and served in the Army up to 15 Nov 1861. That he died on the 23rd day of May 1892.

after poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

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

Sworn to and subscribed before me,

this 22 day of Jan 1905.Mrs. Robert J. WallPost Office 42 Walnut St., Atlanta, Ga.

State of Georgia,

Fulton

County

Ordinary of said County, certify that I am well acquainted with Mrs. Robert J. Wall 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 June 1893.

Given under my official signature and seal, this the 17 day of Jan 1905.


Official Seal


John R. Williamson

Ordinary of

Fulton County.

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

herself to be, and that she was contrary
day of Birth 18____ day of MAY 22 1904.
Given under my official signature and seal, this the _____ day of _____ 1904.
John P. Wilkinson
Ordinary of Fulton County

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

Given under my official signature and seal, this the 17 day of January 1905.
John P. Wilkinson
Ordinary of Fulton County.

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

STATE OF GEORGIA.

FULTON COUNTY.

Ordinary's Office, Atlanta, Jan 18, 1905

I, John P. Wilkinson, Ordinary of said County, certify that Edgar H. Orr, whose genuine official signature appears to the annexed paper, was at the time of said signing an acting Justice of Peace, in and for said County, duly sworn and commissioned, and that his commission was dated the 15th day of Dec. 1904 and will expire on the 14th day of Dec. 1908, and that all his official acts as such are entitled to full faith and credit.

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

John P. Wilkinson
ORDINARY

Fulton County
I, in full ordinary in and for said County, do hereby certify that H. B. Bartleson is the appellant of Miss R. J. Hall, in a suit of character character, and that his statement is entitled to full faith and credit.
I do further certify that before signing the foregoing instrument, that the return of H. B. Bartleson to the oath presented is plain and that the full text of the affidavit was read to the witness before the same was signed and subscribed.
Witness my hand and official seal this 12th day of Feb. 1905.

P. M. Heile Ordinary
Narrow to King

affidavit was made
the same was signed and Subscribed
before my hand and official seal
this Feb 12 1901 -

P. M. Heile Ordinary
Harrisburg

and that all his official acts as such are entitled to full faith and
credit.

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

John P. Harrison
ORDINARY

Wall, Sarah J. (m)
Fulton
County
No. 1001200

Widow's Pension

Under Act 1910—⁸ Amended by Act of 1919.

County Fulton
Name Mrs Sarah Jewell
Widow of Geo Wall
Company E
Regiment 1st Ga Inf
Approved _____

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

Ernst Printing Co., State Printers, Atlanta

10-31-1919

NOTES: 1. Before any questions are answered, the Ordinary shall enter a solemnity and the witness in the following words: "I, _____, do solemnly swear that I will answer truth to each of the questions asked you and the witnesses present in this court."

2. Additional questions may be asked if the facts appear to warrant them.

3. Any addition must be made before the Ordinary of the readiness of the person to be sworn and certified by the Ordinary.

4. Any addition must be made before the Ordinary of the readiness of the person to be sworn and certified by the Ordinary.

5. Alike separated couples of marriage license if obtainable. If not, prove marriage by some person, or by general reputation.

(SRAL)

Sworn under my hand and official seal of office this 31 day of Oct 1919

County-

Ordinary's Certificate

STATE OF GEORGIA.

Fullon

COUNTRY.

Ordinary of said County, do certify

that I know My father the applicant for pension. She

and was on the 4th November 1908; that I also know *of it well*

the witness who swears to the service of husband; that both of them are now residents of said County and
my dear
were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trust

worthy, and their statements are entitled to full faith and credit.

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

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

Sworn under my hand and official seal of office this 30th day of Oct 1919.

(SEAL) T. H. Jeffries Ordinary,
County.

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

Widow's Pension

Under Act 1900-as Amended by Act of 1919.

County Fulton
Name Mrs. Sarah J. Wall
Widow of J. F. Wall
Company E
Regiment 24th Ga. Inf
Approved [Signature]

J. W. LINDSEY,
Commissioner of Pensions,
Dept. Printing Co. State Printer, Albany.

10-31-1919

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name, and where do you reside? Mrs. Sarah J. Wall, 253 Crew St., Atlanta, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? Oct 18, 1880, Franklin Co., Ga., to John Wall.
- a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) August 1861, Rabun Co., Ga. Co. "B" 24th Ga. Reg. Inf.
5. When and where did the commands of your husband surrender or discharge from the army?
6. Was your husband personally present at the time of the surrender or discharge of this command? No
7. If he was not present state clearly where he was? Elmira, N. Y.
8. Where was his command when he left? Front Royal, Va.
- a. For what cause did he leave his command? Captured
- b. By whose authority did he leave his command?
- c. For how long was he granted leave of absence?
- d. What was his physical condition when he left his command?
- e. What effort did he make to return to his command? Held as prisoner
- f. In what way was he prevented from going back to Command
- g. Was he captured by the enemy at any time? Yes
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? Front Royal, Va., Sept. 1864, held at Elmira, N. Y. until after surrender
- j. When and where did your first husband die? July 8, 1901, Hart Co., Ga.
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? Never resided apart
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No

If so, when and for what cause were you or your husband placed on the roll? Never applied

Sworn to and subscribed before me this the

30 day of October 1919

[Signature] Ordinary

of Fulton County.

(SEAL)

Aug 24, 1861 -
Released Elmira, N. Y.,
Prison, May 29, 1865.

May 24, 1861
Belmont Elm
Prison, May 2

4/10/21 1861
of Fulton County } Ordinary
(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA.

Fulton COUNTY.

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

1. What is your name and where do you reside? Lafayette F. Wall, 993 Marietta St.
Atlanta, Ga.

2. How long and since when have you known Mrs. Sarah J. Wall applicant?
Over forty years

3. How long and since when has she continuously resided in this State? (Give date.)
Lived in Ga. ever since I have known her

4. When and to whom was she married? John Wall 1880 How do you know? He told me since 1880
know her before marriage and that she lived with John Wall

5. How long and since when did you know John Wall her
husband? All my life

6. When and where did John Wall
the husband of applicant, die? Hart Co., Ga. about 1901

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

8. If not, how long did they live apart before his death? Never resided apart
Were they divorced? No

9. When, where and in what Company and Regiment did John Wall enlist?
August 1861, Babun Co., Ga., Co. "E", 24th Ga. Reg.

10. Were you a member of the same Company? Yes

11. How long within your personal knowledge did he perform actual military service with his Company
and Regiment? From enlistment to surrender

12. When and where did his Command surrender, and was discharged?
Appomattox Court House April 9, 1865

13. Were you personally present when it was surrendered? No If not, where
were you On detailed service in Virginia near command and how came you there?

14. Was the husband of applicant personally present at surrender? No If not
where was he? In Prison When, where and for what

cause did he leave Command? (Give date.) Front Royal, Va., Fall of 1864 By whose
authority did he leave his Command? And how

long was he granted leave? How do you know all this?
I was member of said company and saw him constantly in service
until he was captured at Front Royal in the Fall of 1864

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-
mand? Held as prisoner

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

Sworn to and subscribed before me this the

20 day of October 1861

Charles Mason Ordinary

of Fulton County.

(SEAL)

14. Was the husband of applicant personally present at surrender? If not
where was he? IN PRISON When, where and for what
cause did he leave Command? (Give date.) Front Royal Va. Fall of 1864 By whose
authority did he leave his Command? And how
long was he granted leave? How do you know all this?
I was member of said company and saw him constantly in service
until he was captured at Front Royal in the Fall of 1864
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-
mand? Held as prisoner
16. What effort did he make to return to his Command and how do you know this? Of your own
knowledge or how?

Sworn to and subscribed before me this the

20 day of October 1872

Charles W. Mason Ordinary
of Fulton County.
(SEAL)

La Fayette Wall

THE END
MICROFILMED FOR
GA. DEPT. OF
ARCHIVES AND HISTORY

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

Title or TOLLERSON, (MRS) ELVINA or ELVINY
TOLLISON, (JEFFERSON N.)
FULTON, COUNTY

THRU WALL, (MRS) SARAH J.
(JOHN)
FULTON COUNTY

Volume
GCP 210

GCP

Number
2892139210

2892139

I CERTIFY I WAS THE OPERATOR WHO
PHOTOGRAPHED THIS FILM.
IN ATLANTA, GEORGIA, AUGUST 21, 1962

J. P. Surles
Operator
J. P. SURLES

15X - V

DATE

1130

MANN FILM LABORATORIES

Application for Pension Due to a Deceased Pensioner

Under the Act of August 15, 1904

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

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes
Harry G. Poole of said County, who, after being sworn, on oath says
 that he knew Mrs. Frances J. Turner of said County, and that he was on
 the Widows Pension Roll Fulton County at the
 time of his death, which occurred in Fulton County, in this
 State, on the 2 day of July, 1921, and that
 a Pension of \$100.00 Dollars was due him and
 unpaid at the time of his death. That he left no widow or dependent children surviving him, and
 no estate of any value sufficient to pay his funeral expenses, which amounted to the sum of \$259.00
 Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me
 this 10 day of Dec, 1921

Charles H. Jeffries Ordinary.
Fulton County

AFFIDAVIT OF ORDINARY

GEORGIA, Fulton County.

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

I also knew Frances J. Turner while in life; that he
 was the same person whose name appears on the Widows Pension
 Roll of Fulton County, and was due a Pension
 of \$100.00 Dollars in said County for 1920, and
 I now believe him to be dead.

Given under my hand and official seal, this 10 day of Dec, 1921.
 (SEAL) Thos. H. Jeffries Ordinary.
Fulton County.

NOTE.—For use in all cases where pensioner died after Jan. 1st, but not been out of State longer than twelve months and died without
 leaving sufficient property to pay such expenses. Requires those claiming amounts for expenses of last illness and for funeral expenses, to
 make out the account in itemized form, giving value for each item and for what. Showing receipts, when those items concerned with last
 illness before death, cannot be paid. All accounts must be made out and sworn to before the Ordinary, in the following form:
 "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of
 Person who pay such bills must see to it that they are itemized and sworn to as shown directed before presenting them for payment
 by the State.
 The Ordinary must see that an affidavit has been made on the face or back of each bill submitted for payment, and must then attach
 such bills to this voucher and send to the Pension Office so that his receipt may be given credit for the money thus paid out. If you
 have any doubt about a claim, write to this Office for instruction. Do not pay out any money in these cases until the consolidated voucher
 has been sent to the Pension Office and approved and sent back to you as your
 authority to pay out the money."

Application for Pension Due to a Deceased Pensioner

Under the Act of August 15, 1904

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

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes
HARRY G. POOLE of said County, who, after being sworn, on oath says
 that he knew Mrs. Frances J. Turner of said County, and that he was on
 the Widows Pension Roll Fulton County at the
 time of his death, which occurred in Fulton County, in this
 State, on the 2 day of July, 1921, and that
 a Pension of \$125.00 Dollars was due him and
 unpaid at the time of his death. That he left no widow or dependent children surviving him, and
 no estate of any value sufficient to pay his funeral expenses, which amounted to the sum of \$259.00
 Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me

this 19 day of Dec, 1921
Charles H. Jeffries Ordinary.
Fulton County.

AFFIDAVIT OF ORDINARY

GEORGIA, Fulton County.

I, Thos. H. Jeffries Ordinary of said County, do certify
 that I personally know HARRY G. POOLE, who is a resident
 citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith
 and credit.

I also knew FRANCES J. TURNER while in life; that he
 was the same person whose name appears on the Widows Pension
 Roll of Fulton County, and was due a Pension
 of \$125.00 Dollars in said County for 1921, and
 I now believe him to be dead.

Given under my hand and official seal, this 19 day of Dec, 1921.
 (SEAL) Thos. H. Jeffries Ordinary.
Fulton County.

NOTE.—For use in all cases where pensioner died after Jan. 1st, but not been out of State longer than twelve months and died without
 leaving sufficient property to pay such expenses. Requires those claiming amounts for expenses of last illness and for funeral expenses, to
 make out the account in itemized form, giving value for each item and for what. Showing receipts, when those items concerned with last
 illness before death, cannot be paid. All accounts must be made out and sworn to before the Ordinary, in the following form:
 "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of
 Person who pay such bills must see to it that they are itemized and sworn to as shown directed before presenting them for payment
 by the State.
 The Ordinary must see that an affidavit has been made on the face or back of each bill submitted for payment, and must then attach
 such bills to this voucher and send to the Pension Office so that his receipt may be given credit for the money thus paid out. If you
 have any doubt about a claim, write to this Office for instruction. Do not pay out any money in these cases until the consolidated voucher
 has been sent to the Pension Office and approved and sent back to you as your
 authority to pay out the money."

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
J. W. STALLINGS, who upon oath says:

That he knows Mrs. Frances J. Turner and knew her husband, A. M. Turner; that he knows of his own personal knowledge that the said Frances J. Turner and the said A. M. Turner lived together as man and wife continuously for many years before the death of said A. M. Turner in 1903; that the said Mrs. Frances J. Turner has not remarried since the death of her husband and is now his lawful widow.

Sworn to and subscribed before me
this October 23, 1919.

Arthur R. Maule
C. C. ORDINARY FULTON CO., GA.

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
MRS. FRANCES J. TURNER, who upon oath says:

That she is the widow of A. M. Turner, who was a member of Co. "K", 7th Ga. Reg. and who served as a Confederate Soldier throughout the period of the War; that she has made every effort to locate some member of his company and regiment and has been unable to do so; that she now knows of no living member of said company and regiment and is, therefore, unable to make proof of the service of her husband in the Confederate Army. That said A. M. Turner was on the disabled roll of Fulton Co. and drew a pension of \$50.00 up to 1903, on account of a wound in his left hand.

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

Charles B. Mason
C. C. ORDINARY FULTON CO., GA.

COMMISSIONER OF PENSIONS

C. E. MCGREGOR
STATE CAPITAL
ATLANTA, GA.

STATE OF GEORGIA, PENSION DEPARTMENT,
Atlanta, Georgia, March 21, 1924.

I, C. E. McGregor, Commissioner of Pensions of said State, and custodian of the records and files of the Pension Department of said State, do certify, as follows:

The records of this Department show that pensioner No. 89, was Arch M. Turner, of the County of Fulton, who ranked as a private, of Company K, 7th Georgia Regiment, whose arm was disabled at Mansenus, and who was paid, therefore, a pension of \$50. per annum until his death.

In 1919, Mrs. Frances J. Turner of the County of Fulton, in said State, made application for a pension as the widow of A. M. Turner, and was admitted to the pension rolls of said State for 1920. Attached hereto is certain typewritten matter and a blank form, filled out, which, taken together, constitute a transcript of the application of Mrs. Frances J. Turner.

The application made by Arch M. Turner cannot be found in the files.

Witness my hand and seal of office, the day and year first above written.

COMMISSIONER OF PENSIONS.

Records show, Archibald
J. Turner, private, Co. K 7th
Regt. Ga. Inf. enlisted May 31,
1861. Discharged, disability,
June, 15, 1862. (209)

STATE OF GEORGIA,
County of FULTON.

Personally before the undersigned authority now comes Mrs.
Frances J. Turner, who upon oath says:

That she is the widow of A. M. Turner, who was a member of
Co. K, 7th Ga. Regiment, and who served as a Confederate soldier through-
out the period of the War; that she has made every effort to locate some
member of his Company and Regiment and has been unable to do so; that
she now knows of no living member of said Company and Regiment and is,
therefore, unable to make proof of the service of her husband in the
Confederate Army. That said A. M. Turner was on the Disabled roll of
Fulton County, and drew a pension ~~sum~~ of \$80. up to 1908, on account
of a wound in his left hand.

Mrs. F. J. Turner.

Sworn to and subscribed before me,
this October 28, 1919.
Claude C. Mason,
C. C. Ordinary, Fulton County, Ga.

STATE OF GEORGIA,
County of FULTON.

Personally before the undersigned authority now comes J. W.
Stallings, who upon oath says:

That he knows Mrs. Frances J. Turner and knew her husband,
A. M. Turner; that he knows of his own personal knowledge that the
said Frances J. Turner and the said A. M. Turner lived together as man
and wife continuously for many years before the death of said A. M.
Turner in 1908; that the said Frances J. Turner has not remarried since
the death of her husband and is now his lawful widow.

J. W. Stallings.

Sworn to and subscribed before me,
this October 28, 1919.
Arthur R. Marbut,
C. C. Ordinary, Fulton Co., Ga.

MARRIAGE LICENSE.

State of Georgia, Fulton County.

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

You are hereby authorized and permitted to join in the honor-
able state of Matrimony Mr. A. M. Turner and Miss Fannie Smith, according
to the Rites of your Church, provided there be no lawful cause to obstruct
the same, according to the Constitution and Laws of this State; and for
so doing this shall be your sufficient License.

Return this license, with your certificate thereon, to my office
for record.

Given under my Hand and Seal this 31st day of January, 1870.

Benjamin Pittman, L. S. Ordinary.

I hereby certify that A. M. Turner and Miss Fannie Smith were
joined in the Holy Bands of Matrimony, on the 3rd day of February, 1870,
by me.
Geo. M. Gardner, M. C.

State of Georgia, } s. s.
Fulton County.

ORDINARY'S OFFICE
Atlanta, Ga., October 2nd, 1919.

I, Claude C. Mason, Clerk of Ordinary of said County, hereby
certify that the foregoing is a true copy of the Marriage License and
Certificate of Marriage of A. M. Turner and Miss Fannie Smith, as the
same appears of record in this office.

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

(Seal.)

Claude C. Mason, Clerk Court of Ordinary.

FULTON COUNTY
COURT OF ORDINARY
GEORGIA

(OFFICIAL WAR RECORD:)

Records show, Archibald J. Turner, private, Company K,
Seventh Georgia Regiment, Infantry; enlisted May 31, 1861; discharged,
disability, June 15, 1862.

ATLANTA, GA.

TO HARRY G. POOLE, DR.
"FUNERAL HOME"
88 S. PAVON STREET

PHONE	MAIL	TRU	MAIN	8888	PRIVATE AMBULANCE
July 2 1921	Casket and Box				\$140.00
	Embalming				15.00
	Rate 30.00	Grave 10.00			40.00
	Five cars 47.50	Notices 5.00			\$2.50
	Hearse 10.00	Dray 1.50			11.50

Georgia
Fulton Co. \$259.00

Personally appeared before me Harry G. Poole
who after being sworn says that the above and foregoing
account is rendered for funeral expenses of

Mrs. Frances J. Turner, who died without owning
sufficient property to pay this bill

Sworn and submitted
before me 19 day December
1919. *Claude C. Mason*
Clerk

I, Claude C. Mason, Clerk of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of A. M. Turner and Miss Fannie Smith, as the same appears of record in this Office.

MARRIAGE LICENSE

State of Georgia--Fulton County.

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

You are hereby authorized and permitted to join in the honorable state of Matrimony Mr. A. M. Turner
and Miss Fannie Smith

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

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

Given under my Hand and Seal this 31st day of JANUARY, 1878.

Daniel Pittman L. S.
Ordinary.

I hereby certify that

A. M. Turner

and

Miss Fannie Smith

were joined together in the HOLY BANS OF MATRIMONY
1878

on the 3rd day of February, by me, Geo. E. Gardner, M.C.

State of Georgia,
Fulton County.

ORDINARY'S OFFICE

S. S.

ATLANTA, GA., October 22nd, 1909.

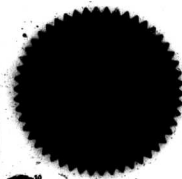
I, CLAUDE C. MASON, Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

A. M. Turner

and Miss Fannie Smith

as the same appears of record in this office.

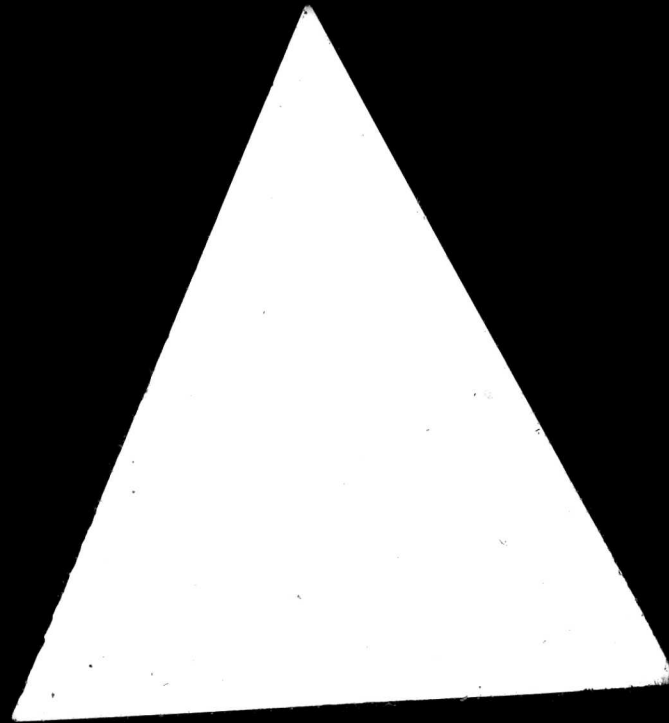
Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.



Claude C. Mason
Clerk Court of Ordinary.

and.....Miss Fannie Smith.....
as the same appears of record in this office.
Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.


Clerk Court of Ordinary.



Pension of for
Parks to which
I person such
a certain of
husband has
will certify
under the law
the grant of this
Pension
J. H. [unclear]
Care of [unclear]

Widow's Pension
1910

No. _____

Widow's Pension
UNDER ACT 1910.

County *Tarrant*

Name *Ida P. Turner*

Widow of *J. H. [unclear]*

J. W. [unclear]
Commissioner of Pensions

J. H. [unclear]
Chief of Special Agents

STATE OF GEORGIA.

...County

1. What is your name, and where do you reside? *Edw. H. Hinton All my life*
 2. How long and since when have you been a continuing resident in the State of Georgia? *W. H. Hinton 1864*
 3. When, where and to whom were you married? *W. H. Hinton 1864*
 4. When, where and in what Company and Regiment did your husband enlist as a soldier in the Confederate Army of Georgia Militia? (State the arms and class of Service.) *Jan 1864*
 5. When and where did your husband surrender or discharge from the army? *Apr 1865*
 6. When and where did your husband surrender or discharge from the army? *Apr 1865*

8. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? *Hospital at Rutland Springs*
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.) *Nothing*

11. What property of any description of any value have you now? *Nothing*
Give list and cash value? *Nothing*

12. What are your annual earnings or income and their source?

13. Have you heretofore been paid a pension by the State?..... *no*
If so, when and for what cause were you struck from the Roll?.....

I swear and subscribed before me this the 2nd day of July, 1908.
Herman Beckman
 Notary Public
 City of San Francisco County.

STATE OF GEORGIA,

County

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

Personally before me comes _____ being duly sworn, true answers to make, to the following questions, answers as follows:
 * He has had brief work as an elevator for 6 months and
expressions, never he enlisted in the 20th Ga. Battalion
for the war

1. What is your name and where do you reside? W.J. Mallard Atlanta
 2. How long and since when have you known Mrs. Lela R. Turner applicant? always
 3. How long and since when has she continuously resided in this State? (Give date.) Born in Iowa and always lived in Ga.
 4. When and to whom was she married? How do you know? to H. R. Korman
 5. How long and since when did you know H. R. Korman husband? since Jan 1861, he enlisted in same
 6. When, where and in what Company and Regiment did H. R. Korman enlist? Jan 1861, 1st Regt. Independent Co. of Heavy Artillery, Richmond, Va.
 7. Were you a member of the same Company yes and did he perform actual military service with his Company and Regiment? yes fought at Gettysburg and other battles
 8. How long within your personal knowledge did he perform actual military service with his Company and Regiment? from 1861 to 1865
 9. When, and where did his Command surrender, and was discharged? at Appomattox, Va. in April 1865
 10. Were you personally present when it was surrendered? yes If not where were you was sent on detachment and how came you there? sent back to Ga. in charge of a company
 11. Was the husband of applicant personally present at surrender? yes If not where was he? at Appomattox, Va. when, where and for what cause did he leave Command? (Give date.) he was discharged By whose authority did he leave his Command? by the commanding officer How long was he granted leave? he was discharged How do you know all this? he was discharged Do you state if of your own personal knowledge? yes State all you know fully, and how you know it.
 12. For what cause, if you know of your own knowledge was he prevented from returning to his Command? he was discharged
 13. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? he was discharged
 Sworn and subscribed before me this the 10th day of Sept 1908
Marcellus M. Harrison Ordinary.
 of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Fulton County.

Personally before me comes A. Hurst who on oath says that they are freeholders of said County and that they know Mrs. Lela R. Turner of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows

Personal property none
 Notes and accounts due none
 Total none

Schedule (B).
 We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:

Personal property none
 Money, Notes and accounts none

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

Acres of land worth none
 Horses and Mules none
 Cows and Hogs none
 Other property none
 Income and earnings none

Total Value of all property and effects none
 Sworn and subscribed before me this the 10th day of Sept 1908
Marcellus M. Harrison Ordinary.
 of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Fulton County.

I, John W. Harrison Ordinary of said County do certify that I know Mrs. Lela R. Turner the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1908.

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

That the Tax Returns yes Returned for Tax is for 1908 \$ none for 1910 \$ none

Sworn under my hand and official seal of office this 10th day of Sept 1908

John W. Harrison Ordinary.
 of Fulton County.

(SEAL.)

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

Total Value of all property and estate
 Sworn and subscribed before me this the 31 day of July 1910
Harrellus A. Harrison Ordinary
Fuller County.

Widow's Application
 UNDER ACT 1910
 Who Lost a Husband During War as a
 Soldier, Remarried and is Now
 a Widow.

County Fuller
 Name John A. Harrison
 Soldier's Name J. H.
 Company
 Regiment
 Name of Last Husband
 Approved
 J. W. LINSEY
 Clerk of Probate
 Chas. P. Bink, State Printer, Atlanta
July 9/10

**Widow's Affidavit--Who Lost Husband--Killed During War and
 Afterwards Married, now a Widow.**

STATE OF GEORGIA,
Fuller County.
 Personally before me came John A. Harrison of said county who after being sworn on oath
 says that she became the lawful wife of John A. Harrison on the day of 29 day of July 1864 and
 that he did on the 19 day of Aug 1864 enlist in Company 1st Regiment of Georgia
 and was on the 19 day of Aug 1864 killed or died as the result of an injury received while
 in line of duty on the 19 day of Aug 1864 leaving this applicant, his widow.
 That on the 5 day of July 1862 she was married to John A. Harrison of
Fuller County, and that on the 31 day of July 1862 in the county
 of Fuller State of Georgia the said John A. Harrison died and that
 this deponent is now a widow.
 That she was on the 4th day of November, 1908 or at the death of her last husband left in the use
 possession and control of the property. Stated in schedule (A)
 acres of land cash value of none
 Horses or mules none
 Hogs and cows and other stock none
 money, notes, etc none
 actual income and savings none

Total nothing
SCHEDULE B.
 That since the 4 of November, 1908 or the death of her husband, she has sold or given away the
 following property of the cash value nothing as follows nothing
 Total value nothing
 and that the proceeds were disposed of nothing

SCHEDULE C.
 That she is now in the use, possession and control of the following property at the cash value attached
 acres of land of the cash value none
 Horses and cows of the cash value none
 Hogs and other stock none
 Cotton and other farm Products, worth none
 Total value of all property nothing
 and that the valuation of all of said property, is stated at its true cash value.
 Subscribed to and subscribed to by me this 10 day of July 1910
John A. Harrison Ordinary. John A. Harrison
Fuller County

**Affidavit of the Witness to the Service and Death of Soldier
 Husband and Her Marriage.**

STATE OF GEORGIA,
Fuller County.
 Personally before me came John A. Harrison after being duly sworn on oath he
 knows John A. Harrison and that he enlisted in Company 1st Regiment of Georgia
 veterans John A. Harrison on the 19 day of Aug 1864
 and that on the 19 day of Aug 1864 he died as a result of an injury received
 while in line of duty as a soldier, in the Confederate army, and that he knows Mrs.
John A. Harrison in North Carolina.

John A. Harrison was killed during the war and she has since married John A. Harrison.

reference to the 19th day of May 1864. On the 19th day of May 1864, the said deceased died as a result of the wounds received while in line of duty as a soldier, in the Confederate army, and that he knows Mrs. Rebecca Young in North Carolina.

Ms. J. P. Young the applicant. She and her said husband were married on the 19th day of May 1864 and that she was his widow at the time of his death. She was married again on the 19th day of May 1864 and that her said husband died on the 19th day of May 1864. She is now a widow and has no other property.

Ms. J. P. Young the applicant to have a writ of habeas corpus. She is now a widow and has no other property.

John P. Young Ordinary. W. J. Young County.

Affidavit of the Witness to the Property and its Value.

STATE OF GEORGIA.

County of Fulton.

Personally before me, W. J. Young, who after being sworn on oath gave that they are Free Holders of said County of Fulton and that they know the said deceased and that she was on the 4th day of November or at the death of her last husband on the 19th day of May 1864 and that he left her in possession of the property of the deceased as follows:

SCHEDULE A.

Lands whose cash value. _____

Horses mules. } Nothing

Cows hogs and other stock. } Nothing

Money, notes and accounts. } Nothing

All other property. _____

Total cash value of all property. _____

SCHEDULE B.

We know that since the 4th November, 1908 or since the death of her last husband she has sold or given away property of the cash value of to-wit:

land worth. _____

Horses and mules. } Nothing

Cows, hogs and stock of all kind. } Nothing

any and all other property. } Nothing

Total cash value. _____

and we know that the proceeds of this property were _____ (its full cash value and was disposed of (State fully.)

SCHEDULE C.

We know that the applicant is now in the use, possession and control of property of the cash value as follows, to-wit:

Land of the cash value of. _____

Horses and mules, cash value of. _____

Cows hogs, and other stock. _____

Wagon and other. _____

Other personal property. _____

Money notes and accounts. _____

Actual income and savings. _____

Total cash value of all property. _____

John P. Young the applicant. She and her said husband were married on the 19th day of May 1864 and that she was his widow at the time of his death. She was married again on the 19th day of May 1864 and that her said husband died on the 19th day of May 1864. She is now a widow and has no other property.

John P. Young Ordinary. W. J. Young County.

RECEIPT FOR CERTIFICATE.

STATE OF GEORGIA.

County of Fulton.

Personally before me, John P. Young, who after being sworn on oath gave that they are Free Holders of said County of Fulton and that they know the said deceased and that she was on the 4th day of November or at the death of her last husband on the 19th day of May 1864 and that he left her in possession of the property of the deceased as follows:

Lands whose cash value. _____

Horses mules. } Nothing

Cows hogs and other stock. } Nothing

Money, notes and accounts. } Nothing

All other property. _____

Total cash value of all property. _____

We know that since the 4th November, 1908 or since the death of her last husband she has sold or given away property of the cash value of to-wit:

land worth. _____

Horses and mules. } Nothing

Cows, hogs and stock of all kind. } Nothing

any and all other property. } Nothing

Total cash value. _____

and we know that the proceeds of this property were _____ (its full cash value and was disposed of (State fully.)

John P. Young Ordinary. W. J. Young County.

SCHEDULE C.

We know that the applicant is now in the use, possession and control of property of the actual cash value as follows, to-wit:

Land of the cash value of _____
 Horses and mules, cash value of _____
 Cows, pigs, and other stock _____
 Wages and money _____
 Other personal property _____
 Money orders and accounts _____
 Actual income and earnings _____
 Total cash value of all property _____

John P. Sullivan
 John P. Sullivan
 Sullivan

Turner, Ida (Mrs.) ✓

For Fulton County

1924

**Application for Pension
 Due Deceased Pensioner**

(UNDER ACT 1904)

(To pay expenses of last illness and funeral)

Two \$50.00 Ordinary

For Ida Turner

Date of Death Feb 7 1924

Amount \$ _____

Approved and ordered paid

[Signature] 1924
 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 pay-rolls to be permanently filed with them. Do not keep this application in your office.

Entered Pd

Application for Pension Due to a Deceased Pensioner.

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

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes
R. H. Brandon of said County, who, after being sworn, on oath
says that he knew Ida Turner of said County, and that said Pensioner
was on the Pension Roll of Fulton County at the
time of death, which occurred in Fulton County, in this
State, on the 7 day of February, 1924, and that
a Pension of One Hundred (\$100.00) Dollars was due pensioner and
unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children
surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted
to the sum of \$168.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

this 30 day of April, 1924.
Arthur R. Mabunt Ordinary
Fulton County
(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos. H. Jeffries Ordinary of said County, do certify
that I personally know R. H. Brandon who is a resident
citizen of said County, and that said person is of truthful and trustworthy character, entitled to
full faith and credit; that I also knew Ida Turner while in life and that this
was the same person whose name appears on the widow's Pension
Roll of Fulton County, and was paid a Pension
of One Hundred (\$100.00) Dollars in said County for 1923
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 6 day of April, 1924.
Thos. H. Jeffries Ordinary
(Seal of Ordinary) Fulton County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and died without leaving sufficient property to pay such expenses. THE WIDOW OF A SOLDIER IF SHE IS LIVING, HAS PRIOR CLAIM OVER THESE EXPENSES, AND MUST MAKE APPLICATION ON YELLOW BLANK.
 - 2nd. Receipt these claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
 - 3rd. Receipting accounts cannot be paid until they are examined with the last illness, just before death when pensioner grew worse to die.
 - 4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms "last illness," "last day," etc., etc.)
- The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without leaving sufficient property to pay this bill."
- 5th. The Ordinary must see to it that each bill is properly itemized in every respect, and properly sworn to, and all attached nearby to this blank, after this blank has been properly completed as indicated.
 - 6th. The completed vouchers—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you in your authority to make the payment.
 - 7th. The Ordinary signs pay roll, as Ordinary, for the pensioner and then delivers the money himself and takes receipt.
 - 8th. Accept no bills for printing until you write the Pension Department, stating the circumstances in very plain detail. Pensioner's children, or children-in-law, must not charge the bill for doing what the law and common decency demand of them.
 - 9th. Return this application, and attached bills, with your final settlement to the Pension Department.
 - 10th. Ordinary should see that the back of this blank, when filled, is filed out.

Estate of Mrs I February 2nd. 1924. 192

To The CO. Dr.



For Mrs Ida B. Turner.

Casket	100.00	Embalming	15.00	115.00
Gloves	2.50	Grave Lining	3.00	5.50
Hearse	12.00	Flower Car	5.00	17.00
Drayage	2.00	Box	12.50	14.50
Limousine	10.00			5.00
Newspaper Notices				168.00

Personally before me came G.H.Brandon, President of
the Barolay & Brandon Co, who upon being duly sworn
states that the above account is just and correct.

Sworn to and subscribed before me this April 29th. 1924.
Ida B. Turner N.P.
Fulton County, Ga.

citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Ida Turner while in life and that this was the same person whose name appears on the widows Pension Roll of Fulton County, and was paid a Pension of One Hundred (\$100.00) Dollars in said County for 192 3 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 6 day of May 192 4
(Seal of Ordinary) Wm. H. Haffner Ordinary
Fulton County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, but not born out of State (more than twelve months, and died without owning sufficient property to pay such amount). THE WIDOW OF A SOLDIER, IF SHE IS LIVING, HAS PRIOR CLAIM OVER THESE EXPENSES AND MUST MAKE AFFIRMATION ON YELLOW BLANK.
- 2nd. Require those claiming expenses of last illness and funeral to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 3rd. Requiring accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.
- 4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms "I am true, etc., unless" etc.)
- "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without owning sufficient property to pay this bill."
- 5th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and if attached mainly to this blank, after this blank has been properly completed as indicated.
- 6th. The completed voucher—this blank and the bill—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you in your authority to make the payment.
- 7th. The Ordinary alone pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipt.
- 8th. Accept no bill for paying until you write the Pension Department, stating the circumstances in very exact detail. Pensioner's children, or children-in-law, must not charge the State for being only what the law and common humanity demand of them.
- 9th. Return this application, and attached bill, with your final settlement to the Pension Department.
- 10th. Ordinary should see that the back of this blank, when filled, is filled out.

Ida Turner N.Y.
Fulton County, Ga.

James J. Smith
1925-1902

No. _____

**INDIGENT PENSION,
1900.**

Name *J B Turner*
County *Fulton*
C. A. Benin
Approved _____ 1900.

JOHN W. LINDBRY,
Commissioner of Prisons.

WARRANT HANDED TO _____

John W. Lindbry, State Prison, W. Va.

1925-1902
1925-1902

in the State of Georgia,
County of _____, State of Georgia,
I, J. W. Lindbry,
Com. of Prisons,

do hereby certify that _____
is a person who is entitled to
an indigent pension.

J. W. Lindbry
J. W. Lindbry

Pension Office - 0-22-1901.

Applicant has not answered
question in note 7. A. A. A. did
not have a family whose he
was out of State. He was
to remain in State. He was
a resident of the State.

STATE OF GEORGIA,
County }
I, _____
do hereby authorize _____
to receive and receipt for the pension allowed, and request that the rent be sent to
_____ day of _____ 1900.
Witness my hand and seal this _____ day of _____ 1900.
Executed in presence of _____ (L. S.)

POWER OF ATTORNEY.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

hereby authorize

of

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

at

by

Witness my hand and seal this

day of

1900.

Executed in presence of

(L. S.)

Penal Code 7-8-1891.
I, J. W. Lindsay,
Com. of Penitentiary,
do hereby certify that
the within is a true and
correct copy of the
original as filed in my
office.

J. W. Lindsay,
Com. of Penitentiary.

INDIGENT PENSION,

1900.

John R. Turner

John W. Lindsay

JOHN W. LINDSAY,

WARRANT RETURNED

Questions for Applicant.

STATE OF GEORGIA,

County.

I, John R. Turner, of said State and County, desiring to avail myself of the Pension Act (Section 1254, Code), hereby submit his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? *John R. Turner Atlanta Ga.*
2. How long and since when have you been a resident of this State? *Since 1876.*
3. When and where were you born? *Dec. 1826, North Carolina.*
4. When and where and in what company and regiment did you enlist or serve? *April 1862, 14th Regt. Ala. Inf., Co. B, 1st Div. 1st Corps, 1st Army, U.S.A.*
5. How long did you remain in such company and regiment? *About 3 yrs. to 6 months.*

6. For how long a period did you discharge regular military duty? *About 12 months.*
7. When, where and under what circumstances were you discharged from service? *Short time before the close of war was supplied as a sutler and as Engineer Co. which was disbanded.*
8. What is your present occupation? *Nothing.*
9. How much can you earn (gross) per annum by your own exertions or labor? *Nothing.*
10. What has been your occupation since 1865? *Nothing. Have been in poverty.*
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? *Age and poverty.*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? *I have been blind since 1865, as a result of an accident when I was in the army. I am blind in my right eye and partially blind in my left eye, which has existed for several years.*
13. What property, effects or income do you possess, and its gross value? *None.*
14. What property, effects or income did you possess in 1861, 1866, 1867, 1868 and 1869, and what disposition, if any, did you make of same? *None.*

15. In what County did you reside during those years, and what property did you then return for taxation? *DeKalb County, Ga.*
16. How were you supported during the years 1868 and 1869? *My children have been supporting me for many years.*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *I do not know. I have never earned anything.*
18. What was your employment during 1868 and 1869? What pay did you receive in each year? *None.*
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? *No family except my wife and 3 children. I have children.*
20. Are you receiving any pension? If so, what amount, and for what disability? *No.*

Sworn to and subscribed before me this the 21 day of Aug. 1900.
John R. Turner, Applicant.
of DeKalb County.

I have been blind since 1865, as a result of an accident when I was in the army. I am blind in my right eye and partially blind in my left eye, which has existed for several years. I have been blind since 1865, as a result of an accident when I was in the army. I am blind in my right eye and partially blind in my left eye, which has existed for several years. I have been blind since 1865, as a result of an accident when I was in the army. I am blind in my right eye and partially blind in my left eye, which has existed for several years.

Every Question MUST Be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

County.

I, G. P. Howard of said State and County, having been presented as a witness in support of the application of John R. Williams for pension under Section 1254, Code, and after being duly sworn true answers to the following questions, depose and answers as follows:

1. What is your name and where do you reside?
G. P. Howard
2. Are you acquainted with John R. Williams the applicant; if so how long have you known him?
Yes. Since 1863
3. Where does he reside, and how long and since when has he been a resident of this State?
Atlanta, Ga. all his life
4. When, where and in what company and regiment did he enlist, and how do you know?
He was with the 1st Georgia Infantry, Co. B, from 1863 to 1865
5. Were you a member of the same company and regiment?
No, but with him
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service?
He was discharged from the service in 1865, and he was with me in the hospital when he was discharged
7. What property, effects or income has the applicant? (Give your means of knowledge).
None
8. What property, effects or income did the applicant possess in 1898, 1897, 1898 and 1899, and what disposition, if any, did he make of same?
had none
9. Has he conveyed away any 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?
Is an cripple & blind
11. Is the applicant unable to support himself by labor of any sort, if so, why?
He is not able to support himself
12. How was he supported during the years 1898 and 1899?
By his children
13. What portion of his support for these two years was derived from his own labor or income?
None
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
I am no doctor and can only say from appearances that he is a cripple & blind
15. What interest have you in the recovery of a pension by this applicant?
None

Sworn to and subscribed before me, this 21 day of January 1900.
G. P. Howard Witness.
John R. Williams Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally came before me D. G. Key and John R. Williams both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully John R. Williams applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: that he was left one eye, right hip joint and left shoulder & shoulder blade which has greatly troubled him in all of which he claims was the result of being shot while in the Confederate States army.

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

Sworn to and subscribed before me this the 21 day of January 1900.
John R. Williams Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, John R. Williams Ordinary in and for said County, hereby certify that the applicant John R. Williams resides in said County, and has been a bona fide resident of this State since the all his life 1891 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 affidavits was read to the applicant and witness before same was signed.
I further certify that the tax-digests of Fullon County show that applicant returned for taxation in his name in 1898 nothing Dollars of property, and in 1899 nothing Dollars of property.
In my opinion the foregoing claim is made in good faith.
Witness my hand and seal of office, this 22 day of January 1900.
John R. Williams Ordinary,
of Fullon County.

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

Sworn to and subscribed before me, this }
 the 21 day of January 1904 }
 John R. Williams Ordinary.

you saw.
 2. Additional affidavits may be attached if blank spaces are insufficient.
 3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

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

by _____ day of _____ 1903.

Witness my hand and seal, this _____ [L. S.]

Executed in presence of _____

Turner, J.B.
Fulton County
 CODE SECTION 1564
 (FOR THOSE ALREADY ENROLLED.)
 No. 1564
 INDIGENT
 SOLDIER'S PENSION
 1903.
 Name *J.B. Turner*
 County *Fulton*
 Co. *A* Regiment *1st*
 WARRANT ISSUED
January 20th 1904
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
18th
No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

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

by _____ day of _____ 1904.

Witness my hand and seal, this _____ [L. S.]

Executed in the presence of _____

Turner, J.B.
Fulton County
 CODE SECTION 1564
 (FOR THOSE ALREADY ENROLLED.)
 No. 136
 INDIGENT
 SOLDIER'S PENSION
 1904.
 Name *J.B. Turner*
 County *Fulton*
 Co. *A* Regiment *1st*
 WARRANT ISSUED
12th
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
18th
No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J. B. Turner 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 full life 1846; that he is 45 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company A, of 1st Regiment of Infantry; that his physical condition is as follows: General debility

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of _____ County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the 10th day of January, 1903. J. B. Turner man Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 20th day of January, 1903.

John P. Wickham Ordinary Fulton County.

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



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J. B. Turner of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of Birth 1846; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company A, of 1st Regiment of Infantry; that his physical condition is as follows: General debility

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Fulton County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the 10th day of JAN 20 1904. J. B. Turner man Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 20th day of January, 1904.



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

John P. Wickham Ordinary Fulton County.

Note.—The blank spaces must be filled.
Note.—A blank should not be attached before January 1st, 1906.
FOURTH DEPT. VICTORIES

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

hereby authorize

I,

of

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

by

WITNESS my hand and seal, this

day of,

1905.

[L. S.]

Executed in the presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, hereby authorize

of

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

by

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

[L. S.]

Executed in the presence of

Turner, J. B.
Turner, J. B.
(FOR THOSE ALREADY ENROLLED.)

No. 17

INDIGENT
SOLDIER'S PENSION
1905.

Name *J. B. Turner*

County *Fulton*

Co. *A. Regiment 1st Tenn.*

WARRANT ISSUED

4/8

1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

C. H. H.

THE FARMER'S NATIONAL BANK AND TRUST CO., GEORGIA, N. Y.

no date

Turner, J. B.
Fulton County

ONE SEVENTH 1905

(FOR THOSE ALREADY ENROLLED.)

No. 48

INDIGENT
SOLDIER'S PENSION
1906.

Name *J. B. Turner*

County *Fulton*

Co. *A. Regiment 1st Tenn.*

WARRANT ISSUED

4/7

1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

C. H. H.

THE FARMER'S NATIONAL BANK AND TRUST CO., GEORGIA, N. Y.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J. B. Turner of Fulton

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18; that he is 28 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Tenn) during the war between the States, and served for the term of 12 mos in Company A, of 1st Regiment of Tenn; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore as a resident of County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this 1st day of Jan, 1906. J. B. Turner Ordinary.

STATE OF GEORGIA,

Fulton County.

I, J. B. Turner Ordinary of said County, do certify that I am well acquainted with J. B. Turner 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 1st day of Jan, 1906.

Ordinary Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears J. B. Turner of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18; that he is 28 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Tenn) during the war between the States, and served for the term of 12 mos in Company A, of 1st Regiment of Tenn; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 1st day of Jan, 1906. J. B. Turner Ordinary.

State of Georgia,

Fulton County.

I, J. B. Turner Ordinary of said County, do certify that I am well acquainted with J. B. Turner 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 1st day of Jan, 1906.

Ordinary Fulton County.

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

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

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

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

[L. S.]

Executed in presence of

*Turner, J. B.
Fulton, Co.*

Commissioner of the
INDIGENT SOLDIER'S PENSION

No. *11*

INDIGENT

SOLDIER'S PENSION

1907.

Name *J. B. Turner*

County *Fulton*

On *11* Regiment *1st*

WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT RETURNED TO

with
On *11* of *11* 1907.

not data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears J. B. Turner of

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18; that he is years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 years in Company A, of 1st Regiment of 3rd Division; that his physical condition is as follows: age & poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the

day of 1st 1907.

Ordinary.

State of Georgia,

Fulton County.

Ordinary of said County,

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

Given under my official signature and seal this

day of 1st 1907.

Ordinary Fulton County.



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

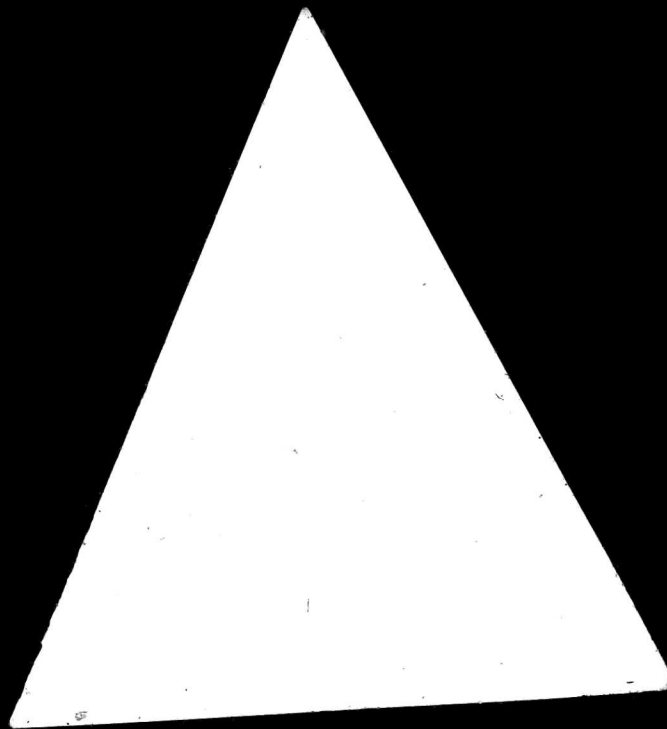
Document as the original application
for pension

Georgia } Before me, J. R. Wilkinson
in } Ordinary of Fulton Co., Ga.
personally appeared J. B.

Turner, the applicant for Pension in
the annexed application, and on
being duly sworn, on oath says that
he was a detailed officer as Conductor
on a train, running for the govern-
ment of the Confederate States in 1864,
and while on duty and in the performance
of duty he was injured in a railroad
wreck, his hip was broken, and his left
shoulder was dislocated, and he is now
a cripple from the injury received then,
and has never been well since he was then
injured; that on several trips to Texas
to visit relatives; first time he remained
one year, second time eleven months
and third and last time, about eight
months; that he was visiting his
daughter and grand-daughters; had
three there, and spent some little time
with each one, my wife remaining
in Georgia while I was away visiting
my daughters in Texas.

sworn to & subscribed J. B. Turner
before me this 26th of 1894
John Wilkinson
Ordinary Fulton Co.

injured; that on several trips to ^{Swain}
to visit relatives, first time he remained
one year, second time eleven months
and third and last time, about eight
months; that he was visiting his
daughter and grand-daughters; had
three there and spent some little time
with each one, my wife remaining
in Georgia while I was away visiting
my daughters in Texas.
Swain too subscribed J.P. his & Turner
before me Dec 26th 1904
John W. Wicks
Ordinary Justice



POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton County, Georgia, Know all Men by these Presents, That I, *George P. Turner*

of *Fulton* County, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *3rd* day of *March* 1891. [L.S.]

Executed in the presence of us,

Large 15/100
M. L. Leavell

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



Turner, Mary (Widow)
Fulton County
244 1891.
To Be Paid C. 1892

No. 2089

Widows' Pension

PAID TO *Mrs. M. P. Turner*
OF *Fulton* COUNTY.

\$100.00.

Warrant Issued

1891
AND HANDLED TO

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

Fulton County.

Know all Men by these Presents, That I,

Morgan P. Turner

of *Fulton*

Payton S. Turner

County, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *2nd* day of *May* 1891.

Morgan P. Turner [L. S.]

Executed in the presence of us,

James B. Smith

W. L. Leachman

if allowed, sept amount by

me at

and oblige,



Warrant Issued

Warrant Issued

Warrant Issued

Fulton County.

Morgan P. Turner

Widow's Pension

No. 2089

1891

Turner Morgan

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Fulton*

In person came before me, the undersigned Ordinary, in and for the County of *Fulton*

Mrs. *M. P. Turner*, who being sworn according to law, says under oath that she is the widow of *Payton S. Turner*, who was a soldier in the service of the Confederate States, and served as a member of Company *C*, of the

44th Regiment of *Georgia* Volunteers; that he enlisted in said service on or about the *20th* day of *March* 1862, and was in the *Confederate* Army up to *May* 25th, 1865. That while in the Army, he was on the *25th* day of *May*, 1862, (See Note No. 1)

wounded in a battle near *Wilmington* in the right leg about the knee. After having his leg amputated, Surgeon took place which caused his death. He died at *Wilmington* on or there about April 19th, 1865.

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the *6th* day of *February* 1862, and that she has resided in Georgia continuously since the *6th* day of *February* 1862; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the

8th day of *April* 1891.

W. L. Leachman Ordinary

Morgan P. Turner

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

Form No. 3.
Certificate of Ordinary of the County of Applicant's Residence.

STATE OF GEORGIA.

County of *Fullton*

I, *W. L. P. Harrison* Ordinary

in and for said County of *Fullton*

State of Georgia, hereby certify that I am acquainted with Mrs. *Margie P. Turner* the applicant for a pension in this case, and know, from my own knowledge, or from positive proof presented to me by reputable witnesses, that she resides in this County, and that she resided in the State of Georgia on December 23d, 1860, 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 proof they sign.

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

29 day of *April* 1891.

W. L. P. Harrison Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows:
Those whose husbands were killed in service.
Those whose husbands died in the army of wounds or disease contracted in the service.
Those whose husbands went to the army and have never been heard from since the war.
Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.

Those whose husbands contracted disease in the service, and who after the war, died of the disease contracted by them in service. The pension does not run during the life of the widow.

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

The law does not provide for a young widow living out of the State of Georgia, or who did not live in the State at the date of her husband's death.

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

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

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

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

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

Fill out the "Address" 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.

Form No. 2.
Affidavit for Three Witnesses.

STATE OF GEORGIA,

County of *Way*

In person came before me, the undersigned Ordinary,

in and for said County, witnesses

G. W. Deems *D. J. Turner* *J. C. Carmichael*
and
(each known to said Attesting Officer as truthful,

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

Mrs. *Margie P. Turner*, of the County of *Fullton*

State of Georgia, is the widow of *Cyrtson S. Turner*, who was a soldier in

Company *A* of the *44* Regiment of *Georgia* Volunteers.

That said soldier enlisted in the service of the Confederate States for the Georgia State Troops, on or

about the *20th* day of *March* 1862. That while in said service, or by

reason of said service in the Army, he lost his life as follows: *Pvt. S. Turner*

was engaged in battle at *Petersburg Va*

a Confederate Soldier on the *20th* day of *March*

1865. Dependent *G. W. Deems* saw him in said

engagement and that from reputation said *Turner*

was wounded and died from said wound.

Dependent *J. C. Carmichael* and *D. J. Turner* deposed

and says that they know that *Pvt. S. Turner*

was in the service as a Confederate

Soldier and that they saw him going into the

engagement on *20th* day of *March* 1865, and that

from information derived from others, he

was wounded in said engagement and died

from said wound. Each of said deponents

says he has never returned.

We further swear that Mrs. *Margie P. Turner* was the wife of said soldier during the service and that she has not intermarried since his death, and that she resides in

County of the State of Georgia.

Sworn to and subscribed before me, this, the

20th day of *April* 1891.

W. H. Harrison Ordinary.

G. W. Deems
D. J. Turner
J. C. Carmichael

who personally know of the enlistment or of the death.

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

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

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

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

Fill out the "direction" below Prover 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.

We further swear that Mrs. *Margie P. Sumner* was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resides in

County of the State of Georgia.

Sworn to and subscribed before me this, the

20th day of April 1891.

Mrs. M. Nelson
Ordinary.

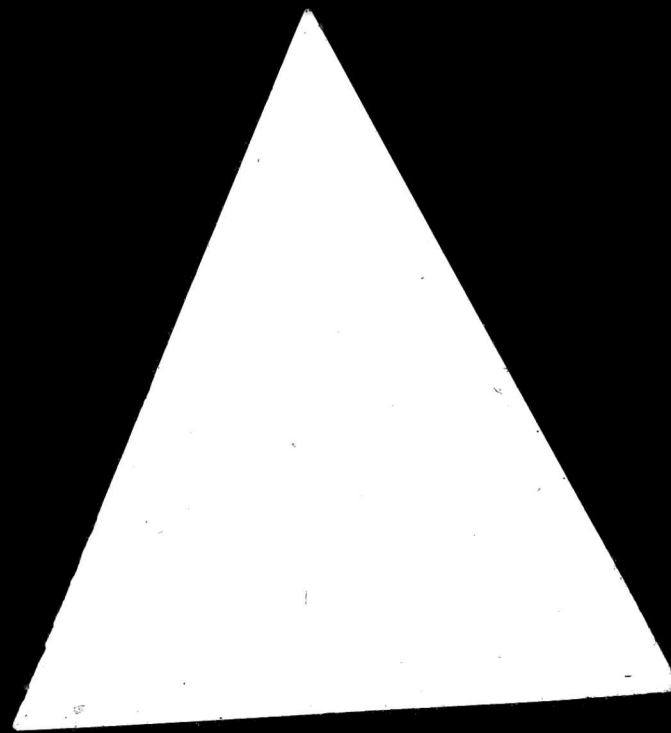
L. E. Weems
D. J. Sumner
J. C. Carmichael

State of Georgia, County of Henry.
I, *Mrs. M. Nelson*, Ordinary
in and for said County of Henry, State
of Georgia, hereby certify, that I have
acquainted with *L. E. Weems*, *D. J. Sumner*
and *J. C. Carmichael* the witnesses to
the application of *Mrs. Margie P. Sumner*
for pension, 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 they are citizens
of Henry County Ga.

In witness whereof I have hereunto set my
hand and affixed the Seal of my Office
this the 24th day of April 1891.

Mrs. M. Nelson
Ordinary

read and affixed the seal of my Co.
this the 31st day of April 1891.
Wm. L. Tolson
Ordinary



Sumner, Martha
Fulton, County

No. _____

**WIDOW'S
INDIGENT PENSION
1903.**

Name *Martha J. Sumner*
County *Fulton*
Widow of *Benny S.*
Co. 2nd Reg. Ala. Heavy Arty.

Approved _____ 1903

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

_____ 1903

Geo. W. Harrison, State Printer, Atlanta.

9/3/03.

SEAL

STATE OF GEORGIA.

POWER OF ATTORNEY.

County: _____

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

Witness my hand this _____ day of _____ 1903.

Executed in presence of _____

Ordinary, _____

County: _____

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, _____ hereby authorize _____
 of _____ County, to receive and receipt for the pension allowed and that he
 remit the same to me at _____ by his check or registered mail.
 Witness my hand this _____ day of _____ 190____
 Executed in presence of _____

Ordinary.

L. S.

County.

Martha Jane Turner
 Name _____
 County _____
 Residence _____
 Approved _____
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO _____
 4/3/03.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

County.

Martha Jane Turner of said State and County, desiring to
 avail herself of the Penalties allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly,
 1900, hereby submits her proofs, and after being duly sworn true answers to make to the
 following questions, depose and swear as follows:
 What your name and where do you reside? (*Give State, County and Post-office*)
Martha Jane Turner, near Atlanta, Ga.

- How long and since when have you been a resident of this State?
all my life - nearly four years
- When and where were you born?
born 11/4/1838 Putnam County, Ga. and
- When and where was your husband born - state his full name, and when were you and he married?
born 11/4/1838 Putnam County, Ga. May 16th 1840
- Attach copy marriage license in every case.
Martha Jane Turner, Missed from 1840 to 1842
- When and where, and in what Company and Regiment did your husband enlist or serve during the
 war between the States?
Company "B" 8th Georgia Cavalry - enlisted in April 1864
- How long did your husband serve in said Company and Regiment?
About one year
- When and where did your husband's Company and Regiment surrender and was discharged?
At Macon, Ga. about April 15th 1865
- Was your husband present at the time and place when his Company and Regiment surrendered?
Yes
- If not with his command at surrender, state clearly and specifically where he was, when he left com-
 mand, for what cause, and by what authority?
He was granted a 20 day furlough, for what cause, and by what authority? He was granted a 20 day furlough, for what cause, and by what authority? He was granted a 20 day furlough, for what cause, and by what authority?
- When and where did your husband die?
At Macon, Ga. March 2nd 1903
- Which of the following grounds do you base your application for Pension, viz.: First - Age and
 Poverty; Second - Infirmary and Poverty; or Third - Blindness and Poverty?
Age and Poverty - infirmity and poverty - and partial blindness
- If upon the first ground, state how long you have been in such a condition that you cannot earn
 your support. 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?
He was granted a 20 day furlough, for what cause, and by what authority? He was granted a 20 day furlough, for what cause, and by what authority? He was granted a 20 day furlough, for what cause, and by what authority?
- What has been your occupation since your husband's death?
nothing
- How much can you earn from, by your own exertion or labor?
nothing
- What property, real or personal, or income do you have or possess, and its gross value?
nothing
- What property, real or personal, did you possess at death of husband or he left you, and of the
 years 1899, 1900, 1901, and what disposition, if any, by sale or gift, have you made of the same?
nothing
- What county did you reside in 1899, 1900, 1901 and 1902, and what property did you reside in
 taxation?
nothing
- How have you been supported since death of husband, and especially for 1899, 1900, 1901 and 1902?
nothing
- How much did your support cost for each of those years, and how much did you contribute by your
 own labor or income?
nothing
- What was your employment during 1899, 1900, 1901 and 1902 - how much did you receive for each
 year?
nothing
- Have you a family? If so, who composes such family? Give their means of support? Have they
 any lands or other property?
nothing
- Have you ever made application for pension before?
nothing
- How many applications have you made for a Pension, and under what class?
nothing

Subscribed and sworn before me this _____ day of _____ 190____
Martha Jane Turner
 or _____ County.

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,

Subject John W. Wilson County Fulton

JO Brumback of said State and County, having been presented as a witness in support of the Application of Mrs. Maria Jane Wilson for a Pension under the Act of 1900, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? J. O. Brumback and I reside at Jackson, Bolivar Co. Ga.
2. Are you acquainted with the applicant, Mrs. Maria Jane Wilson? yes
3. If so, how long have you known her? since 1864
4. Where does she reside, and how long and since when has she been a resident of this State? she resides in Fulton Co. Ga. - they resided in 1864 to 1868
5. When and where was she born? 20 yrs. Texas
6. Were you ever acquainted with her husband? yes
7. Where did she reside in 1861? in Bolivar Co. Ga.
8. When and to whom was he married? Betty S. Wilson in 1864
9. When and where was he born? do not know
10. How long have you known him? 4 yrs.
11. When and where did Betty S. Wilson enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? in Bolivar Co. Ga. - in April 1864 - in Co. B - 55th Ga. Inf. - was number 1 of same

12. How long did he perform regular military duty? about one year
13. When and where was his Company and Regiment surrendered and discharged from service? at Meridian, Ga. in April 1865
14. Were you with the Command when it surrendered? yes
15. Was B. S. Wilson the husband of applicant present? no
16. If not present, where was he? off on Burlington
17. When and where did he leave his command? near Augusta, Ga. in April 1865
18. For what cause? on Burlington
19. By whose authority he left? Commissioning Officer
20. How do you know all this? (State fully and clearly.) was the member of the same Company and was present when Burlington was paroled
21. When and where did Betty S. Wilson die? March 1903. at Atlanta, Ga.
22. Where did he reside at his death and how long had he been a resident of Georgia at his death? Atlanta, Ga. - had resided in Ga. all her life
23. Do you of your own knowledge know that applicant is the lawful widow of Betty S. Wilson? yes
24. Has she remained unmarried since her soldier husband's death, and is now his widow?

25. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? nothing
26. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what disposition did she make of it? nothing
27. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? nothing
28. What is applicant's physical condition and her chances and ability to earn a support? she is unable to do any work

29. Is applicant able to earn a support at labor of any sort, if not, why? no
 30. How was he supported for 1899, 1900, 1901 and 1902? nothing
 31. How much did applicant contribute to her support for last two years? nothing
 32. Give a full and complete statement of applicant's physical condition? she is unable to do any work
 33. What interest have you in the recovery of this pension by the applicant? none
- Sworn to and subscribed before me this 10th day of July, 1903
John W. Wilson Ordinary,
Fulton County, Georgia Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

County Fulton
Personally before me, Chas. H. Wilson M.D. and M. H. Throckmold, both known to me to be reputable Physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. Maria Jane Wilson, applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this: Physically she is very infirm from age, her eyesight is very poor, she has no power, is a nervous case, and has been a long time under her medical care, and we have no interest in said pension if allowed.
Sworn to and subscribed before me this 10th day of July, 1903
John W. Wilson Ordinary,
Fulton County, Georgia Witnesses.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County Fulton
I, John W. Wilson Ordinary, in and for said County, hereby certify that the applicant, Mrs. Maria Jane Wilson, resides in said County, and has been a bona fide resident of this State since the 11th day of Nov, 1898, and that the witnesses, Mr. JO Brumback and JO Wilson are of trustworthy character, and that their statements are entitled to full faith and credit.
I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same was signed and subscribed.
I further certify that the tax digest of Fulton County shows that applicant returned for taxation in her own name in 1899 _____ dollars worth of property, and in 1900 _____ dollars worth of property, and in 1901 _____ dollars worth of property, and in 1902 _____ dollars worth of property.
Witness my hand and official seal this 10th day of July, 1903
John W. Wilson Ordinary,
Fulton County, Georgia

SEAL

- Notes.—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are furnished.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 24 April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

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

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA.

Northfield County.

E. W. Hamilton of said State and County, having been presented as a witness in support of the Application of Mrs. Berry Turner for a Pension under the Act of 1900, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? E. W. Hamilton
Salmon Whitfield Co. Ga.
2. Are you acquainted with the applicant, Mrs. Berry Turner? yes
3. How long have you known her? Since 1864
4. Where does she reside, and how long and since when has she been a resident of this State? Atlanta Ga. has resided in Ga. I think all her life
5. When and where was she born? Don't know
6. Were you ever acquainted with her husband? Yes
7. Where did she reside in 1861? In Battle Station Ga.
8. When and to whom was he married? Berry Turner I think 1864
9. When and where was he born? Don't know
10. How long have you known him? about one year with him in Confederate Army
11. When and where did Berry Turner enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? In Battle Co. Co. Company & 1st Regt. Georgia Reserve organized in Macon April 1864
12. How long did he perform regular military duty? One year - until
13. When and where was his Company and Regiment surrendered and discharged from service? Macon Ga. April 1865
14. Were you with the Company when it surrendered? no
15. Was Berry Turner the husband of applicant present? no
16. If not present, where was he? at home in Burlington
17. When and where did he leave his command? April 1865 near Augusta Ga.
18. For what cause? Burlington
19. By whose authority he left? his commanding officer
20. How do you know all this? (State fully and clearly.) Berry Turner and I were a full year at same time and place together, and I saw him when Burlington was surrendered
21. When and where did Berry Turner die? in Atlanta Ga.
22. Where did he reside at his death and how long had he been a resident of Georgia at his death? Atlanta all his life
23. Do you of your own knowledge know that applicant is the lawful widow of Berry Turner? yes
24. Has she remained unmarried since her soldier husband's death, and is now his widow? yes
25. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? I don't know
26. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what disposition did she make of it? Don't know
27. Has applicant conveyed any property in last two years or given away, if so, what was it, and to whom? Don't know
28. What is applicant's physical condition and her chances and ability to earn a support? she is very old & feeble

2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 9th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

26. Is applicant able to earn a support at labor of any sort, if not, why? No on account of age

27. How was he supported for 1899, 1900, 1901 and 1902? Don't know

28. How much did applicant contribute to her support for last two years? Don't know

29. Give a full and complete statement of applicant's physical condition? she is quite old & feeble

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

Sworn to and subscribed before me this 27 day of July 1905 } E. W. Hamilton
Ordinary, }
County. } Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally before me comes _____ and _____ both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. _____ applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this _____

and we have no interest in said pension if allowed

Sworn to and subscribed before me this _____ day of _____ 190 _____
Ordinary,
County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, _____ Ordinary, in and for said County, hereby certify that the applicant, Mrs. _____ resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 18____, and that the witnesses, Mr. _____ are of trustworthy character, and that their statements are entitled to full faith and credit. I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same were signed and subscribed. I further certify that the tax digest of _____ County shows that applicant returned for taxation in her own name in 1899 _____ dollars worth of property, and in 1900 _____ dollars worth of property, and in 1901 _____ dollars worth of property, and in 1902 _____ dollars worth of property. Witness my hand and official seal this _____ day of _____ 190____.

REAL

Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God." Additional affidavits may be attached, if blank spaces are insufficient. All affidavits must be made before Ordinary. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 9th April, 1865, not entitled. Witnesses and two Physicians are necessary to make out claims. Attach certified copy marriage license in every case, or show why it cannot be obtained.

whom?

25. What is applicant's physical condition, and her chances and ability to earn a support?
she needs my old feeble

2. Additional affidavit may be attached, if under special circumstances.
 3. All affidavits must be made before Ordinary.
 4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 8th April, 1865, not entitled.
 5. Witnesses and two Physicians are necessary to make out claims.
 6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

herby 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

1904

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize

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

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

day of _____ 1907.

[L. S.]

Executed in presence of

Turner, Martha
John W. Lindsey
 TO THOSE HERETOFORE PAID.

1904.

1114

INDIGENT
 WIDOW'S PENSION
 FOR YEAR ENDING DECEMBER 31, 1904

Martha Lindsey
 Widow of *B. C.*
 Co. *3* *Regt.*
 JOHN W. LINDSEY,
 Commissioner of Pensions

County.

WARRANT ISSUED
 AND HANDLED TO
 1114
 1904

OFF.

Geo. W. Lindsey, State Printer, Atlanta.

Turner, Martha
John W. Lindsey

To Those Heretofore Paid.

1907.

No. 29

INDIGENT
 WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO *Martha Lindsey*

OR

County.

Widow of

Co.

Regiment.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO

1114 1907.

OFF.

Geo. W. Lindsey, State Printer, Atlanta.

Form No. 2. FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.
County of Fulton.

PERSONALLY COMES MRS.

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since Bertha. That she is the Widow of B. S. Turner who was a soldier in Company E of the Ord Regiment of the 1st Regt. Volunteers, that he enlisted in said regiment on or about the month of April 1864 and served in the Army up to 1 year That he died on the 2nd day of April 1865.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as an soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1864 Jan. 2.

I have been allowed an Indigent pension as a resident of Fulton County under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me

this 22 day of JAN 1904.

John R. Wilkinson Ordinary.

Mrs. Martha J. Turner Post Office St. Louis

State of Georgia,
Fulton County.

John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. M. J. Turner 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 Jan 1864.

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

John R. Wilkinson Ordinary of Fulton County.

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

Form No. 1 FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES MRS.

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since 1838. That she is the Widow of Berry S. Turner who was a soldier in Company of the Regiment of Volunteers, that he enlisted in said regiment on or about the month of 1865 and served in the Army up to 1865 That he died on the 19th day of April.

after passing

No record given

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1864.

I have been allowed an Indigent pension as a resident of Dodge 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 22 day of JAN 1907.

John R. Wilkinson Ordinary.

Martha J. Turner Post Office St. Louis

State of Georgia,
Fulton County.

John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. Martha J. Turner 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 1838.

Given under my official signature and seal, this 22 day of JAN 1907.

John R. Wilkinson Ordinary of Fulton County.

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

Sworn to & sealed under before
me this 1st day of August 1903. } J. W. Moore
John R. Wilkinson }
Clerk }
Clerk }

Georgia, Burke County

I certify that the within is a true copy
of the record of the marriage of Barry & Sumner
and Martha Jane Butler as found in my office
this 14th day of June, 1906 J. H. Williams
Ordinary

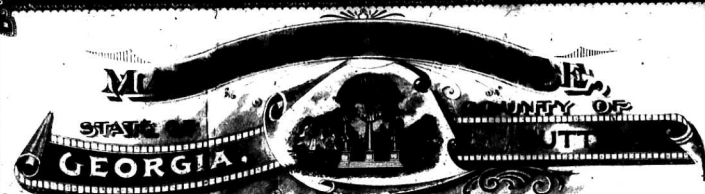
MARRIAGE LICENSE
OF
Burke County
AND
Issued and recorded on this 14th day of June, 1906
J. H. Williams
Ordinary

Georgia, Lodge County.

I the undersigned do certify that Mattha J. Turner now of the
County of Fulton is the same person who as Indigent Widow
pensioner was on the pension rolls of this county, and drew a pension of
sixty dollars for 1905, and the bearer is same ^{two} man.

Given under my hand and official seal of office Dec 14 1906
A. J. Williamson [L.S.]
Ordinary Dodge

SEAL



TO ANY JUDGE OF THE PEACE OR MINISTER OF THE GOSPEL.

Mr Berry & Turner You are hereby authorized to join
and *Miss Martha Jane Britton*
in the Holy State of Matrimony according to the Constitution and
Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me with your
Certificate hereon of the fact and date of the Marriage.
Given under my hand and seal this *12th* day of
January 1864 *Wm. R. Bankston* (L.S.)
Ordinary

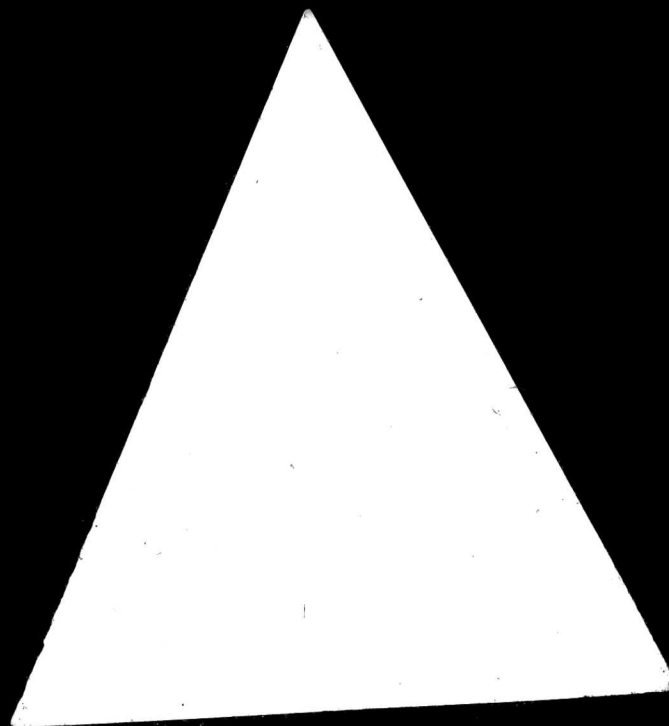
State of Georgia.

CERTIFICATE

County of Butts.

I Certify that *Mr Berry & Turner* and *Miss Martha Jane Britton*
were joined in Matrimony by me this *12th* day of *January* *Eighteen* Hundred
and *Sixty Four*.
Alex. Saunders J.P. *Wiley Goodman* Ordinary

were joined in Matrimony by me this 1st day of February 1910
and Sixty Four.
Recorded
Alex Sanders J.P. Wiley Goodman
Ordinary.
TERRY & DAVIS CO. ALBERTA



61 15 May 21
Turner, Peter
No. Fulton 3

20 March 1899
INDIGENT PENSION
1898.

Name Peter Turner

County Fulton
Removal to Carroll

Approved 6/19/56 1898.
RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

W. H. HARRISON, STATE ARCHIVER, ALBANY.

42898

POWER OF ATTORNEY.
STATE OF GEORGIA,
Fulton COUNTY
I, Peter Turner of Fulton County
do hereby certify that the within and foregoing is a true and correct copy of the original as the same appears in my possession and control.
Witness my hand and seal this 15 day of May 1898.
Respected in presence of
James H. Jones
John H. Jones
Fulton - Ga

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton County.

I, Peter Turner, hereby authorize

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

at any time by James day of May 1898.

Witness my hand and seal this

Executed in presence of Peter Turner [L.S.]

James
Turner

Questions for Applicant.

STATE OF GEORGIA.

Fulton County.

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

1. What is your name and where do you reside? (give State, County and post office.)
Peter Turner Fulton Co Atlanta Ga

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

3. When and where were you born? July 27 - 1834

4. When and where and in what company and regiment did you enlist or serve? 13th Va Regt. 1st Volunteer Co. May 1861

5. How long did you remain in such company and regiment? 1861

6. For how long a period did you discharge regular military duty? Three Years

7. When, where and under what circumstances were you discharged from service? May 1864 Appomattox C H Va at the Surrender

8. What is your present occupation? No regular occupation

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

10. What has been your occupation since 1865? Farm work

11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"?

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? Very little

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 and 1897 and what disposition, if any, did you make of same? None

15. In what County did you reside during those years and what property did you then return for taxation? Barrelled - no property

16. How were you supported during the years 1896 and 1897? By my children

17. How much did your support cost for each of those years and what portion did you contribute thereto by your own labor or income? I cannot tell - not much could I do

18. What was your employment during 1896 and 1897? What pay did you receive in each year? Working on farm - very little received

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

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

Sworn to and subscribed before me this 28 day of May 1898.

James Ordinary.

of Fulton County.

Every Question MUST be Answered

68 15 May St
Turner, C. H.
No. Fulton Co
Is sworn 1898
INDIGENT PENSION
1898.
Name Peter Turner
County Fulton
Turner & Carrell
Approved 56
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT HANDED TO
42898

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Fulton County.

E. S. Sweet of said State and County, having been presented as a witness in support of the application of Peter Turner for pension 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 name and where do you reside?
2. Are you acquainted with Peter Turner, the applicant, if so how long have you known him? all my life
3. Where does he reside, and how long and since when has he been a resident of this State? Fulton Co and more lived out of the State
4. When, where and in what company and regiment did he enlist, and how do you know? St. Army
5. Were you a member of the same company and regiment? yes
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Three years
7. What property, effects or income has the applicant? (Give your means of knowledge.) none
8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? none
9. Has he conveyed away any of his property in the last three years, if so, what was it and to whom? no
10. What is the applicant's occupation and physical condition? He has worked some
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is not able to do work sufficient to raise a living
12. How was he supported during the years 1896 and 1897? By his children
13. What portion of his support for these two years was derived from his own labor or income? very little
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 complains of his heart throbbing and weakness and his left arm is stiff - I was with him when it was broken
15. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this 28 day of Jan 1898. E. S. Sweet Witness. M. H. H. H. Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me W. H. Parker and J. H. H. H., both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully Peter Turner, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

He is old and feeble. He has disease of the heart and has a stiff arm (his left) which has been broken at the elbow.

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 28 day of Jan 1898. W. H. Parker Ordinary. J. H. H. H.

ORDINARYS' CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, M. H. H. H., Ordinary in and for said County, hereby certify that the applicant Peter Turner resides in said County, and has been a bona fide resident of this State since the all his life day of 1894, and that the witnesses, viz: E. S. Sweet and W. H. Parker are of trust worthy character and that their statements are entitled to full faith and credit. I further certify that before answering the foregoing questions, the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1896 none Dollars of property, and in 1897 none Dollars of property.

In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this 28 day of Jan 1898. M. H. H. H. Ordinary of Fulton County.

NOTE.

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

11. Is the applicant unable to support himself by labor of any sort, if so, why? *He is not able to do much sufficient to earn a living support*
12. How was he supported during the years 1896 and 1897? *By his children*
13. What portion of his support for these two years was derived from his own labor or income? *very little*
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 16th, 1894? *He complains of his heart throbbing and weakness and his left arm is stiff - I was with him when it was broken*
15. What interest have you in the recovery of a pension by this applicant? *none*

Sworn to and subscribed before me, this
the *28* day of *May* 1898.

E. S. Sweet
Witness.

W. M. H. H. H. Ordinary.

and that the witnesses, viz.: *E. S. Sweet*
W. M. H. H. H.
are of trust worthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of *Fulton* County show that applicant returned for taxation in his name in 1896 *none* Dollars
of property, and in 1897 *none* Dollars of property.

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

Witness my hand and seal of office, this *28th* day of *May* 1898

W. M. H. H. H. Ordinary
of *Fulton* County.

NOTE.

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

Fullon County
261- No. *124* *on 12/06*

INDIGENT PENSION.
1908.

Name *Thomas Charnes*
County *Fullon*
Co. *A 6th Ga* Regt.
Approved *1906* 1906

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Gen. W. Harrison, State Printer, 1906

Fullon County
261- No. *124* *on 12/06*
It is the duty of the Ordinary to see that the pension is paid to the person entitled to it. It is the duty of the Ordinary to see that the pension is paid to the person entitled to it. It is the duty of the Ordinary to see that the pension is paid to the person entitled to it.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Gen. W. Harrison, State Printer, 1906

POWER OF ATTORNEY.
STATE OF GEORGIA,
County, }

do hereby authorize _____
of _____
to execute and receipt for the pension allowed and request that he remit same to _____
by _____ day of _____ 1908.
Witness my hand and seal, this _____ day of _____ 1908.
[L.S.]
Executed in the presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____ day of _____ 1903.

Witness my hand and seal, this _____ day of _____ 1903.

Executed in the presence of _____

Pension Office, 10/1/04.

Not an aged man. Infirmary has been shown to me such that he cannot by ordinary effort earn his support at a kind of labor or calling. *Long* it is difficult to know who owns the \$3,000 home and lot. *My family* person of W. Lindsey. Com. of Pensions.

INDIGENT PENSION.

1903.

Name *Thomas C. Turner*

County *Hutton*

Age *6th Apr*

Approved *1903*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write Name of Applicant, County and Regiment on back of Indigent above.

173/104

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Hutton COUNTY.

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

1. What is your name and where do you reside? *(give State, County and post office)*
Thomas C. Turner Atlanta, Hutton Co Ga.
2. How long and since when have you been resident of this State?
All my life since Birth.
3. When and where were you born?
Spauld Georgia Dec 5th 1842.
4. When and where and in what company and regiment did you enlist or serve?
Spring 1861 Spauld Georgia (served 28th May 1861 at Sidney Brown Infantry, Co. D) Ga Co. 1861
5. How long did you remain in such company and regiment?
During the entire term of the war between the States from 29th May 1861, till the fall of 1865.
6. When and where was your company and regiment surrendered and discharged?
After Battle of Bentonville. Has forgotten exact date.
7. Were you present with your company and regiment when it was surrendered? *Yes*
8. If not present, state specifically and clearly when you were, when you left your command, for what cause and by whose authority?
Was sent to Greensboro sick by Dr. George H. Hargrave a few days before the fall of Bentonville.
9. How much can you earn (gross) per annum by your own exertions or labor?
Not enough to support my family.
10. What has been your occupation since 1865?
Farmer, Merchant. Agent for various things.
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? *Infirmary and poverty.*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
I suffer from kidney disease, which incapacitates me to any work which requires much effort on my part. (See Physician's Affidavit)
13. What property, real and personal, or income, do you possess, and its gross value?
Have no property except furniture for one room.
14. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868, 1869, 1900, 1901 and 1902; and what disposition, if any, by sale or gift, have you made of same?
Have had none to dispose of except furniture mentioned above.
15. In what County did you reside during those years, and what property did you then return for taxation?
Hutton County. Had no property except furniture mentioned above.
16. How were you supported during the years 1864, 1865, 1866, 1867, 1868, 1869, 1900, 1901 and 1902?
For various insurance companies, as well as collector.
17. How much did your support cost for each of those years, and what portion did you contribute toward your own labor or income?
My family support cost about 300 per year.
18. What was your employment during 1868, 1869, 1901 and 1902? What pay did you receive in each year?
Was a collector. Very poor pay, almost nothing.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed?
Have wife (4) four grown daughters (4) and three sons - all grown. Have homestead and are well cared for from their Mother's Father.
20. Are you receiving any pension? If so, what amount and for what disability?
Have never received a pension for any cause.
21. Have you ever made an application for pension before?
Have not.
22. How many applications have you ever made and under what claim?
Made no application under no claim.

Sworn to and subscribed before me this the _____ day of _____ 1903.
John W. Lindsey Ordinary,
of *Hutton* County.

Every question MUST be answered.

INDIGENT 19
Name: Wm. R. Ridd
County: Way
Age: 62
Occupation: Retired
Approved: JOHN
WARRANT

Sworn to and subscribed before me, this 13th day of Dec, 1903.
John R. Wilkinson Ordinary,
of Fulton County.

I, Wm. Ridd, Ordinary in said County, do hereby certify that the within Wm. Ridd is a poor, indigent, and unable to support himself, and is entitled to a pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Way County.

E. P. Barnett of said State and County, having been presented as a witness in support of the application of Thomas R. Turner for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Edmund D. Dargatz
2. Are you acquainted with Thomas R. Turner, the applicant; if so, how long have you known him? Since 1861
3. Where does he reside, and how long and since when has he been a resident of this State? Atlanta Ga. Since birth
4. When, where and in what company and regiment did he enlist, and how do you know? Spring 1861. 1st Regt. Conn. Infan. I was one of Co.
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? During Civil War
7. When and where was his command surrendered? near Greensboro N.C.
8. Were you present when it surrendered? I was
9. Was applicant present? See Applicant's answers
10. If he was not present, where was he? See Applicant's answers

When did he leave his command? See Applicant's answers
By what authority he left? See Applicant's answers
How do you know all of this?

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 1890, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort, if so, why? See Applicant's answers
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? See Applicant's answers
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
19. Who composes family? What property have they? Children's age and their earning capacity?
20. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this 13th day of Dec, 1903.
Wm. Ridd Ordinary, E. P. Barnett Witness,
Way County, 1st Regt. Conn. Infan.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me John R. Wilkinson, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Thomas R. Turner, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

We find that he is suffering with Rheumatism and Arterial trouble all from Chronic inflammation of Kidney, rendering him unable to make his living at any kind of labor what ever.
and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this 13th day of Dec, 1903.
John R. Wilkinson Ordinary, John R. Wilkinson Witness.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary, in and for said County, hereby certify that the applicant Thomas R. Turner resides in said County, and has been a bona fide resident of this State since the 13th day of Dec, 1899, and that the witnesses, viz: John W. Thomas

are of trustworthy character, and that their statements are entitled to full faith and credit.
I further certify that before answering the foregoing questions the applicant and each witness took the oath herein prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.
I further certify that the tax digest of Way County shows that applicant returned for taxation in his name in 1899 None Dollars of property, and in 1900 None Dollars of property, in 1901 None Dollars of property, in 1902 None Dollars of property.

In my opinion the foregoing claim is True made in good faith.
Witness my hand and seal of office, this 13th day of Dec, 1903.
John R. Wilkinson Ordinary,
of Fulton County.

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
2. 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.

Georgia
Harris

1906 day of Dec. 1906. J. C. Turner, Ordinary.
J. C. Turner, Ordinary.

1907 day of Jan. 1907. J. C. Turner, Ordinary.
I certify that Cal. Davis is Thomas C. Turner's son and his solemnly
and admitted to full credit as such; J. C. Turner, Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

WITNESS my hand and seal, this _____ day of _____ 1906.
[L. S.]

Executed in the presence of _____

Turner, Thomas C.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

No. 308

INDIGENT
SOLDIER'S PENSION
1906.

Name: Thomas C. Turner
County: Fulton
Co. D. Regiment 6th Ga.

WARRANT ISSUED

1/2 1906

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

J. C. Turner

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

WITNESS my hand and seal, this _____ day of _____ 1907.
[L. S.]

Executed in presence of _____

Turner, Thomas C.
Fulton Co.

(FOR THOSE ALREADY ENROLLED.)

No. 296

INDIGENT
SOLDIER'S PENSION
1907.

Name: Thomas C. Turner
County: Fulton
Co. D. Regiment 6th Ga.

WARRANT ISSUED

1/2 1907

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

J. C. Turner

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears Thos. C. Turner 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 _____, 1842, that he is 64 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs. in Company A, of 6th Regiment of Cal.; that his physical condition is as follows: infirmary and poverty

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act approved December 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 1906.

Sworn to and subscribed before me, this the _____ day of JAN, 1906. Thos. C. Turner Ordinary.

State of Georgia,

Fulton County.

I, John R. Williamson Ordinary of said County, do certify that I am well acquainted with Thos. C. Turner 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, 1906 day of _____, 1906.

John R. Williamson Ordinary Fulton County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears Thos. C. Turner of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____, 1842, that he is 64 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs. in Company A, of 6th Regiment of Cal.; that his physical condition is as follows: infirmary & poverty

that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the _____ day of _____, 1907. Thos. C. Turner Ordinary.

State of Georgia,

Fulton County.

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

Given under my official signature and seal this _____ day of _____, 1907.

John R. Williamson Ordinary Fulton County.



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

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 hereby the individual he represents himself
to be, and that he resides in this County.

Given under my official signature and seal, this JAN 6 1906
day of _____ 1906.



John R. H. H. H.
Ordinary Fulton County.

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

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

Given under my official signature and seal this _____
day of _____ 1907.



J. R. H. H. H.
Ordinary Fulton County.

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

STATE OF GEORGIA.
ADJUTANT GENERAL'S OFFICE.
ATLANTA.
OFFICIAL.

Atlanta, Ga. Jan. 8th 1907

*I hereby certify that the bearer
Thos C Turner was a member of
Co A. 6th Regt. Infantry, Georgia - C.S.A.
I know him to have been a brave
faithful soldier, having served from
the day the Regiment was mustered
in to the service, until the Surrender*

*E. H. Harris
Capt - 6th Regt. Inf. C.S.A.*

STATE OF GEORGIA
COUNTY OF FULTON

Personally before me came Thomas C. Turner, who
on oath says that on the 13th. day of December, 1903, he made an
application for pension, under the pension laws of Georgia. In the
application for the same, the question was asked him, how was he sup-
ported during the years 1899, 1900, 1901, and 1902, and how much de-
pendent's support cost for each of those years, and what portion did
dependent contribute thereto by his own labor.

Dependent says that in answering these question, he did not
intend to convey the idea that he was, at the time the application for
pension was made, able to do what he had done in those years. Dependent
says that his health, in consequence of his kidney trouble, has mate-
rially changed and gotten worse, since the years referred to, and that
at the date of his application, filed with the Commissioner of Pensions,
he was unable to make his living at any kind of labor whatever, and is
at present unable to do so.

Thomas C. Turner

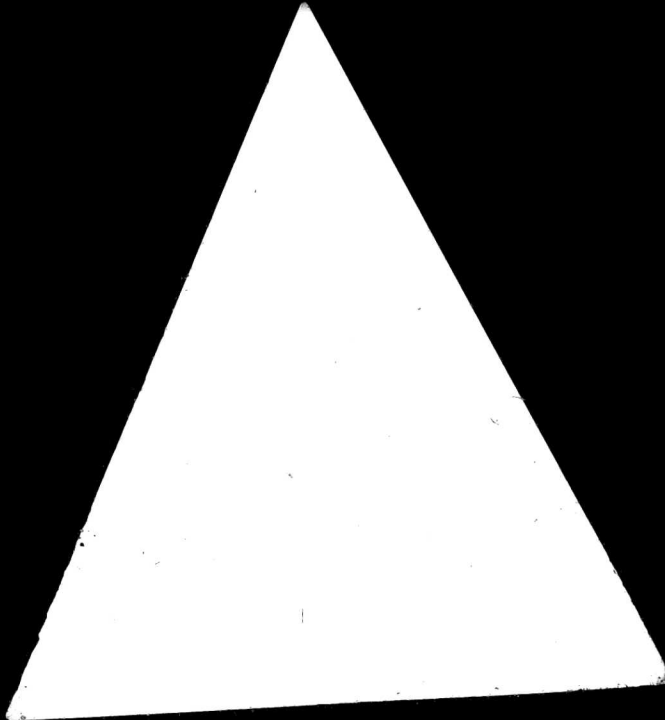
Sworn to and subscribed
before me, this 19th. day of
December, 1904.

John R. H. H. H.
Ordinary

E. W. Strain
Ex - Col - 6th Va Regt - C.S.A.

Sworn to and subscribed
before me, this 19th. day of
December, 1904.

John W. Strain
Ordinary



7-11-13
7-11-13

0

No.

Widow's Application

To Be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910.

County *Cullman*

Name *M. P. D. Linner*

Widow of *J. B. Linner*

Company *A. B. Co.*

Approved

J. W. LINDSEY.

Commissioner of Pensions

CHAS. P. BYRD, State Printer, Alabama.

10/18-1913

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Fulton County.

Personally before me comes Mrs. J. C. Garner of said County, who, after being duly sworn, on oath says, that she is the widow of Thomas C. Garner to whom in the County of Fulton State of Ga she was married on the 7th day of Aug 1867 and that she remained his wife, and resided with him to the date of his death in Aug 20 1870 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, Ga. said State of Georgia, and he was on the Vol Pension Roll of the State and paid a pension of \$ 60.00 in Fulton County for 10 1/2 per annum on account of being a soldier in Company C Regiment 6th (Volunteers of State Militia).

At the death of J. C. Garner he was in the use and possession of the following property:

of the cash value of \$ 1100.00
What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully) 1 life estate in 400 Acres of State Ga
Acres land. 1100.00
Horses and Mules. 0
Hogs, Cows, etc. 0
Total Cash value of all property 1100.00

That she is now a bona fide resident of said County of Fulton and she has so continuously resided since June 1889

Sworn to and subscribed before me, this the 19th day of Sept 1912 John W. A. Wright Ordinary,
of Fulton County.

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

STATE OF GEORGIA,

Fulton County.

Personally before me come Mrs. W. A. Wright known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge J. C. Garner who made the foregoing affidavit, is the lawful widow of J. C. Garner who died in Fulton County in said State of Georgia on 20th day of Aug 1870 and that she has not since remarried. That she became the wife of J. C. Garner on the 7th day of Aug 1867 and that she and he had resided together as man and wife continuously since Aug 1867 and that the J. C. Garner was the same man who was on the pension roll of said State Fulton County when he died.

Sworn to and subscribed before me, this the 18th day of Sept 1912 John W. A. Wright Ordinary,
of Fulton County.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Pension Roll or Put on Under Act of July 11, 1910.

County Fulton

Name J. C. Garner

Widow of J. C. Garner

Company C

Approved

J. W. LINDSEY

CLARK F. BISH, State Printer, Albany.

day of 20th 1912
John P. Wilkinson Ordinary
of Fulton County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Fulton County.

Personally, before me comes Lt. Brown & George who after being sworn on oath says, that they are freeholders of said County, and that they know Ellie Turner of said County and knew her said husband R. C. Turner at his death on the 28th day of Aug 1912 that she and he were in the use, possession and control of the following property at his death to wit: 400 Chestnut St., Philadelphia Pa
of the value of \$ 1100.00 That she is now in the use, possession and control of the following property to wit: 400 Chestnut St., Philadelphia Pa
of the value of \$ 1100.00
Sworn to and subscribed before me, this the 19th day of Sept 1912
John P. Wilkinson Ordinary,
of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Fulton County.

John P. Wilkinson Ordinary of said County, do certify, that, I know Mrs. Ellie Turner the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 19th day of Sept 1912 witness as to marriage and I also know Lt. Brown & George who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.
That the tax Books of Fulton County shows that R. C. Turner returned property to the amount of \$ 1100.00 for 1908 \$ 1100.00 for 1909 \$ 1100.00 for 1910 \$ 1100.00
Sworn under my hand and official seal of office this 19th day of Sept 1912
(SEAL) John P. Wilkinson Ordinary,
Fulton County.

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

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

RECEIVED

JUL 16 1928
L. THOS. GILLEN,
DIRECTOR

For FULTON County

**Application for
Expenses of Last
Illness and Funeral**

(UNDER ACT OF 1919)

T. B. JEFFRIES, Ordinary

For MRS. J. W. TURNER
(Name of Pensioner)

Date of Death: July 4, 1928

Amount: \$ 522.00

TO THE ORDINARY: Fill out above, in full, and send this voucher to Confederate Division State Department of Public Welfare, for approval. Do not pay out the money until the approved voucher is in your hands giving you authority to do so. After this voucher has been sent back to you, with check, get a receipt from each person having a bill, and return this voucher and the receipts to Confederate Division State Department of Public Welfare.

Approved, and ordered paid,
L. Thos. Gillen 1928
Director.
Confederate Division
State Department of Public Welfare

Application for Payment of Expenses of Last Illness and Funeral

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

GEORGIA, FULTON County:

Before me, the Ordinary of said County, comes W. B. DePue
of said County, who, after being duly sworn, on oath says
that he knew Mrs. T. C. Turner late of said County, a Confed-
erate pensioner, and that said person is the identical person named and described in the attached cer-
tified copy of burial certificate; and that said pensioner LEFT ~~NO ESTATE~~ NO ESTATE OF ANY
KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted to the
sum of \$ 382.00 as shown by sworn statements FULLY and COMPLETELY ITEM-
IZED, hereto attached.

Sworn to and subscribed before me,
this the 15 day of July, 1938.
W. B. DePue Ordinary.

CERTIFICATE OF THE ORDINARY

GEORGIA, FULTON County.

I certify that W. B. DePue who subscribed
to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and
credit. I further certify that I knew Mrs. T. C. Turner the deceased
pensioner referred to in the foregoing affidavit and that said deceased was at the time of death regularly
enrolled as a pensioner on the records of file in my office. I further certify that said deceased pensioner
is the identical person named and described in the attached certified copy of burial certificate, was not
survived by a widow and left no estate of any kind sufficient to pay the expenses of last illness and
burial for which claim is made.

Given under my hand and seal of office, this 15 day of July, 1938.
(Seal of Ordinary) W. B. DePue Ordinary.

INSTRUCTIONS:

- 1st. Certified copy of Burial Certificate must accompany this application.
- 2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 3rd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of _____ who died without owning sufficient property to pay this bill."
- 4th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed and signed as indicated.
- 5th. The completed voucher—this blank and the bills—must be sent to the Confederate Division State Department of Public Welfare and no money must be paid out until it is returned to you as your authority to make the payment.
- 6th. Return this application, and attached bills, properly receipted, to the Confederate Division State Department of Public Welfare.
- 7th. Ordinary should see that the back of this blank, when folded, is filled out.
- 8th. This voucher, if approved, will be sent back to you with the funds with which to pay the approved bills. When you have paid the bills and obtained a receipt for each payment, return the voucher, with bills and receipts, to be permanently filed in the Confederate Division State Department of Public Welfare.
- 9th. The State does not authorize the payment of these expenses if the owner 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.

H. M. PATTERSON & SON Spring Hill at Fifth ATLANTA, GA.

Sold to For Funeral Expenses of Mrs. T. C. Turner

July 4, 1938

To Our Complete Service Including Casket	\$ 337.00
SPECIAL DISBURSEMENTS FOR YOUR CONVENIENCE	
Dress	13.25
Underclothing & Hose	3.25
Extra Mileage Charge— 214 Miles	28.50
	<u>\$382.00</u>

State of Georgia)
County of Fulton)
The above bill is rendered for the funeral expenses of
Mrs. T. C. Turner, said bill being true, correct, just, and
unpaid.

H. M. Patterson & Son
By H. M. Patterson Member of Firm

Sworn to before me this 13th day of July, 1938

Atlanta Ga., July 22, 1938.

Received of T. H. Jeffries, Ordinary, check for \$30.00
to apply on funeral account of Mrs. T. C. Turner, deceased. I certify
that this amount has not previously been paid and is now owing to H.M.
Patterson & Son.

H. M. Patterson & Son
E. E. Bowen

14. INFORMANT (Signed) <u>Robt. C. Turner</u> (Address) <u>470 N. Highland Ave.</u>	(Signed) <u>H. W. Minor</u> (Address) <u>Atlanta, Ga.</u>
15. BURIAL PLACE (Cemetery) <u>Sparta, Ga.</u> (Date) <u>7/6/38</u>	(Address) <u>7/7/1938</u>
16. UNDERTAKER (Signed) <u>H.M. Patterson & Son</u> (Address) <u>by G. B. DePue</u>	17. FILED (Signed) <u>[Signature]</u> (Local Registrar)

OFFICE OF THE REGISTRAR OF VITAL STATISTICS
For the City of Atlanta

Atlanta, Ga., 7/15/1938

GEORGIA,
FULTON COUNTY.

I hereby certify that the foregoing is a true and correct copy of the record of death Number 2952

of the series of 1938 for Mrs. Almira Bernice Turner
as appears on file in the office of the Registrar of Vital Statistics of the City of Atlanta.

(Signed)

[Signature]
HEALTH OFFICER

SEAL

W. H. Taylor
F-66

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

Fulton
Company

William H. Taylor

Company *4*

56 90 100

Approved

E. J. Taylor

100

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

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

1. What is your name and where do you reside? Atlanta Ga. William L. Turner

2. How long and since when have you been a continuous resident citizen of this State? 1844 All this life

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? I did

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) April 1862 Thompson Co. 5th. Cav. T. S. G. Ga. Vol.

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) April 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? Union City Tenn. N. G. April 1865

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were. None

a. Where was your Command when you left it? Union City N. G.

b. When did you leave the Command? April 1865

c. For what cause did you leave? Surrendered

d. By whose authority did you leave? Gen. Grant

e. For how long was your leave granted? In what way? had none

f. Why did you not return to your Command after leave expired? was there

g. In what way were you prevented? was with it

h. What effort did you make to return? none

i. Were you captured during the war? at Vicksburg Miss.

If so, when, and where? In what prison were you held and when were you released? was paroled

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) None

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list.) None

12. What annual or monthly income or earnings of yourself and wife and the source derives have you? 7.50 per month as pension RR crossing

13. Are you drawing a pension of any amount from this State or the United States? No

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Applied as independent which was

disallowed on account of no proof. Sworn and subscribed before me, this the 10th day of April 1912, at Atlanta Georgia.

Notary Public in and for the State of Georgia.

Soldier's Application.

UNDER ACT 1910.

Confederate

F-56

No.

W. L. Turner

Atlanta Ga.

April 1912

County Fulton

Name William L. Turner

Company A

Regiment 56th Reg. Va.

Approved

J. W. LINDSEY,

Commissioner of Pensions

CHAS. F. STED, STATE PRINTER, ATLANTA.

QUESTIONS FOR WITNESSES

STATE OF GEORGIA

Fulton County

A. A. Manning is a well known and respected citizen of said County and is hereby designated as a witness in support of the application of W. J. Turner for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make in the questions propounded answers as follows:

1. What is your name and where do you reside? A. A. Manning
Atlanta Ga.
2. How long and since when have you known the applicant? Since April 1862
3. Where does he now reside, and since when has he been a bona fide, continuous resident in this State and how do you know? Atlanta Ga. Since 1862. Know him as such
4. When, where and in what Company and Regiment did he serve during the war from 1861 to 1865? (Give date and place). April 1862. 10th Co. 2nd Ill. Cav.
5. How did you obtain your information of this Service? Was in same
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date). until April 1865
7. When and where was his Command surrendered or discharged (Give date and place). Guerrero, D. C.
8. Were you personally present at the Surrender? I was
9. If not, where were you and how came you there? was there
10. Was the applicant personally present with his Command at surrender? he was
11. If not where was he and how came him there? was there
12. When did he leave his Command? April 1865 Where was his Command when he left it? Guerrero, D. C. By whose authority did he leave? Gen. Sherman How long was he granted leave? during his life How do you know all that you have stated to be true? If by your own knowledge and directly and specifically
was with him in same Co.
13. In what way was he prevented from returning to his Command? and did know How do you know? was 100 miles from his Co.
14. What effort did he make to return to his Command and how do you know? did not know
15. Was applicant captured as a prisoner of war? yes Where was he captured? Guerrero, D. C. In what place was he held? in prison

Sworn to and affirmed before me, this

5th day of April 1902

Sworn to and subscribed before me, this the 5th day of April 1902, at Fulton County, Georgia.

STATE OF GEORGIA

Fulton County

W. J. Turner is a well known and respected citizen of said County and is hereby designated as a witness in support of the application of W. J. Turner for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make in the questions propounded answers as follows:

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1861? (State if sold by name). none
2. When and to whom was it sold or given to?
3. What was the price paid or agreed to be paid?
4. What relation is the party to applicant? none
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full value? yes

Subscribed and sworn to before me, this the 5th day of April 1902, at Fulton County, Georgia.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA

Fulton County

A. A. Manning Ordinary of said County, certify that I know the applicant W. J. Turner as the person he represents himself to be and resides in said County. That I do know A. A. Manning the witness swearing to the service and W. J. Turner 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 entitled and trustworthy and their statements are entitled to full faith and credit. That the said W. J. Turner is a bona fide resident of said County and is entitled to the pension provided by the Act of 1910, in said State.

Sworn to and affirmed before me, this the 5th day of April 1902, at Fulton County, Georgia.

STATE OF GEORGIA, Fulton County

I, Thos H Jeffries, Ordinary of said County, do certify that I personally know Mary Turner, the applicant, and that she is the lawful widow of Wm A Turner, and was on the Fulton Pension Roll of said Fulton County, and was paid a Pension from One Hundred County for 10 years, and at the time of his death on the 15 day of Jan, 1923, there was due to him and unpaid his Pension of One Hundred Dollars from the State of Georgia, and I know P. B. Hoyt, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 24 of Feb, 1923
(SEAL.) Thos H Jeffries Ordinary
Fulton County.

Turner, W.G.
Fulton County
1922/23

Application for Pension Due
Deceased Soldier
(UNDER ACT 1881)

(To be paid his Widow or Dependent Children)
BY
Mrs Mary Turner
Widow of Wm A Turner
of Fulton County.
Old or New old
Date of Death Jan 15 1923

Approved and ordered paid 100
1923
J. W. LINDSEY,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Office for review. If approved, the Ordinary must return it with your pay-roll for permanent filing in the Pension Office.

I hereby authorize and constitute _____ of said County, lawful attorney to collect, and receipt for me in my name, for the Pension due me for 10 years through my deceased husband, _____ who was on the _____ Pension Roll and paid from _____ County for 10 years.
Witness my hand this _____ day of _____, 1923.

Attended before me:

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 3, 1891.

Personally before me comes Mrs. Mary T. Turner, of said County, who after being duly sworn, on oath says that she is the widow of Wm. G. Turner who was duly enrolled as a Service Pensioner from the County of Fulton and was paid a Pension of \$100.00 Dollars from Fulton County for 1922; and that the said Wm. G. Turner died in DeKalb County on the 16 day of January, 1923, and at the time of his death a Pension of \$ was due him from Fulton County and unpaid for 1923. Applicant further swears that she married the said Wm. G. Turner on the 24 day of January, 1888, in Wilson County and State of Georgia, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

STATE OF GEORGIA, Fulton County

Sworn to and subscribed before me this 14 day of February, 1923, 1923
John R. Vincent Ordinary. S. B. Wright
Fulton County.
 (SEAL)

[illegible]

Sworn to and subscribed before me this 14 day of February, 1923.

William R. ...
Ordinary,
Fulton
County
(SEAL)

S. B. Wright

INTESTATION. I, the undersigned, being a Justice of the Peace in and for the County of Fulton, State of Georgia, do hereby certify that the within and foregoing is a true and correct copy of the original of the same as the same appears of record in my office in Book "A" page 69 of Marriage Record.

Georgia }
Milton County } I, R. E. Douglas, Ordinary, in and
for Milton County Ga. hereby certify
that this instrument is a true copy of the marriage
of William J. Turner and Mary J. Webb as same
appears of record in my office in Book "A"
page 69 of Marriage Record
Witness my hand and seal the January 31st 1923.

R. E. Douglas, Ord.

Copy
MARRIAGE LICENSE
OF

Wm J. Turner
AND

Mary J. Webb

Issued January 20th 1923
and recorded on page 69

Book "A" of Marriage License.
R. E. Douglas, Ordinary

No. 457

Marriage License

State of Georgia

TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

You are hereby authorized to join
William G. Turner and Mary J. Webb
in the Holy State of Matrimony according to the Constitution and
Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me with your
Certificate hereon of the fact and date of the Marriage.
Given under my hand and seal this 24th day of
January 1867. O. P. Shelton (L.S.)
Ordinary

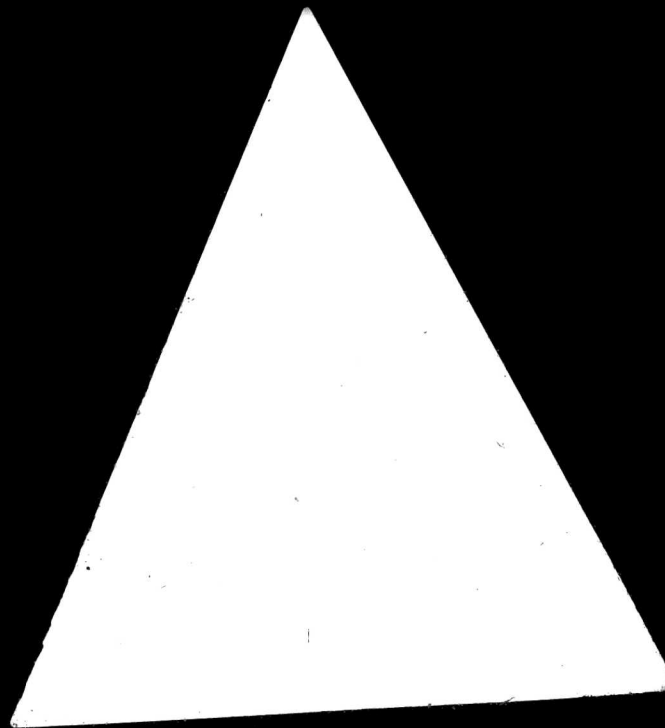
STATE OF GEORGIA CERTIFICATE MILTON COUNTY

I Certify that William G. Turner and Mary J. Webb
were joined in Matrimony by me this 24th day of January 1867
at Sixty Nine
Witnessed
Ordinary

W. J. Pirkle M. J.

PARTY PERFORMING CEREMONY, RETURN TO ORDINARY TO BE RECORDED.

Recorded in Volume by us this 24th day of January 1881
and Sixty Nine
Recorded
Ordinary
W. J. Birckle M. D.
PARTY PERFORMING CEREMONY, RETURN TO ORDINARY TO BE RECORDED.



Subscribed, O. H. H.
Fulton County
No. 82

**INDIGENT PENSION,
1900.**

Name *W. H. Lindsey*

County *Fulton*

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Prisons.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

14/9-1900

W. H. Lindsey

Warrant is hereby issued to the Sheriff of Fulton County, Georgia, to take the body of W. H. Lindsey, who is an indigent person, and to return him to the State Prison, Atlanta, Georgia, to be confined for the term of one year, or until he is able to pay the fine of \$100.00, or until he is able to give satisfactory bonds for the same.

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

STATE OF GEORGIA,
County _____
Power of Attorney.

Power of Attorney.
STATE OF GEORGIA,
County. }

I, _____, hereby authorize
to receive and receipt for the pension allowed, and request that he remit same to
at _____ day of _____ 1900.
Witness my hand and seal, this _____ day of _____ 1900.
[L. S.]
Executed in presence of _____

INDIGENT PENSION,

1900.

Name R. W. Turnipseed
County Fulton
Approved _____
1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED TO

JOHN W. LINDSEY, Commissioner of Pensions.

Questions for Applicant.

STATE OF GEORGIA,

Fulton County.

R. W. Turnipseed 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, depose and answers as follows:
1. What is your name and where do you reside? Reside at 1833 Nelson St. Atlanta Ga. Fulton Co. Atlanta post office
2. How long and since when have you been a resident of this State? forty seven years since 1853.
3. When and where were you born? Born Feb 14 1827, Richmond Co. So. Ga.
4. When and where and in what company and regiment did you enlist or serve? Enlisted June 13 1863. 22nd Savannah Georgia company 22nd Battalion Georgia Artillery.
5. How long did you remain in such company and regiment? Remained in company of 22nd Battalion Georgia Artillery until I got wounded on the 15th day of March 1865. One year and nine months this day of March 1865.
6. When and where was your company and regiment surrendered and discharged? April 7 1865 at Wilmington North Carolina.

Every question must be answered.

7. Were you present with your company and regiment when it was surrendered? NOT present
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? In hospital at Augusta Ga. Wounded March 15 1865 in left leg. By the authority of the surgeon in charge.
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? Carpen or
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Age and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? infirmary and poverty could not earn my support ever since 1865. I was wounded in my leg and it has been so long since I have been able to do any work. I have no property at all.
13. What property, real or personal, or income, do you possess, and its gross value? No property at all. I have no income.
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? I had no property in 1894, 1895, 1896, 1897, 1898, 1899. No disposition of property.
15. In what County did you reside during those years, and what property did you then return for taxation? Reside in Fulton County Ga. I returned no property for taxation.
16. How were you supported during the years 1898 and 1899? Supported by my daughter during the years 1898 and 1899.
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? My support cost me nothing. I contributed nothing.
18. What was your employment during 1898 and 1899? What pay did you receive in each year? No employment in 1898 and 1899. Received no pay.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have two little daughters 3 and 5 years old. Their mother is dead. They have no means of a support. Only their help. I do not have a homestead at all.
20. Are you receiving any pension? If so, what amount and for what disability? I have never received any pension at all.
21. Have you ever made an application for pension before? Yes
22. How many applications have you ever made and under what class? one time under the class of Invalid Soldiers Pension.

Sworn to and subscribed before me this _____ day of _____ 1900.
R. W. Turnipseed
Applicant.

Notary Public
of _____ County.

Commissioner of Pensions
Fulton County
8-1-1

10/9-1900

Name of Applicant
 County
 Approved
 JOHN A
 WARR
 10/9

Sworn to this 27th day of April 1900
 day of April 1900
 of Fulton County
 Applicant

QUESTIONS FOR WITNESS.
 STATE OF GEORGIA,
 Fulton COUNTY

I, E. J. Howell, of said State and County, having been presented as a witness in support of the application of Redick W. Turnipseed for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?
2. Are you acquainted with Redick W. Turnipseed, the applicant; if so, how long have you known him? 4th. ever since June 13, 1863.
3. Where does he reside, and how long and since when has he been a resident of this State? Resided 135 Nelson St. Atlanta, Ga. since June 13, 1863.
4. When, where and in what company and regiment did he enlist, and how do you know? Enlisted June 13, 1863, at Savannah, Ga. Company A, 2d Battalion Georgia Artillery, known by General.
5. Were you a member of the same company and regiment? Yes.
6. How long did he perform regular military duty? from June 13, 1863, until March 1, 1865.
7. When and where was he captured, surrendered or otherwise? April 7, 1865, Wilmington.
8. Were you present when it surrendered? Yes.
9. Was applicant present? No.
10. If he was not present, where was he? In a hospital at Augusta, Ga.
11. When did he leave his command? March 1, 1865. For what cause? wounded in left leg.
12. By what authority he left? By the Surgeon in charge. How do you know all of this? By being present at the time, a member of the same Company.
13. What property, effects or income has the applicant? (Give your means of knowledge) no property
14. income? I have known him ever since June 13, 1863.
15. 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? had no property, no income in the years 1896, 1897, 1898, 1899, no disposition whatever.
16. Has he conveyed away any of his property in the last four years? yes
17. What is the applicant's occupation and physical condition? Confidently is wounded and ruptured on the right side of the bowels, he is very old and is unable to do any labor or a very little.
18. Is the applicant unable to support himself by labor of any sort, if so, why? unable to support himself on the account of the pains of the wound and rupture in his bowels, caused by his falling down and shot while in the army.
19. How was he supported during the years 1898 and 1899? he was supported by his daughter in the years 1898 and 1899.
20. What portion of the support for those two years was derived from his own labor or income? None was derived from his own labor or income.
21. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Applicant is very old and complains of his wound pains when he stands longer than he lies. After coming of the rupture in his bowels, he was in the army at Durham, Ga.

Sworn to and subscribed before me, this 27th day of April 1900
E. J. Howell Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

I, John A. Howell, County, and
 Personally came before me R. H. Boland
J. A. Renssuff both known to me as reputable physicians
 of said County, who, being severally sworn, say on oath that they have examined carefully Redick W. Turnipseed, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: That he was wounded in the calf of the left leg. Said wound he states was caused by a bullet from the enemy in a fight on March 1, 1865, in North Carolina. He also says it pains him very much when he stands or is it long. He also finds on examination that he is ruptured on the right side. This rupture occurred in Savannah, Ga. while he was in the army.
 They further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this 27th day of April 1900.
R. H. Boland M.D.,
J. A. Renssuff M.D.
 Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

I, John A. Howell, County, Ordinary in and for said County, hereby certify that the applicant Redick W. Turnipseed resides in said County, and has been a bona fide resident of this State since the day of 1863 and that the witnesses, viz: R. H. Boland & J. A. Renssuff 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 proscribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.
 I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1898 None Dollars and in 1899 None Dollars of property, and in 1899 None Dollars of property.
 In my opinion the foregoing claim is made in good faith.
 Witness my hand and seal of office, this 27th day of April 1900.
John A. Howell Ordinary.
 of Fulton County.

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

POWER OF ATTORNEY

STATE OF GEORGIA,

County _____

hereby authorize _____

of _____

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

by _____

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

1901.

[L. S.]

Executed in presence of _____

For Those Already Enrolled.

No. 1527

INDIGENT

SOLDIER'S PENSION.

1901.

Name *Wm. Thompson* *1/28 1901*
County *Fulton*

WARRANT ISSUED

1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT RETURNED TO

Wm. Thompson

U. S. DEPARTMENT OF WAR, WASH.

Wm. Thompson

POWER OF ATTORNEY.

STATE OF GEORGIA,

County _____

I, _____ hereby authorize _____

of _____

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

by _____

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

[L. S.]

Executed in presence of _____

CODES SECTION OF THE
(FOR THOSE ALREADY ENROLLED.)

No. 292

INDIGENT

SOLDIER'S PENSION

1902.

Name *Wm. Thompson*

County *Fulton*

Co. *A* Regiment *27th*

Wm. Thompson

WARRANT ISSUED

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT RETURNED TO

Wm. Thompson

U. S. DEPARTMENT OF WAR, WASH.

Wm. Thompson

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton

County

Personally appears *R. W. Turnipseed* 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 *14* day of *Jan* 18*57*; that he is *74* years old and by occupation a *Carriage Driver* that he enlisted in the military service of the Confederate States (or of the State of *Geo*) during the war between the States, and served for the term of *1 year 8 mos* in Company *A*, of *27* th Regiment of *Dist Cavalry*, that his physical condition is as follows:

Rupture and wounded and eye sight

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of *Fulton* county been allowed a pension for the year 1 *1st time*

Sworn to and subscribed before me, this the *16th* day of *Jan* 1901, *R. W. Turnipseed* Ordinary

STATE OF GEORGIA,

Fulton

County

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

Given under my official signature and seal, this *16th* day of *Jan* 1901, *John R. Wilkinson* Ordinary



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County

Personally appears *R. W. Turnipseed* 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 *14* day of *Jan* 18*57*; that he is _____ years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of *Geo*) during the war between the States, and served for the term of *1 year 8 mos* in Company *A*, of *27* th Regiment of *Dist Cavalry*; that his physical condition is as follows:

Rupture and wounded and eye sight

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of *Fulton* county been allowed a pension for the year 1 *901*

Sworn to and subscribed before me, this the *16th* day of *Jan* 1902, *R. W. Turnipseed* Ordinary

STATE OF GEORGIA,

Fulton County

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

Given under my official signature and seal, this *16th* day of *Jan* 1902, *John R. Wilkinson* Ordinary



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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

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

by _____
Witness my hand and seal, this _____ day of _____, 1903.

Executed in presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 272

INDIGENT

SOLDIER'S PENSION
1903.

Name Rev. J. W. Lindsey

County

Co. A Regiment 27th

WARRANT ISSUED

1903.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

app

Geo. H. Harris, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

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

by _____
Witness my hand and seal, this _____ day of _____, 1904.

Executed in the presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 343

INDIGENT

SOLDIER'S PENSION
1904.

Name Rev. J. W. Lindsey

County Fulton

Co. B Regiment 27th

WARRANT ISSUED

1904.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

W

Geo. H. Harris, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears R. W. Turnipseed 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 14 day of Jan 1827; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 1 yr 8 mo in Company A, of 27th Regiment of Geo. Art; that his physical condition is as follows: I + S

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of _____ county been allowed a pension for the year 1 _____.

Sworn to and subscribed before me, this the 20 day of Jan 1903, R. W. Turnipseed

STATE OF GEORGIA,

Fulton. County.

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

Given under my official signature and seal, this _____ day of JAN 20 1903.



Ordinary

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears R. W. Turnipseed 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 14 day of Jan 1827; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 1 yr 8 mo in Company A, of 27th Regiment of Geo. Art; that his physical condition is as follows: Infirm

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Fulton County been allowed a pension for the year 1 _____.

Sworn to and subscribed before me, this the 20 day of JAN 1904, R. W. Turnipseed

John B. Wilkinson Ordinary

STATE OF GEORGIA,

Fulton. County.

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

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

Ordinary

Fulton

County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

hereby authorize

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

by

Witness my hand and seal, this

day of

1905.

[L. S.]

Executed in the presence of

*Dunlap, R. W.
Fulton County*

(FOR THOSE ALREADY ENROLLED.)

No. 370

INDIGENT
SOLDIER'S PENSION
1905.

Name *R. W. Dunlap*

County

Co. *2nd Regiment of Col.*

WARRANT ISSUED

11/8

1905.

JOHN W. LINESEY,

Commissioner of Pensions.

WARRANT HANDLED TO

R. W.

no date

*Dunlap, R. W.
Fulton County*

(FOR THOSE ALREADY ENROLLED.)

No. 344

INDIGENT
SOLDIER'S PENSION
1906.

Name *R. W. Dunlap*

County

Co. *2nd Regiment of Col.*

WARRANT ISSUED

11/7

1906.

JOHN W. LINESEY,

Commissioner of Pensions.

WARRANT HANDLED TO

R. W.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears R. W. Turnipseed

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____, 18____; that he is 7 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company A, of 2nd Regiment of Artillery; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this _____ day of _____, 1905.

Ordinary.

STATE OF GEORGIA,

County.

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

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

Ordinary.

County.

ALL
POST
STAMP
HERE

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears R. W. Turnipseed

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____, 18____; that he is _____ years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company A, of 2nd Regiment of Artillery; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

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

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

Ordinary.

State of Georgia,

Fulton County.

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

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

Ordinary.

County.

ALL
POST
STAMP
HERE

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

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

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

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

[L. S.]

Executed in presence of _____

Turnipseed, R. M.
Turnipseed Co.

Consent of the
FOR THESE ALREADY FURNISHED

No. 322

INDIGENT
SOLDIER'S PENSION
1907.

Name *R. M. Turnipseed*

County

No. *22* Regiment

WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

C. J. J.
JOHN W. LINDSEY, Commissioner of Pensions.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears R. W. Turnipseed of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1840; that he is 80 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 1/2 in Company A, of 103rd Regiment of Infantry; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning _____ 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.

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

Sworn to and subscribed before me, this the _____ day of _____ 1907.

John R. Williamson Ordinary.

State of Georgia,

Fulton County.

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

Given under my official signature and seal this _____ day of _____ 1907.

Ordinary _____ County.



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

GEORGIA, Fulton County.

I, John R. Rorem, Ordinary of said county, do certify that I personally know Mr. Ophelia A. Serrell, the applicant, and that she is the lawful widow of Mr. R. W. Serrell, and was on the adjudged Pension Roll of said Fulton county, and was paid a Pension from Fulton county for 1907, and at the time of his death on the 2nd day of January, 1908, there was due to him and unpaid his Pension of Eight dollars from the State of Georgia, and I know A. Serrell, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 2nd day of January, 1908.

John R. Rorem Ordinary.
Fulton County.

Turnpseed, R. W.
Fulton County

No. 1908

Application for Pension
Due Deceased Soldier

Under Act 1891.

Approved and Paid
190

J. W. LINDSEY,
Commissioner of Pensions.

Co. Reg't Vol.

Mr. Ophelia A. Serrell
Widow of R. W. Serrell
of County, R. W. Serrell

GEORGIA, _____ County.

I hereby authorize and constitute _____ of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 190 _____, through my deceased husband _____ who was on _____ Pension.

Held and paid from _____ for 190 _____

Witness my hand this _____ day of _____ 190 _____

Attested before me: _____

APPLICATION FOR PENSIONS DUE DECEASED SOLDIER.

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Fulton County.

Personally before me come Mrs. Ophelia A. Serrell, of said county, after being duly sworn, on oath says that she is the widow of R. W. Turnpseed, who was duly enrolled as a Private Pensioner from the county of Fulton and was paid a Pension of \$15 Dollars from Fulton county for 1907, and that the said R. W. Turnpseed died in Fulton county on the 23rd day of January 1908, and at the time of his death a Pension of \$15 Dollars was due him from Fulton county and unpaid for 1908. Applicant further swears that she has no means of support and that her children are dependent on her and she asks that the Pension so due and unpaid be paid to her, for said children.

Sworn to and subscribed before me this 3rd day of February 1908.
John H. Hildner ORDINARY } Mrs. Ophelia A. Serrell (S.)
Fulton County.

AFFIDAVIT OF WITNESS.

GEORGIA, Fulton County.

Personally before me come John H. Hildner, who on oath says that he knew R. W. Turnpseed while in life and that he knows Mrs. Ophelia A. Serrell, the above applicant; that he knows that she said has no means of support and that her children are dependent on her and were in due form of law married in the county of Fulton in the State of Georgia on the 23rd day of January 1908, and that they resided together as husband and wife from date of marriage to the day of his death on the 23rd day of January 1908, and I now know that she is his dependant widow, children.

Sworn to and subscribed before me this 3rd day of February 1908.
John H. Hildner ORDINARY } John H. Hildner
Fulton County.

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

*Recd. O. F.
D. C. Office
Fulton County*
1938

*Washington record
included*

Widow's Application

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

County Fulton
Name Mrs. Anne Tye
Widow of D. Tye
Date of Marriage Oct. 9, 1897
Date of Husband's Death Feb. 24, 1908
Company A
Regiment 3rd Regt. Con. Eng. Troops
Approved Dec. 27, 1937
W. H. Miller
Director.

AUG 26 1937

Ordinary's Certificate

STATE OF GEORGIA

Fulton COUNTY.

I, THOMAS H. JEFFERIES Ordinary of said County, do certify
that I know Mrs. Anne Tye the applicant for pension; that

she is the person she represents herself to be, and that she has been, continuously, a bona fide resident
citizen of said State since January 1st, 1920; that I also know Miss Anne E. Tye
the witness who swears to the substantive marriage; that both of them are now residents
of said County and were duly sworn by me before signing the foregoing affidavit, and that they are
trusting and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 23 day of August 1937.
(SEAL OF ORDINARY) *Thomas H. Jeffries* Ordinary.
Fulton County.

INSTRUCTIONS.

1. Before any questions are answered the Ordinary shall read applicant and the witness in the following order: (1) the
applicant; (2) the witness; (3) the questions asked by the Ordinary; and (4) the answers given by the applicant and witness.
2. Answers to questions may be attached to their proper questions.
3. All statements must be made before the Ordinary of the County in which the applicant or witness resides and must be
credited to the County of residence.
4. The Ordinary may at his discretion require the applicant to produce evidence of marriage, living if available. If not, prove marriage by some person, or by general reputation.
5. The fee for the Ordinary's certificate is to be paid throughout the State. A short sample form is annexed to this.
6. Do not take an application from any widow who is already receiving a pension.

Rec'd O. G.
Dye, Annie E.
Fulton County, Ga.
Washington record
included.

Widow's Application

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

County, Fulton
Name, Mrs. Annie Tye
Widow of D. Tye
Date of Marriage, Oct. 5, 1897
Date of Husband's Death, Feb. 24, 1908
Company, A.
Regiment, 3rd Regt. Con. Eng. Troops
Approved, 1937
By Thomas H. Jeffries
Ordinary

AUG 26 1937

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, THOMAS H. JEFFRIES, Ordinary of said County, do certify that I know Mrs. Annie Tye the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know Miss Annie E. Ellis the witness who swears to the ~~separation~~ marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 25 day of August, 1937.
(SEAL OF ORDINARY) Thomas H. Jeffries, Ordinary.
of Fulton County.

INSTRUCTIONS:

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

FULTON COUNTY.

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

SECTION I.

- What is your name, and where do you reside? (Give Post Office and County) Mrs. Annie Tye, 110 Clark St. S.W., Atlanta, Fulton Co., Ga.
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? forty years, 1897
Give date, or year, of your birth. Feb. 25, 1860 Age: 77
- (1) When, (2) where and (3) to whom were you married? Oct. 5, 1897, Richmond, Kentucky, D. Tye.
 - Have you married since the death of first and soldier husband? No.
 - When and where did your first husband die? Feb. 24, 1908, Fulton Co., Ga.
 - Were you residing together when he died? Yes.
 - If not, how long had you resided apart? ----
 - Are you now a widow? Yes.
 - Have you or your husband heretofore been paid a pension by the State? No.
 - If so, when and for what cause were you or your husband placed on the roll? No.

SECTION II.

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

- When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry, Cavalry, Artillery, Reserve, State Guards, State Militia or State Troops.
Enlisted Aug. 5, 1863, at Morristown, Tennessee, Artificer Co. A., 3rd Regt. Conf. Eng. Troops.
- When and where did the Commands of your husband surrender or discharge from the Service? Don't know.
- Was your husband personally present with his Command when it was surrendered or discharged? Yes.
- If he was not present, state specifically and clearly where he was? ---
- When did he leave the Command? ----
 - For what cause did he leave? ---
 - By whose authority did he leave? ---
 - For how long was his leave of absence granted? --- d. In what way? ---
- What was his physical condition when he left his Command? Sore and bruised in lower limbs.
- What effort did he make to return to his Command? ----
- In what way was he prevented from going back to his Command? ----
- Was he captured by the enemy at any time? Yes, held in camp, not in prison.
- If so, when and where? In what prison was he held and when was he released? ther only held him for 8 or 8 days and he slipped away at night.

Sworn to and subscribed before me, this the

14th day of August, 1937.

Samuel D. Mawry, Ordinary

of Fulton County.

(SEAL OF ORDINARY)

Mrs. Annie E. Tye
Applicant.

State of Georgia,
Fulton County.

Personally before the undersigned authority now
comes Miss Annie E. Ellis, who upon oath
says that he knows Mrs. Annie Tye, and
knows that she was living with her husband D. Tye
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 14th day of August 1937

Charles D. Mason
U. S. Ordinary, Fulton Co. Ga.

WAR DEPARTMENT
THE ADJUTANT GENERAL'S OFFICE
WASHINGTON July 30, 1937.

IN REPLY ORD.-J.A.Ms.
REFER TO

Respectfully returned to

Mrs. Ernest B. Williams,
128 Crumley Street, S. W.
Atlanta,
Georgia.

The records show that Drury Tye, name not borne as Drury Tye,
Artificer, Company A, 3rd Regiment Confederate Engineer Troops, Confederate
States Army, enlisted August 5, 1863, at Morristown, Tennessee.
The company muster roll for July and August, 1864, only muster roll
of the company on file, shows him present.
Other records show that clothing was issued to him on September 24,
1864. No later record found.

Frank C. Burnett
Brigadier General,
Acting The Adjutant General.
By J. A. Mc

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. ANNIE TYE, WIDOW OF D. TYE,

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 ser-
vice 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, there-
fore,

ORDERED:

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

This, the 27th day of December 1937.

H. Thos. "Pat" E. Allen

Director, Confederate Division
State Department of Public
Welfare

Mrs. Ernest B. Williams,
128 Grumley Street, S. W.
Atlanta,
Georgia.

The records show that Drury Tye, name not borne as Drury Tye, Artificer, Company A, 3rd Regiment Confederate Engineers Troops, Confederate States Army, enlisted August 5, 1863, at Harrisburg, Tennessee. The company muster roll for July and August, 1864, only muster roll of the company on file, shows him present. Other records show that clothing was issued to him on September 24, 1864. No later record found.

Frank C. Burnett
Brigadier General,
Acting The Adjutant General.
By *J. A. 192*

This, the 27th day of December 1937.

L. H. "Pat" Gillman

Director, Confederate Division
State Department of Public
Welfare

Marriage Certificate

This is to Certify That on the 6 day of October 1897
the Rites of Matrimony were legally solemnized by me between
D. Tye and Annie K. Merahon
at Richmond in County of Madison
in the presence of Mrs. L. Merahon
and Prof. J. D. Clark

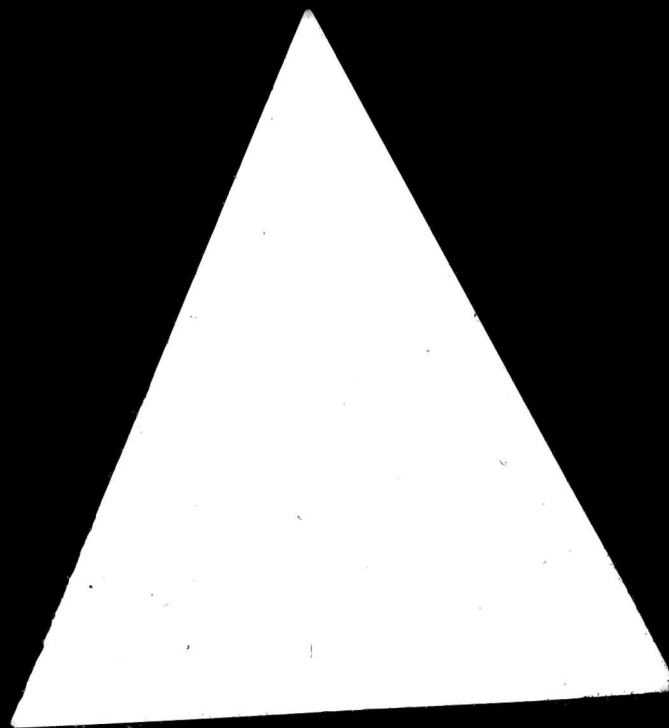
NOTE: THE STATUTE REQUIRES THE NAMES OF AT LEAST TWO
WITNESSES TO BE INSERTED IN THE FOREGOING CERTIFICATE

A True Copy

Attest: *J. B. Barnett*
CLERK MADISON COUNTY COURT

Signer Wm. Ross Lloyd

Attest: *[Signature]*
CLERK HARRISON COUNTY COURT



Undersigned, Mary A. ...
Fulton County

Off. No. for 1903

**WIDOW'S
INDIGENT PENSION
1903.**

Name *Mrs. Mary Ann ...*
 County *Fulton*
 Widow of *George A. ...*

Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

1903.

8/1-1904

POWER OF ATTORNEY.

STATE OF GEORGIA.

County, _____

I, _____, hereby authorize _____
 County, _____, to receive and receipt for the pension allowed and that he
 render the same to me at _____ day of _____
 Witness my hand this _____ day of _____ 1903.
 Executed in presence of _____
 _____ Ordinary, _____
 _____ County, _____

8/1-1904

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

Witness my hand this _____ day of _____ 1903.

Executed in presence of _____

Ordinary, _____ L. S.

County.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

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

1. What is your name and where do you reside? Mary Ann Underwood, Georgia, Fulton Co. 48 Peachtree St. Atlanta Ga.
2. How long and since when have you been a resident of this State? all my life
3. When and where were you born? Greene County in 1836.
4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license in every case.) George Leslie Underwood born in Greene Co. in 1836. Mar. 17, 1857.
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? in 1862, at Huntsburg, Co. B, 1st Regt. Battalion Georgia Sharpshooters 1862, Arthur Mack.
6. How long did your husband serve in said Company and Regiment? He served until after Sherman's March to Savannah in fall of 1864.
7. When and where did your husband's Company and Regiment surrender and was discharged? I do not know, but suppose with others in North Carolina after 1864.
8. Was your husband present at the time and place when his Company and Regiment surrendered? He was in his Company until he put before the sword when he came home.
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? He was cut off from command after Sherman's march and never was able to return to his command.
10. When and where did your husband die? He died in Greene Co. in 1894.
11. Which of the following grounds do you base your application for Pension, viz.: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty? Infirmary, Age & Poverty.
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight? I am 67 years of age not able to earn living by my own labor.
13. What has been your occupation since your husband's death? Home Keeping for my children—working in such room.
14. How much can you earn gross, by your own exertion or labor? very little.
15. What property, real or personal, or income do you have or possess, and its gross value? None except my clothing.
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901, and what disposition, if any, by sale or gift, have you made of the same? At the death we had a little home which has since been sold & proceeds used by him.
17. In what counties did you reside in 1899, 1900, 1901 and 1902, and what property did you receive for taxation? Resided in Fulton County 12 years. No property there.
18. How have you been supported since death of husband, and especially for 1899, 1900, 1901 and 1902? by my children.
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? about 100% of my money. Myself on home & children.
20. What was your employment during 1899, 1900, 1901 and 1902—how much did you receive for each year? Supporting my children. Had house. No paid employment.
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? Have my children all of age & occupation. Home & land. Daughters are doing well on their own. No widow's pension.
22. Have you ever made application for pension before? none.
23. How many applications have you made for a Pension, and under what claim? none.

Sworn to and subscribed before me this 6th day of August, 1903 at Atlanta, Georgia, _____ Ordinary, _____ County.

Underwood, Mary Ann
Fulton County
GA No 10-1405
WIDOW'S
INDIGENT PENSION
1903.
Mary Ann Underwood
Fulton
Widow of George L. Underwood
1903
JOHN W. LINDSEY,
Commissioner of Pensions
WARRANT HANDED TO
1903
1914

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,

County.

of said State and County, having been presented as a witness in support of the Application of Mrs. _____, 1900, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?
2. Are you acquainted with the applicant, Mrs. _____?
3. If so, how long have you known her?
4. Where does she reside, and how long and since when has she been a resident of the State?
5. When and where was she born?
6. Were you ever acquainted with her husband?
7. Where did she reside in 1861?
8. When and to whom was he married?
9. When and where was he born?
10. How long have you known him?
11. When and where did _____ enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this?
12. Were you a member of the same Company and Regiment?
13. How long did he perform regular military duty?
14. When and where was his Company and Regiment surrendered and discharged from service?
15. Were you with the Command when it surrendered?
16. Was _____ the husband of applicant present?
17. If not present, where was he?
18. When and where did he leave his command?
19. For what cause?
20. By whose authority he left?
21. How do you know all this? (State fully and clearly.)

22. When and where did _____ die?
23. Where did he reside at his death and how long had he been a resident of Georgia at his death?
24. Do you of your own knowledge know that applicant is the lawful widow of _____?
25. Has she remained unmarried since her soldier husband's death, and is now his widow?
26. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
27. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what disposition did she make of it?
28. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom?
29. What is applicant's physical condition and her chances and ability to earn a support?

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

27. How was he supported for 1899, 1900, 1901 and 1902?

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

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

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

Sworn to and subscribed before me this _____ day of _____, 190____.

Ordinary, _____ County.

Witnesses, _____

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,

County.

I, _____, both known to me to be reputable Physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. _____, applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is _____.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this _____ day of _____, 190____.

Ordinary, _____ County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, _____, Ordinary, in and for said County, hereby certify that the applicant, Mrs. _____, resides in said County, and has been a bona fide resident of this State since the _____ day of _____, 18____, and that the witness, Mr. _____, are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath hereby prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of _____ County shows that applicant returned for taxation to her own name in 1899 _____ dollars worth of property, and in 1900 _____ dollars worth of property, and in 1901 _____ dollars worth of property, and in 1902 _____ dollars worth of property.

Witness my hand and official seal this _____ day of _____, 190____.

Ordinary, _____ County.

- NOTES.—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth: So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 9th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

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

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,

County.

I, John C. Anderson, of said State and County, having been presented as a witness in support of the Application of Mrs. Mary A. Anderson for a Pension under the Act of 1906, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? John C. Anderson, 1215 E. 1st St., Savannah, Ga.
2. Are you acquainted with the applicant, Mrs. Mary A. Anderson? Yes.
3. If so, how long have you known her? Since 1888.
4. Where does she reside, and how long and since when has she been a resident of this State? She has lived in Savannah, Ga. since 1888.
5. When and where was she born? She was born in 1848 in Georgia County, Ga.
6. Were you ever acquainted with her husband? Yes, I was.
7. Where did she reside in 1861? She resided in Georgia County, Georgia.
8. When and to whom was he married? He was married to Mary A. Anderson in 1861.
9. How long have you known him? Since 1861.
10. When and where did John C. Anderson enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? He enlisted in the 23rd Battalion of Georgia Infantry, Company A, 1st Regiment, in 1861.
11. Were you a member of the same Company and Regiment? Yes.
12. How long did he perform regular military duty? From 1861 to 1865.
13. When and where was his Company and Regiment surrendered and discharged from service? They were surrendered to the Federal Department at Andersonville, Ga., in 1864.
14. Were you with the Command when it surrendered? Yes, I was.
15. Was John C. Anderson the husband of applicant present? Yes.
16. If not present, where was he? He was in the hospital at Andersonville.
17. When and where did he leave his command? He left in 1865.
18. For what cause? He was discharged from service.
19. How do you know all this? (State fully and clearly.) I know this because I was with him at the time and place mentioned.
20. Do you of your own knowledge know that applicant is the lawful widow of John C. Anderson? Yes.
21. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes.
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? I do not know.
23. What property, effects or income did applicant possess in 1869, 1900, 1901 and 1902, and what disposition did she make of it? I do not know.
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? I do not know.
25. What is applicant's physical condition and her chances and ability to earn a support? She is now in poor health and is unable to earn a support.

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA.

County.

of mid State and County, having been presented as a witness to support of the Application of Mrs. Henry A. Williams for a Pension under the Act of 1900, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? John S. Williams
2. Are you acquainted with the applicant, Mrs. Henry A. Williams?
3. How long have you known her? For about twenty years
4. Where does she reside, and how long and since when has she been a resident of this State? She has been a resident of this State for about twenty years
5. When and where was she born? She was born in the State of Georgia
6. Were you ever acquainted with her husband? Yes
7. Where did she reside in 1861? She resided in the State of Georgia
8. When and to whom was he married? He was married to the applicant
9. When and where was he born? He was born in the State of Georgia
10. How long have you known him? For about twenty years
11. When and where did Henry A. Williams enlist in the war between the States and in what Company and Regiment did he enlist, and how do you know that? He enlisted in the 1st Georgia Infantry, Company A, and was with me in the same Company and Regiment
12. Were you a member of the same Company and Regiment? Yes
13. How long did he perform regular military duty? For about twenty years
14. When and where was his Company and Regiment surrendered and discharged from service? He was surrendered to the Union at the Battle of Andersonville
15. Were you with the Command when it surrendered? Yes
16. Was Henry A. Williams the husband of applicant present? Yes
17. When and where did he leave his command? He left his command at the Battle of Andersonville
18. For what cause? He was captured by the Union forces
19. By whose authority he left? By the authority of the Union forces
20. How do you know all this? (State fully and clearly.) I know all this because I was with him in the same Company and Regiment
21. When and where did Henry A. Williams die? He died in the State of Georgia
22. Where did he reside at his death and how long had he been a resident of Georgia at his death? He resided in the State of Georgia for about twenty years
23. Do you of your own knowledge know that applicant is the lawful widow of Henry A. Williams?
24. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes
25. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? I do not know of any property
26. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what disposition did she make of it? I do not know of any property
27. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? I do not know of any property
28. What is applicant's physical condition and her chances and ability to earn a support? I do not know of any property

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

I do not know

27. How was he supported for 1899, 1900, 1901 and 1902? He was supported by the Union

28. How much did applicant contribute to her support for last two years? I do not know

29. Give a full and complete statement of applicant's physical condition? I do not know

30. What interest have you in the recovery of this pension by the applicant? I do not know

Sworn to and subscribed before me this 2nd

day of January 1902

John S. Williams Ordinary,

County County.

Witnesses.

of whom:
of the village of
Fulton County
25. What is applicant's physical condition and her chances and ability to earn a support?
I do not know any thing about her physical condition nor her chances and ability to earn a support

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

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

[L. S.]

Executed in presence of _____

Underwood, Mary Ann
Fulton County, Ga.
To These Herebefore Paid.

1905.

No. *18*

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1905.

Mary Ann Underwood
or
Fulton
County,
Widow of *Geo. G. Underwood*
Co. *A* 1st Regt. Regiment.

JOHN W. LINDSEY
Commissioner of Prisons.

WARRANT ISSUED
1/21 1905.

AND HANDED TO
M

Warrant for Pension, payable to the order of the person named herein, for the year ending Dec. 31, 1905.

RECEIVED JAN 21 1905

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 2

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

Mary Anne Underwood

Fulton.

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since off her life.

That she is the Widow of George L. Underwood, who was a soldier in Company 1st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of 2 1862, and served in the Army up to 1896. That he died on the 1st day of 1896.

Infirmary and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1851.

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

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

Wm. H. T. Underwood
Post-Office, Atlanta.

State of Georgia,

Fulton County.

I, John P. W. Vasson

Ordinary of said County, certify that I am well acquainted with Mrs. Mary Anne Underwood, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the all her life day of 18.

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

Official Seal.

John P. W. Vasson
Ordinary of Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

I, _____ hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____
In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____ 1906.

[L. S.]

Executed in presence of _____

Underwood Mary Ann
Fulton
To Those Heretofore Paid
1906.
No. *8-4*
INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1906.
PAID TO
Mrs. Mary Ann Underwood
OF
Fulton County.
Widow of *Geo. C. Underwood*
Co. *A 1st Va.* Regiment.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
1/9 1906.
AND HANDED TO
C. J. J.
THE FARMERS' FIDELITY AND GUARANTEE CO., ATLANTA, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

I, _____ hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____
In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____ 1907.

[L. S.]

Executed in presence of _____

Underwood Mary Ann
Fulton
To Those Heretofore Paid.
1907.
No. *110*
INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1907.
PAID TO
Mrs. Mary Ann Underwood
OF
Fulton County.
Widow of *Geo. C. Underwood*
Co. *A 1st Va.* Regiment.
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED
1/16 1907.
AND HANDED TO
C. J. J.
THE FARMERS' FIDELITY AND GUARANTEE CO., ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES Mrs.

Mary Ann Underwood

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

That she is the Widow of Geo. B. Underwood who was a soldier in Company 1st of the Cal Regiment of Cal

Volunteers, that he enlisted in said regiment on or about the month of 1862, and served in the Army up to 1865 That he died on the 1st day of 1865

Infirmary and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1867

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

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

John P. Williamson Ordinary.

State of Georgia,

County of Fulton

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

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

Official Seal

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 3

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES Mrs.

Mary Ann Underwood

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since 1836

That she is the Widow of George B. Underwood who was a soldier in Company 1st of the Cal Regiment of Cal

Volunteers, that he enlisted in said regiment on or about the month of 1862, and served in the Army up to 1865 That he died on the 1st day of 1865

Infirmary & poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1867

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

Sworn to and subscribed before me this JAN 2 day of JAN 2 1907.

John P. Williamson Ordinary. Post Office 561 Chatham St

State of Georgia,

County of Fulton

Ordinary of said County, certify that I am well acquainted with Mrs. Mary Ann Underwood, 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 1836

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

Official Seal

Ordinary of Fulton County.

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

acquainted with Mrs. Mary A. Anderson, 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 October

Given under my official signature and seal, this 1 day of JAN 1 1907.
John P. Thornton
 Ordinary of _____ County

Official Seal

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

am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the _____ day of JAN 2 1907.
John P. Thornton
 Ordinary of Fulton County.

Official Seal

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

United States Postoffice,

GREENSBORO, GEORGIA.

JOEL F. THORNTON, Postmaster.

Georgia Greene County
 Personally came Joel F. Thornton and being duly sworn says that he is 63 years old and has lived in Greene County Georgia all of his life. That he was for 24 years Ordinary of said County and was well acquainted with George B. Underwood. Late of Greene County Georgia and knew him for many years and while defendant was Ordinary of said County said George B. Underwood filed his application for Pension as a Confederate Soldier and while defendant does not know of his personal whereabouts that said Underwood was in the Confederate Army—he knows that he (Underwood) was

United States Postoffice,

GREENSBORO, GEORGIA.

JOEL F. THORNTON, Postmaster.

disabled and he believes that Underwood was a truthful and reliable man. Given to and subscribed before me January 15th 1904. I as mentioned Joel F. Thornton Ordinary of same County Georgia.

deponent was Ordinary of said
County said ~~James~~ C. Underwood
filed his application for Pension as
a Confederate Soldier and while de-
ponent does not know of his personal
involvement that said Underwood
was in the Confederate Army - he
knows that he (Underwood) was

Ordinary of
same County Georgia

Upham, Marshall
Fulton County

No. _____

17-53
INDIGENT PENSION
1902.

Name M. E. Upham
County Fulton
Co. St. Luke
Approved 1903

JOHN W. LINDSEY
Commissioner of Pensions

WARRANT HAVING BEEN

Ordinary will with State of Georgia
and Registered for State of Georgia

Geo. W. Harrison, State Printer
9/15-1902

POWER OF ATTORNEY.
STATE OF GEORGIA,
COUNTY _____

I, _____
do hereby authorize _____
to receive and receipt for the pension allowed, and request that he send same to _____
at _____
Day of _____ 1902.

Witness my hand and seal, this _____
Executed in presence of _____

POWER OF ATTORNEY.
STATE OF GEORGIA,

COUNTY }
I, _____ hereby authorize
to receive and receipt for the pension allowed, and request that he remit same to _____
at _____ day of _____ 1902.
Witness my hand and seal, this _____ day of _____ 1902.
Executed in presence of _____ [L. S.]

Office of Sec. of Pensions
Sept. 2nd 1901.
J. W. Lister.

Upshaw, Marshall E.
Fulton County

No. 1553

INDIGENT PENSION

1902.

Name M. E. Upshaw

County Fulton

ca. 1553 E. Upshaw

Approved 1903

JOHN W. LISTER,

Commissioner of Pensions.

WARRANT

9/11-1902

Questions for Applicant.

STATE OF GEORGIA,

Fulton County.

Marshall E. Upshaw of said State and County, desiring to avail himself of the Pension Act (Section 1204, Code), hereby submits his proofs, and after being duly sworn

truth 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)

Marshall E. Upshaw Georgia Fulton County Atlanta, P. O.

2. How long and since when have you been a resident of this State? (give State, County and post office)

I have been a resident of this State all my life.

3. When and where were you born? (give State, County and post office)

I was born in 1838 in Fulton County, Georgia.

4. When and where in what company and regiment did you enlist or serve? (give State, County and post office)

I enlisted in the 5th Georgia Regiment, this Regiment was

captured at Charleston, S. C., Sept. 9th 1862, a short while before it was surrendered

at Camp Anderson, S. C., in August 1862, I was granted a discharge from the service

of the 5th Georgia Regiment, and I was discharged from the service of the 5th Georgia Regiment

at the time of the capture of the 5th Georgia Regiment, I was discharged from the service of the 5th Georgia Regiment

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QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton

COUNTY.

Robert H. Sutherland of said State and County, having been presented as a witness in support of the application of Marshall E. Upshaw for pension under Section 1254, Code, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *Robert H. Sutherland I reside in Fulton County, Ga. City of Atlanta*
2. Are you acquainted with Marshall E. Upshaw, the applicant; if so, how long have you known him? *I am. I have known him since 1862*
3. Where does he reside, and how long and since when has he been a resident of this State? *he resides in Fulton County, Ga. has been resident all his life*
4. When, where and in what company and regiment did he enlist, and how do you know? *he enlisted May 5th at Grantville Ga. in Company K 55th Ga. Regiment*
5. Were you a member of the same company and regiment? *I was a member of same Co. and Regt.*
6. How long did he perform regular military duty? *he served in 55th Ga. Regt. about 1862*
7. When and where was his command surrendered? *it was captured and surrendered at Fort Fisher*
8. Were you present when it surrendered? *I was present at the time*
9. Was applicant present? *he was not present he was absent on sick furlon*
10. If he was not present, where was he? *he had been granted a sick furlon and was at home*
11. When did he leave his command? *he was discharged from the service*
12. By what authority he left? *by Surgeon of Regiment and Officer*
13. How do you know all of this? *Command - he was granted a sick furlon for 60 days on account of dysentery and ulcer which I know this because I was in the command at the time*
14. What property, effects or income has the applicant? (Give your means of knowledge?) *and great assets and was to property but he was very poor man*
15. What property, effects or income did the applicant possess in 1898, 1899, 1900 and 1901, and what disposition, if any, did he make of same? *cannot answer*
16. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? *cannot answer*
17. What is the applicant's occupation and physical condition? *he has no occupation he is unable to work. his physical condition is very bad*
18. Is the applicant unable to support himself by labor of any sort, if so, why? *he is unable to support himself by labor of any sort on account of his physical condition it being very bad*
19. How was he supported during the years 1898, 1899, 1900 and 1901? *cannot answer*
20. What portion of his support for these four years was derived from his own labor or income? *cannot answer*
21. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? *he is afflicted with a double fistula which was started while on force march by over exertion in 1862 during campaign in Kentucky and in 1863 it became with him, still*

Sworn to and subscribed before me, this 31st day of July, 1902. *R. H. Sutherland* Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton

COUNTY.

Personally came before me *G. Y. Pierce* and *M. E. Upshaw* both known to me as reputable physicians

of said County, who being severally sworn, say on oath that they have examined carefully

M. E. Upshaw applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

received from Examination that applicant has a double fistula also find that applicant has a ulcerated leg which gives him very great pain & disables him a great deal. we find further that applicant has a bad kidney trouble known as diabetes or and signs of sugar in the urine

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

Sworn to and subscribed before me, this 31st day of July, 1902. *John R. Wilkerson* Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton

COUNTY.

I, *John R. Wilkerson* Ordinary in and for said County, hereby certify that the applicant *M. E. Upshaw* resides in said County, and has

been a bona fide resident of this State since the day of *1838* and that the witnesses, viz: *R. H. Sutherland G. Y. Pierce*

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

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

I further certify that the tax digest of *Fulton* County show that applicant returned for taxation in his name in 1899

property, and in 1900 Dollars of property.

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

Witness my hand and seal of office, this 31st day of Sept. 1902. *John R. Wilkerson* Ordinary.

NOTE.

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

unable to work his physical condition is very poor

15. Is the applicant unable to support himself by labor of any sort, if so, why? *he is unable to support himself by labor of any sort on account of his physical condition it being very bad*

16. How was he supported during the years 1898, 1899, 1900 and 1901? *last answer*

17. What portion of his support for these four years was derived from his own labor or income? *last answer*

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1204, Code? *he is afflicted with a double amputation which was started while on force march by over exertion in 1862 during campaigns in Kentucky and Tennessee it being with him till 1864*

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

Sworn to and subscribed before me, this the 31 day of July, 1902.

R. P. Sutherland Witness.

John R. Sutherland Ordinary.

hereon prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.

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

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

Witness my hand and seal of office, this 31 day of Sept, 1902.

John R. Sutherland Ordinary.

of Fulton County.

NOTE.

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

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

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY.

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

WITNESS my hand and seal, this _____ day of _____, 1904.

[L. S.]

Executed in the presence of _____

John R. Sutherland
Fulton County

FOR THOSE ALREADY EMERGED.

55 No. 106

INDIGENT
OLDIER'S PENSION
1904.

McWhorter
Fulton.

55 No. 106

WARRANT ISSUED
1/20

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
1/24

noted

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

by _____

WITNESS my hand and seal, this _____ day of _____, 1904.

[L. S.]

Executed in the presence of _____

John W. Lindsey
Fulton County
FOR THOSE ALREADY ENROLLING
55 No. 106
INDIGENT
OLDIER'S PENSION
1904.
McWhorter
Fulton
WARRANT ISSUED
1/20 1904
JOHN W. LINDSEY,
Commissioner of Pensions
WARRANT HANDED TO
off
5196
no date

STATE OF GEORGIA

FOR APPLICANTS HEREFORE ATTORNEY PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears M. E. Upshaw

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of April 1838; that he is 66 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 18 months in Company B, of 35th Regiment of Ga. Regt.; that his physical condition is as follows:

Infirmary

that his property consists of the following items:

of the value of 100 Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

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

Sworn to and subscribed before me, this the

day of JAN 20th 1904.

John R. Williamson

Ordinary.

M. E. Upshaw

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this JAN 20 1904

day of JAN 20th 1904.

John R. Williamson

Ordinary

Fulton

County.



Form.—The blank spaces must be filled.
Note.—Affidavits should not be presented before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

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

[L. S.]

Executed in the presence of _____

(FOR THOSE ALREADY ENROLLED.)

K-55 No. 50

INDIGENT
SOLDIER'S PENSION
1905.

Name Mr. E. Upshaw
County Fulton
Co. St. Regiment 55th Reg.

WARRANT ISSUED

4/18

1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Mr. E. Upshaw

E. Upshaw
no data

INDIGENT
SOLDIER'S PENSION
1906.

(FOR THOSE ALREADY ENROLLED.)

K-55 No. 833

Name Mr. E. Upshaw
County Fulton
Co. St. Regiment 55th Reg.

WARRANT ISSUED

4/12

1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Mr. E. Upshaw

E. Upshaw
no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

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

1906.

[L. S.]

Executed in the presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears M. E. Upshaw of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18 that he is years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of yrs in Company A, of 88th Regiment of Ga. Regt. that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the

day of JAN 1 1905.

Ordinary.

STATE OF GEORGIA,

County.

I, M. E. Upshaw 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 day of 1905.

Ordinary.

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton

County.

Personally appears M. E. Upshaw of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1888; that he is 68 years old and by occupation a None, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company A, of 88th Regiment of Ga. Regt. that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the

day of JAN 1 1906.

Ordinary.

State of Georgia,

County.

I, John R. Wier Ordinary of said County, do certify that I am well acquainted with M. E. Upshaw 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 1906.

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,

COUNTY.

I, _____, hereby authorize
 _____ of _____
 to receive and receipt for the pension allowed, and request that he remit same to
 _____ at _____
 by _____ day of _____, 1907.

Witness my hand and seal, this _____ day of _____, 1907.
 [U. S.]

Executed in presence of _____

W. S. Lindsey, M. G.
Frederick Co.
K-55
 (FOR THOSE ALREADY ENROLLED)
 No. *114*
 INDIGENT
SOLDIER'S PENSION
1907.
 Name *W. S. Lindsey*
 County *Frederick* Regiment *55th* *Geo.*
 WARRANT ISSUED
114 1907
 JOHN W. LINDSEY,
 Commissioner of Pensions.
 WARRANT HANDED TO
W. S. Lindsey
 JOHN W. LINDSEY, REGISTRAR, U. S. A.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Dalton, County.

Personally appears, M. C. Upshaw of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of all age 18; that he is 68 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company No of 55 th Regiment of GA; that his physical condition is as follows: Age & poverty

that his property consists of the following items: No property

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

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

Sworn to and subscribed before me, this the _____ day of _____ 1907.

John R. Upshaw Ordinary.

State of Georgia,

Dalton, County.

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

Given under my official signature and seal this _____ day of _____ 1907.

Ordinary John R. Upshaw County.



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

State of Alabama

Chambers County July 25 1862

I G. P. Sullivan of Co. K 154 Ga
Regiment in the Confederate Army do hereby certify
that M. E. Upshaw a member of said Co. K
154 Ga Regiment Confederate Army was on duty
at Andersonville Prison in Sumter County Ga
and that sometime in August 1864 the the
said M. E. Upshaw was examined by a board
of Physicians and on account of Dysentery or
diarrhea he was granted a furlough of thirty
days & to not record who was Commandant
of the post at that time but think it was
Col. Cook of the 6th Fla Regiment

The Prisoners were removed from Andersonville
in February or March 1865 and carried to Millen
Ga and from there to some place in
S. C. about the time of the surrender
in April 1865 - G. P. Sullivan
sworn to an Subscriber before
me this the 25 day of July 1862

G. C. Rorie
W. P. & Ex-officio J. P.

State of Georgia
Douglas Co.

This is to certify that M. E. Upshaw
was stopping at my house in Madison
Ala. at the time of Gen Robert Lee's
surrender - also that he entered the
Confederate service early in the war
and at the time above mentioned he
received thirty days furlough granted
by a board of Doctors at Walker Hospital
Chickamauga Ga. same being granted
him on account of an ulcerated leg

J. M. Upshaw

Sworn to and subscribed before me this
17th day of July 1862

H. H. Cooper
Ordinary

sworn to an Subscribed before
me this the 25 day of July 1902

C. C. Rorie
W. P. & Co. J. P.

Alimony

ATLANTA, GA.

100

Answers to questions on Pension
Blank - 11-12-13-14-15-16-17.

11-The applicant for Pension
M. E. Ushaw has no property
effects or income, My claim of
knowing this is true and will
near neighbor to him for
several years.

12-The applicant has not conveyed
away any property during the
years 1896-1897-1898-1899-1900-
1901- did not make any disposition
of any property during those years.

13-The applicant has not conveyed

ATLANTA, GA.

100

away any property during the
last four years.

14-The applicant has no occupation,
not being able to work, his
Physical condition is very bad.

15-The applicant is unable to
support him self by labor &
any kind, on account of his
Physical condition.

16-The applicant was supported
during the years 1898-1899-
1900-1901. by his two sons
working in Cotton Mills.

13. The applicant has not consigned

working class cotton gin.

ATLANTA, GA.

1902

17- There was no portion of the
applicant's support that legal
derived from his own labor,
or income during the last
four years.

D. G. Pierce, M.D.
W. H. Rice, M.D.

Seen to & subscribed
before me August 28th 1902
John R. Wilkinson

G. Y. PIERCE, M. D.
788 MARSHAL ST.
Box 1, Phone 8100.

ATLANTA, GA. Jan 9 1902

Amendment

To those whom it may concern.
This is to certify that I know
the applicant Marshal E. W. Shaw.
having lived near neighbor to
him for several years, and having
treated him during several
attacks of sickness. I am thoroughly
acquainted with his weak
Physical condition. Therefore I
can say that the above statement
he has given of his Physical
condition and also of his Financial
condition is correct according to
the best of my judgment.
He has no other children.
D. G. Pierce M.D.
Severely and out of control
before me January 28th 1902
John R. Wilkinson

On 31 day of July 1903
John R. Wilkinson
Ordinary

before me Jan 31 1903
John R. Wilkinson
Ordinary
Amended

J. H. Pierce

State of Georgia

Butler Co Jan 3-1903

So when it may concern this is to certify
that I know William B. Hobbs, applicant for
pension, has lived near here for several years
and know by reason of his weak physical
condition that he is unable to earn anything by
his manual labor. He is only afflicted and
suffering a great deal more at this time than
at any other time in his life. His children whom
he has been depending upon is 21 years of age, and either
married or working for themselves.

Witness my hand and seal of office at
this 31 day of Jan 1903

John R. Wilkinson
Ordinary

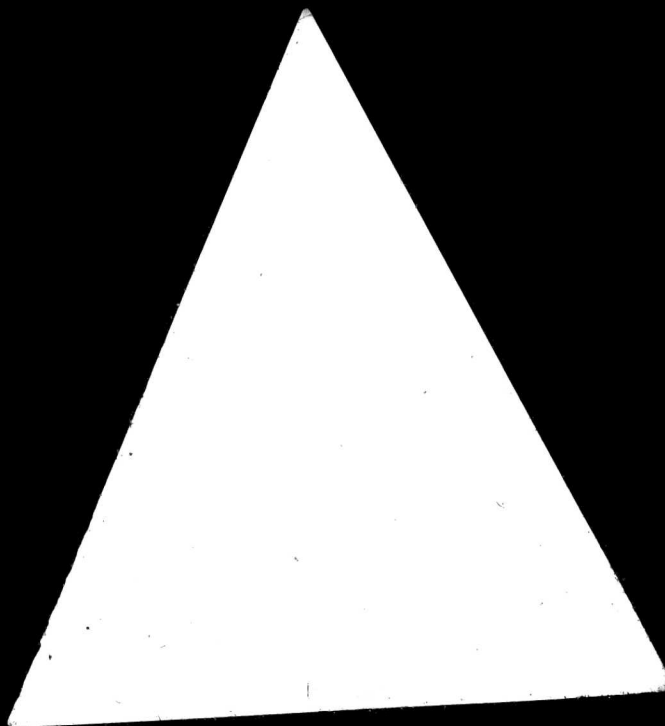
E. P. McAdams "Merchant"
144 Bellwood Ave
Atlanta Ga

Amended

171
This I saw Jan. 1905
John R. Williams
Pohono

Atlanta Ga

Ammanclawit



Vandig, Emma
OK for 1911
Emma

No. *Fulter*

Widow's Application

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

Fulter

Name *Emma Vandig*

Widow of *John D. Vandig*

Approved

J. W. LINDSEY
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

9/24/11

9/24/10

Approved

J. W. LINDSEY
Commissioner of Pensions

Widow of John B. Vandegriff

Mrs. Emma Vandegriff

Fulton

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

Widow's Application

No. 111

John B. Vandegriff

John B. Vandegriff

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA.

Fulton County.

Personally before me comes Mrs. Emma Vandegriff, of said County, who, after being duly sworn, on oath says, that she is the widow of John B. Vandegriff, who was in the County of Fulton, State of Georgia, she was married on the 14th day of November 1861, and that she remained his wife, and resided with him to the date of his death in July 11, 1909, and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in Atlanta said State of Georgia, and he was on the Confederate Pension Roll of the State and paid a pension of \$ 60.00 in Fulton County for 1909 per annum, on account of being a soldier in Company A, Milton's Artillery, Regiment (Volunteers of State Militia).

At the death of John B. Vandegriff he was in the use and possession of the following property:

of the cash value of \$
What property of any kind and of any value have you in your use, control and possession now, and the cash value (State fully):
Acres land \$
Horses and Mules \$
Hogs, Cows, etc. \$
Total Cash value of all property \$

That she is now a bona fide resident citizen of said County of Fulton and she has continuously resided since the day of October 1908

sworn to and subscribed before me, this the 10th day of October 1909
Marius McArthur Ordinary.
of Fulton County.

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

STATE OF GEORGIA.

Fulton County.

Personally before me come Mrs. E. H. Parks known to be responsible and truthful persons, residing in said County who after having duly sworn on oath, say: that of their own personal knowledge Mrs. Emma Vandegriff who made the foregoing affidavit, is the lawful widow of John B. Vandegriff who died in Fulton County in said State of Georgia on the 11th day of July 1909 and that she has not since remarried. That she became the wife of John B. Vandegriff on the 14th day of November 1861 and that she and he had resided together as man and wife continuously since the 14th day of November 1861 and that the John B. Vandegriff was the same man who was on the pension roll of said State from Fulton County when he died.

sworn to and subscribed before me, this the 10th day of October 1909
Marius McArthur Ordinary.
of Fulton County.

1901
M. C. H. Parks
of Fulton County, Georgia.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.
Personally before me comes M. C. H. Parks, who after being sworn on oath says, that they are freeholders of said County and that they know said County and knew her said husband at his death on the 17th day of July, 1907, that he and he were in the use, possession and control of the following property at his death to wit: None
of the value of \$ None. That she is now in the use, possession and control of the following property to wit: None
of the value of \$ None.

Subscribed and sworn to and subscribed before me this the 17th day of July, 1907, at Fulton County, Georgia.
M. C. H. Parks
Ordinary.

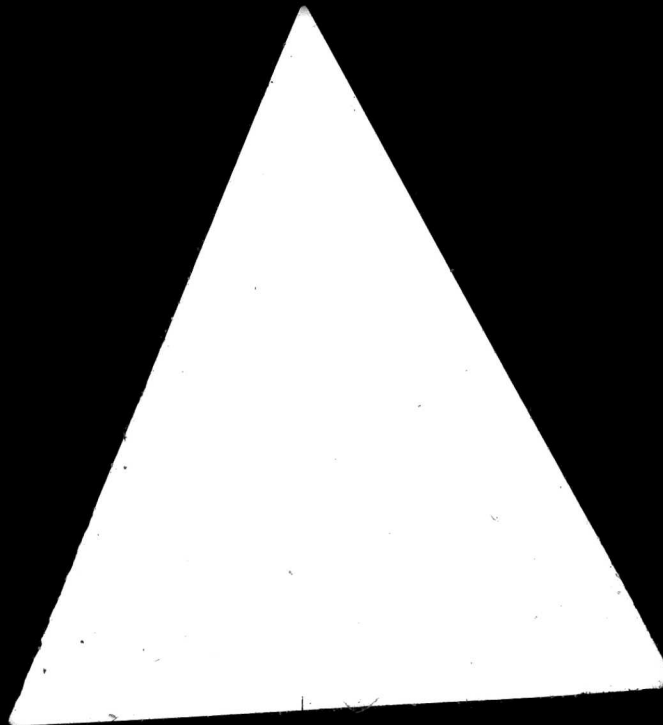
ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.
I, M. C. H. Parks, Ordinary of said County, do certify, that I know Mrs. C. M. Vandegriff, the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 17th day of July, 1907, witness as to marriage and I also know M. C. H. Parks, who I know to be a resident freeholder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.
That the tax Books of said County shows that None returned property to the amount of None for 1908 and None for 1909.
Sworn under my hand and official seal of office this 17th day of July, 1907.
(SEAL.) M. C. H. Parks Ordinary.
Fulton County.

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

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



Indigent Pension

No. 1907

INDIGENT PENSION

1907

Name J. W. Vandisniff

County Greene

Co. D 2nd Regt.

Approved 1907 190

JOHN W. LINDSEY
Commissioner of Pensions

WARRANT HANDED TO

E. R. O. 1907

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

Franklin Printing and Publishing Co., Inc. of New York

9/25/06

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY, _____

I, _____ of _____

do hereby certify that the person allowed and request that he send same to _____

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

Executed in presence of _____ [L. 8.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

hereby authorize

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

Witness my hand and seal, this

Executed in presence of

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY

James W. Vandergriff 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 to make to the following questions, deposes and answers as follows:

What is your name and where do you reside? (Give, State, County and Postoffice.)
 J. C. Gaudin at East Point, Fulton Co, Ga

How long and since when have you been a resident of this State? 1 1/2 yrs. in Nevada Co. Ca.

All my life, now 61 years old, born in 1845.

4. When and where and in what company and regiment did you enlist or serve? *In 1864,*

~~about 1864~~ In no communities till the year was 1864.

5. How long did you remain in such company and regiment? 20 months & 10 days
May 1863,

at Albany, Ga. Nov. 1865

6. When and where was your company and regiment surrendered and discharged? *May 10 1865*

at Albany, Ga. Mrs. J. S.

7. Were you present with your company and regiment when it was surrendered? Yes, Sir
8. If not present, state specifically and clearly where you were, when you left your command, for what cause, and for how long? 1st of Dec 1864

and by whose authority? I was with the Committee
in Florida guarding prisoners, and

How much can you earn (gross) per annum by your own exertions or labor? Not over \$50

10. What has been your occupation since 1865? Carpenter

11. Upon which of the following grounds did you become a second, "infirmary and poverty," or third, "blindness and poverty"? 1st and 2nd

12. If upon the first ground, state how long you have been in the infirmity, and its extent? If upon the third support? If upon the second, give a full and complete history of the infirmity, and its extent? *I have been ill*

state whether you are totally blind and when and where you lost your sight
 I was blind the war, but for last 8 years I have

time much worse off, and unable to work
at all - instance - ^{to} my voice during wa

What property, real and personal, or income, do you possess, and its gross value? nothing

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition of it?

if any, by sale or gift, have you made of same? *Nothing more and*
stated and no income by any source

to property by which I derive any income?

19. In what county did you serve as a Justice of the Peace? In Carroll County, in 1901 to 1905. Not taxable during

18. How were you supported during the years 1901, 1902, 1903, 1904 and 1905?
 2. Could earn by labor, simply the necessities of life. What position did you contribute thereto by your

17. How much did your support cost for each of those years, and what portion was your own labor or income? About \$60 or \$75. I earned it by cheap

18. What was your employment during 1901, 1902, 1903, 1904 and 1905? Why did you leave?

I had at Carpenter's work, when I could work

19. Have you a family? If so, who composes such family? Give their means of support. Yes, have wife and
children. Their ages and how employed? 12-3-4-5

stand, or other property. I own a
six minor children, 3 boys and 3 girls
and I wish to make them all my heirs.

20 Are you receiving any pension? If so, what amount and for what disability? No, Sir

...application for pension before? No. Sir.

22. How many applications have you ever made and under what class? None at all

Sworn to and subscribed before me this the 10th day of June 1964 at San Jose, California James H. Vandiver

10 day of Sept 1906

John H. Williams of Fallen County, Mo. Send Chy. J. C. 2. Vandegrift

White St. & 24.

88201-5

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

William Avery of said State and County, having been presented as a witness in support of the application of James W. Vandegriff for pension under section 1254, Code, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? William Avery, residing at East Point, Fulton Co., Ga.
2. Are you acquainted with James W. Vandegriff, the applicant; if so how long have you known him? Yes, Sir, known him 42 years.
3. Where did he reside, and how long and since when has he been a resident of this State? East Point, Ga. Been in Georgia since I knew him 42 years ago.
4. When, where and in what company and regiment did he enlist, and how do you know? Atlanta, Ga., in Co. D, Second Reserve Corps, 1864.
5. Were you a member of the same company and regiment? Yes, Sir, I was.
6. How long did he perform regular military duty? About 12 months.
7. When and where was his command surrendered? About May 1865, at Albany, Ga., stacked arms to Yankee Garrison.
8. Were you present when it surrendered? Yes, Sir, I was there.
9. Was applicant present? Yes, Sir, he was there.
10. If he was not present, where was he? He was there.
11. When did he leave his company? At surrender.
12. By what authority he left? Surrender of Co. D.
13. How do you know all of this? I was there with him and saw him.

11. What property, effects or income has the applicant? (Give your means of knowledge.) None, only a few household goods.
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? None at all, and no income.
13. How he obtained any of his property in the last four years; if so, what was it, and to whom? Only the little he could earn by his labor, and he obtained away any of his property in the last four years; if so, what was it, and to whom? None to convey.

14. What is the applicant's occupation and physical condition? Carpenter. Physical condition very poor and feeble, not able to do any heavy work, and very little any way.
15. Is the applicant unable to support himself by labor of any sort; if so, why? Yes, Sir, because he is too feeble to work enough to earn labor to make a support.
16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? Only a few casual support. Children helped some, but little.
17. What portion of the support for these four years was derived from his own labor or income? After got worse his labor, helped by children.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. He is feeble, was sick in the war, lost his voice and is feeble ever since the war.
19. Who composes family? What property have they? Children's ages and their earning capacity? Wife, six children. Oldest - youngest. They are not strong, and cannot earn enough to support themselves.
20. What interest have you in the recovery of a pension by this applicant? None whatever.

Sworn to and subscribed before me, this the 19 day of Sept, 1906.
John R. Williamson Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me Dr. James L. Hull and L. C. Bruen, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully James W. Vandegriff, applicant for pension under Section 1254, Code, and after such personal examination say what his precise physical condition is as follows:

Mr. James has suffering with Chronic Bronchitis, he is unable to work more than one third of the time.

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

Sworn to and subscribed before me, this the 17 day of Sept, 1906.
John R. Williamson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John R. Williamson Ordinary, in and for said County, hereby certify that the applicant James W. Vandegriff resides in said County, and has been a bona fide resident of this State since the 17 day of Sept, 1906, and that the witnesses, viz: William Avery.

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

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

I further certify that the tax digest of _____ County shows that applicant returned for taxation in his name in 1901, _____ Dollars of property, and in 1902, _____ Dollars of property; in 1903, _____ Dollars of property; in 1904, _____ Dollars of property; in 1905, _____ Dollars of property.

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

Witness my hand and seal of office, this 17 day of Sept, 1906.
John R. Williamson Ordinary.
of Fulton County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

hereby authorize

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

WITNESS my hand and seal, this day of 1907.

[L. S.]

Executed in presence of

*Wm. Griffith, James W.
Linton Co.*

(FOR TIME ALREADY EXPIRED)

No 324

INDIGENT

SOLDIER'S PENSION

1907.

Name

James W. Lindsey

Copy

F. 11401

Co.

Regimental Co. 1st

WARRANT ISSUED

JOHN W. LINDSEY,

Comptroller of Payrolls

WARRANT HANDED TO

no data

RECEIVED PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS
State of Georgia,

County, }
Personally appears Jas. W. Vandigriff of _____
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the _____ day of _____ 1885; that he is 61 years old
and by occupation a _____ that he enlisted in the military service of the Con-
federate States (or of the State of Georgia) during the war between the
States, and served for the term of 4 yrs. in Company B. of 2 th Regiment
of 24th; that his physical condition is as
follows: Infirmary & poverty
that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the _____
day of _____ 1907.

John R. Hill Ordinary.

State of Georgia,

Fulton County, }

I, John R. Hill Ordinary of said County,
do certify that I am well acquainted with Jas. W. Vandigriff
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 1907.

John R. Hill Ordinary _____ County.



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

Am
your
real
hero

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

Dec Jan 16, 1919

ATLANTA, GA March 22nd, 1919

Settled, Jas. W. Vandergriff

485 Reed St., City

TO HARRY G. POOLE, DR.

"FUNERAL HOME"

88 S. PAVAR STREET

BOTH PRICES

PRIVATE UNDULERS

JAN. 16TH, 1919, MOST MODERN FUNERAL HOUSE IN THE UNITED STATES

Casket & Services

\$90.00

Georgia
Fulton County

Personally appeared before me Harry G. Poole who, after being duly sworn says that the above account is just true and unpaid and was for the burial of Jas. W. Vandergriff.

Harry G. Poole

Sworn to and subscribed before me this 22 day of March 1919

William R. Warbut

C. B. D.

Application for Pension Due to a Deceased Pensioner

Under the Act of August 15, 1904

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

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes
Harry G. Poole of said County, who, after being sworn, on oath says that
 he knew Joe W. Vandergriff of said County, and that he was on
 the Indigent Pension Roll Fulton County at the
 time of his death, which occurred in Fulton County, in this
 State, on the 16 day of January, 1919, and that
 a Pension of Ninety Dollars was due him and
 unpaid at the time of his death. That he left no widow or dependent children surviving him, and no estate
 of any value sufficient to pay his funeral expenses, which amounted to the sum of \$90.00
 Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me
 On 27 day of March, 1919 Harry G. Poole
William R. Lusk Ordinary Fulton County.

GEORGIA, Fulton County.

March 27-1919
 I, William R. Lusk Ordinary of said County, do certify
 that I personally know Harry G. Poole who is a resident
 citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and
 credit

I also knew Joe W. Vandergriff while in life; that he
 was the same person whose name appears on the Indigent Pension
 Roll of Fulton County, and was paid a Pension
 of Eighty Dollars in said County for 1918, and
 I now believe him to be dead.

Given under my hand and official seal, this 27 day of March, 1919

William R. Lusk Ordinary.
Fulton County.

ATLANTA, GA. March 22nd, 1919

M. Harry G. Poole

408 Reed St., City

TO HARRY G. POOLE, DR.
 "FUNERAL HOME"

BOTH PHONES
 JAP. 16th, 1919, MOST MODERN FUNERAL HOUSE IN THE UNITED STATES

Casket & Services

\$90.00

Georgia
 Fulton County

Personally appeared before me Harry G.
 Poole who, after being duly sworn says
 that the above account is just true and
 unpaid and was for the burial of Joe
W. Vandergriff.

Harry G. Poole

known to and subscribed before me
this 27 day of March 1919

William R. Lusk
660

I, William R. Marshall, Clerk of said County, do hereby
that I personally know Harvey R. English, who is a resident
citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and
credit.

I also know Jo. W. Vandegriff while in life; that he
was the same person whose name appears on the Indigent Pension
Roll of Fulton County, and was paid a Pension
of Eighty Dollars in said County for 1918; and
I now believe him to be dead.

Given under my hand and official seal, this 17 day of March, 1919

William R. Marshall Ordinary.
Fulton County.

known to and sworn to by
this 17 day of March 1919.
William R. Marshall
C. C. D.

Application for Payment of Expenses of Last Illness and Funeral

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

GEORGIA, FULTON County:
Before me, the Ordinary of said County, comes H. M. PATTERSON & SON
of said County, who, after being duly sworn, on oath says
that he knew MRS. ELIZABETH BELL VANDIVER late of said County, a Confed-
erate pensioner, and that said person is the identical person named and described in the attached
certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of
ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted
to the sum of \$ 100.00, as shown by sworn statements FULLY and COMPLETELY
ITEMIZED, hereto attached.

Sworn to and subscribed before me,
this the 8 day of July, 1935
H. M. Patterson & Son
J. E. Bowen Ordinary.

CERTIFICATE OF THE ORDINARY

GEORGIA, Fulton County.
I certify that J. E. Bowen who subscribed
to the foregoing affidavit is known to me to be a person whose statement is entitled to full faith and
credit. I further certify that I know Elizabeth O. (Bell) Vandiver the deceased
pensioner referred to in the foregoing affidavit and that said deceased was at the time of death
regularly enrolled as a pensioner on the records of file in my office. I further certify that said de-
ceased pensioner is the identical person named and described in the attached certified copy of burial
certificate, was not survived by a widow and left no estate of any kind sufficient to pay the expenses
of last illness and burial for which claim is made.

Given under my hand and seal of office, this the 8 day of July, 1935.
(Seal of Ordinary) H. M. Patterson & Son Ordinary.

INSTRUCTIONS:

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

Received of Thomas H. Jeffries, Ordinary, \$ 40.00
to apply on account of Mrs. E.O. Vandiver
I certify that this account has not been paid and is now owing to me.
This 9 day of Sept, 1935.
H. M. Patterson & Son
J. E. Bowen

Received of Thomas H. Jeffries, Ordinary, \$ 110.00
to apply on account of Elizabeth O. Vandiver
I certify that this account has not been paid and is now owing to me.
This 9 day of Sept, 1935.
Jeff L. Richardson

Received of Thomas H. Jeffries, Ordinary, the sum of \$ 60.00
for funeral expense of Elizabeth O. Vandiver. I further
certify that this account has not been paid and is now owing to me.
This 24 day of Aug, 1935.
H. M. Patterson & Son
J. E. Bowen

Given under my hand and seal of office, this 5 day of Sept, 1936.
(Seal of Ordinary) Jeff L. Richardson, Ordinary.

INSTRUCTIONS:

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

This 5 day of Sept 1936.

Jeff L. Richardson

Received of Thomas H. Jeffries, Ordinary, the sum of \$60
for funeral expense of Elizabeth O. Vandiver. I further
certify that this account has not been paid and is now owing to me.
This 29 day of Aug 1935.

Jeff L. Richardson
by J. E. Bowen

H. M. PATTERSON & SON

Spring Hill at Fern

ATLANTA, GA.

May 22, 1935

Sold to For Funeral Expenses of MRS. ELIZABETH BELL VANDIVER
Residence: 31 Third St., NE., Atlanta (Fulton Co.) Georgia

To Our Complete Service Including Casket \$100.00

State of Georgia)
County of Fulton)

The above and foregoing account is rendered
for funeral expenses of MRS. ELIZABETH BELL VANDIVER who died
without owning sufficient property to pay this bill.

H. M. PATTERSON & SON

By [Signature]
Number of Firm

Sworn to before me this 6th day
of July, 1935. W. M. Allen

Notary Public, State of Georgia, Atlanta, Ga.
My Commission Expires July 20, 1936.

JEFF L. RICHARDSON, M.D.

131 FOREST AVENUE, N. E. ATLANTA, GA.
Office Consultations by Appointment
Telephone: Walnut 1227

DATE 6/22/36.

Mrs. E. O. Vandiver, (Estate).

Atlanta.

Ga.

10 PROFESSIONAL SERVICES to Mrs. Vandiver from May 20, 1934 to May 20, 1935. \$175.00

Personally appeared before me this 22nd day of
June, 1936, Dr. Jeff L. Richardson who declares
the above statement to be true and correct.

Luther L. Butler Jeff L. Richardson

RECEIVED PAYMENT



CERTIFICATE OF DEATH
GEORGIA STATE BOARD OF HEALTH
Bureau of Vital Statistics

2216

1. PLACE OF DEATH
County Fulton Within District (Number and Name) _____ State of Georgia
City or Town Atlanta Length of residence in this city or town: Yrs. ____ Mos. ____ Non-Resident (Yes or No) ____
Street and Number (If) 51 - 5th St. NE (If death occurred in a hospital, give its name, instead of street and number)
2. FULL NAME Mrs. Elizabeth Bell Vandiver
Residence (City or Town) 51 - 5th St. NE (Street and Number) _____ (Date) _____
3. PERSONAL AND STATISTICAL PARTICULARS
A. SEX female B. COLOR white C. RACE white D. MARRIAGE widowed
4. DATE OF BIRTH (month, day, year) 5/15/1888
5. AGE 52 If not born and day _____
6. OCCUPATION (a) Trade, occupation or profession _____ (b) Industry or business in which work was done, or custom mill, sawmill, bank, etc. _____ (c) Date deceased last worked at this occupation (month and year) _____ (d) Total years spent in this occupation _____
7. BIRTHPLACE (P.O. Address) Green Bell, Ga.
8. FATHER'S BIRTHPLACE (P.O. Address) Green Bell, Ga.
9. MOTHER'S BIRTHPLACE (P.O. Address) Susan Miller, Ga.
10. INFORMANT Mrs. Rankin Price
(Signed) _____ (Address) 51 - 5th St. NE
11. BIRTHPLACE (Country) Athens, Ga. (Date) 5/22/58
12. INFORMANT H. M. Patterson & Son
(Signed) _____ (Address) Atlanta, Ga. by J. E. Ross
13. OFFICE OF THE REGISTRAR OF VITAL STATISTICS
For the City of Atlanta Atlanta, Ga. 7/6/58

14. MEDICAL CERTIFICATE OF DEATH
15. DATE OF DEATH 5/30/58 (Month, day, year)
16. I HEREBY CERTIFY, That I attended the deceased from 5/1/58 to 5/30/58
I last saw the deceased on 5/30/58 after on 5/30/58 death is said to have occurred on the date and hour stated above.
The principal cause of death and related causes of importance in the order of cause and duration of each:
Myocardial failure
cardio renal vascular disease
Other contributory causes of importance:
acute gastro-enteritis
What test confirmed diagnosis? clinical
(Specify whether clinical, laboratory, or clinical)
If death was due to external causes (violence) fill in also the following:
Was injury an accident, suicide, or homicide?
Where did injury occur? _____
(Specify city or town, if outside of Atlanta, the county, and also the state)
Did injury occur in a home, public place or industry?
Manner of injury.
Nature of injury.
(Signed) Jeff L. Richardson M.D.
150 Forrest Ave. NE
(Address)
17. FILED 5/30/58
(Signed) _____ (Date) _____

GEORGIA,
FULTON COUNTY.

I hereby certify that the foregoing is a true and correct copy of the record of death Number 2216
of the series of 1955 for Mrs. Eliza Bell Bell Vandiver
as appears on file in the office of the Registrar of Vital Statistics of the City of Atlanta.
(Signed) J. E. Ross

SEAL

14. INFORMANT (Name) Mrs. Hankin Price.
(Address) 21 - 2nd St. NE.
15. BURIAL PLACE (City) Atlanta, Ga.
(Date) 8/22/35
(Buried) 8/22/35
16. WITNESSES (Name) H. M. Patterson & Son
(Address) Atlanta, Ga. by J. E. Brown
17. REGISTRAR (Name) Jeff L. Richardson M.D.
(Address) 135 Forrest Ave. NE.
(Date) 8/22/35
(Signed) [Signature]
OFFICE OF THE REGISTRAR OF VITAL STATISTICS
For the City of Atlanta Atlanta, Ga. 7/6/35
GEORGIA,
FULTON COUNTY.
I hereby certify that the foregoing is a true and correct copy of the record of death Number 2216
of the series of 1935 for Mrs. Eliza Beth Hall Vandiver
as appears on file in the office of the Registrar of Vital Statistics of the City of Atlanta.
(Signed) [Signature]
SEAL.

Van Dyke, Elizabeth C.
1912 (Mar)
Tulsa County

No. 743 CC 52
Widow's Pension

UNDER ACT 1910

County Tulsa

Name Elizabeth C. Van Dyke

Widow of W. D. Van Dyke

Co. 21 Reg. 43 52
+ 52 52

W. W. LINDSEY,
Comptroller of Pensions

Chas. F. Ryd, State Printer

61960

STATE OF GEORGIA,
Fullon County.

1. What is your name, and where do you reside? *Alfred B. Huggins, 1201 1/2 St. N. N. W. Washington, D. C.*
2. How long and since when have you been a continuing resident of the State of Georgia? *30 years, 1862*
3. When, where, and to whom were you married? *November 21st 1861, in Marietta Ga. To Mary Ann Van Dyke*
4. When, where, and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) *December 1862, 1st Georgia Heavy Artillery, 2nd Va. Cav.*
5. When and where did the Commands of your husband surrender or discharge from the army? *April 9th 1865, in Washington D. C.*
6. Was your husband personally present at the time of the surrender or discharge of his Command? *Not there*
7. If he was not present state clearly where he was? *Not*
8. Where was his command when he left? *Battle*
9. For what cause did he leave his Command? *Wounded*
10. By whose authority did he leave his Command? *Surgeon*
11. For how long was he granted leave of absence? *Several days*
12. What was his physical condition when he left his Command? *Wounded*
13. What effort did he make to return to his Command? *None*
14. In what way was he prevented from going back to Command? *Disabled*
15. Was he captured by the enemy at any time? *Not*
16. If so, when and where captured and where held as a prisoner, and when and for what cause released? *Not*

1. When and where did your husband die? February 18, 1936

2. Were you residing together when he died?

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

4. 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) None

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

6. What property of any description of any value have you now? None

7. Give list and cash value None

8. What are your annual earnings or income from any source and their value? None

9. Have you or your husband heretofore been paid a pension by the State? None

If so, when and for what cause were you or your husband placed on the Roll?

Sworn to and subscribed before me this the
 21 day of October 1906
 Elizabeth C. Pars Dyl
 Public Notary
 Ordinary.
 of Harrison County.

Mrs. J. S. Deft
 9-1862, Providence
 James and Harriet
 Deft. June 27-
 1864-
 278
 William J. Deft
 No. 8, 1864-
 11-
 DUNBAR ACT 1906
 Mrs. J. S. Deft
 9-1862, Providence
 James and Harriet
 Deft. June 27-
 1864-
 278
 William J. Deft
 No. 8, 1864-
 11-
 DUNBAR ACT 1906
 Mrs. J. S. Deft
 9-1862, Providence
 James and Harriet
 Deft. June 27-
 1864-
 278
 William J. Deft
 No. 8, 1864-
 11-
 DUNBAR ACT 1906

of Fuller County

NOTES

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

	TOTAL	1270
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Application for Pension Due to a Deceased Pensioner
(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)
(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Dr. A. H. Vandyske of said County, who, after being sworn, on oath says that he knew Mrs. Elizabeth C. Van Dyke 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 14 day of March, 1932, and that pensioner left no will, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$29.00, per sworn statements fully and completely ITEMIZED hereto attached. said, & he personally

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

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thomas H. Jeffries, Ordinary of said County, do certify that I personally know Dr. A. H. Vandyske, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also know Elizabeth C. Van Dyke while in life and that this was the same person whose name appears on the Pension Roll of Fulton County, and was paid a Pension of thirty (30.00) Dollars March 31 in said County for 1932, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 13 day of April, 1932
Thomas H. Jeffries, Ordinary
(Seal of Ordinary) Fulton County

INSTRUCTIONS

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of who died without leaving sufficient property to pay this bill who died without leaving sufficient property to pay this bill."
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and property sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

A Certificate

STATE OF GEORGIA, County of Fulton

IN RE: Expenses last illness and funeral Mrs. Elizabeth C. Van Dyke

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

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

This the 16 day of Aug, 1932

(SEAL)

Thomas H. Jeffries, Ordinary

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

Received of Thomas H. Jeffries, Ordinary, \$127.00, for the account of Elizabeth C. Van Dyke. This amount has not been previously paid and is now owing to me.

March 2, 1935.

Dr. A. H. Vandyske

at the foot of this voucher have been carefully observed in making up which are attached hereto.

Given under my hand and official seal, this 13 day of April, 1932
(Seal of Ordinary) Paul H. Gann Ordinary
County

INSTRUCTIONS

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of _____, who died without leaving sufficient property to pay this bill."
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached ready to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bill—must be sent to the Finance Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Finance Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filed wet.

M. Dr. Arthur Van Dyke Grant Bldg.
For Mrs. Elisabeth C. Van Dyke.
IN ACCOUNT WITH
HARRY G. POOLE 1931
FUNERAL DIRECTOR
184 PUGH STREET S.W.
ATLANTA GA

WALNUT 3228
3228

March 15th 1932

March 25th 1932

Tr.	Casket, Embalming Hearse & Services	\$ 325.00
	Vault	40.00
	Grave Fee	10.00
	Flowers	15.00
	Three Cars.	00.00
		<u>\$ 390.00</u>



Kindly receipt & return

OFFICE OF ORDINARY.

GEORGIA, COBB COUNTY.

I, J. M. GANN, Ordinary and ex-officio Clerk of the Court of Ordinary (I having no clerk) do hereby certify that I have compared the foregoing copy of Marriage License, and Certificate
of Marriage, Benjamin W. Van Dyke, and Elisabeth C. Lowry,

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 as found in book "A" records of

Marriages folio "145"

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the Court of Ordinary.
this the 29th day of September, 1932

ORDINARY AND EX-OFFICIO C. C. O.

Kindly receipt & return

ORDINARY AND EX-OFFICIO C. C. O.

MARRIAGE LICENSE

OF

Benjamin W. VanDyke

AND

Miss Elisabeth C. Lowry

Issued November 16th, 1866, 191

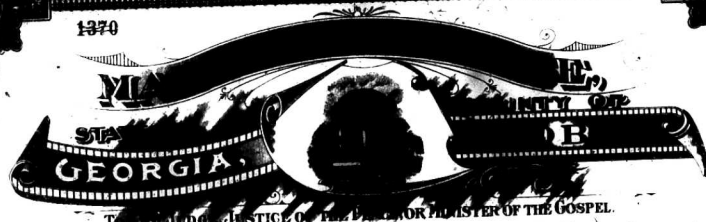
and recorded on page "114"

Book "A" of Marriage Licenses.

John G. Campbell

Ordinary

1370



CLERK OF THE SUPREME COURT OF THE STATE OF GEORGIA

Benjamin W. VanDyke

and Miss Elizabeth C. Lowry

*You are hereby authorized to join
in the Holy Rite of Matrimony according to the Constitution and
Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me with your
Certificate hereon of the fact and date of the Marriage.*

Given under my hand and seal this 16th, day of
November 1866, by John G. Campbell. (L.S.)
Ordinary.

STATE OF GEORGIA

CERTIFICATE

COBB COUNTY

I Certify that Benjamin W. VanDyke and Miss Elizabeth C. Lowry

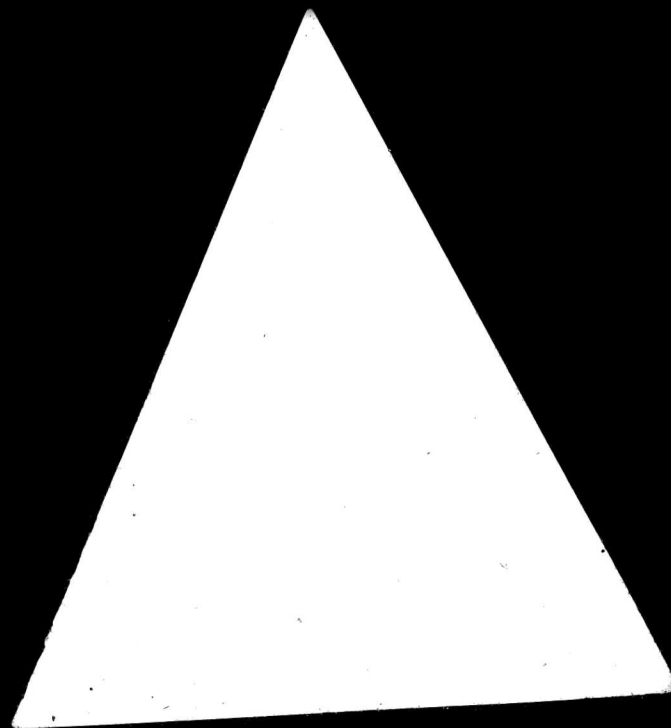
were joined in Matrimony by me this 21st day of November 1866. *Between Hundred*

and
Recorded November 26th. 1866. *Ad*

Atticus G. Haggood, M.G.

J. G. Campbell Ordinary.

rejoined in Matrimony by me this 21st day of November 1866. *Atticus G. Haggood*
and
Recorded November 26th, 1866, *40* Atticus G. Haggood, M.G.
J. Campbell Ordinary.



INSTRUCTIONS

of

STATE OF GEORGIA,

Fullton.....COUNTRY.

Ordinary's Certificate

Widow's Application

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

County Fulton
Name Mrs. Elizabeth Van Tassel
Widow of Mr. James A. Van Tassel
Date of Marriage Dec. 31, 1913
Date of Husband's Death Feb. 21, 1917
Company _____
Regiment _____
Approved DEC 27 1937 193

AUG 18 1937

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

James A. Van Tassel enlisted
in Co. C, 24 Regt. South Caro-
lina Artillery as a private
Apr. 15, 1862. Roll for Dec.
1864, last roll on file, shows
him present.

Lillian J. Anderson
Director Confederate Records Div.

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

James A. Van Tassel enlisted
in Co. C, 1st Regt. South
Carolina Infantry, April
13, 1862, at Ball's Bar, Va.
1864, last roll on file, shows
him present.

William Spindler
Director Confederate Records

Re: J. A. Van Tassel
Elizabeth Van Tassel
Fulton County, Ga.

Widow's Application

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

County.....Fulton
Name.....Mrs. Elizabeth Van Tassel
Widow of.....Mr. James A. Van Tassel
Date of Marriage.....Dec. 31, 1917
Date of Husband's Death.....Feb. 21, 1917
Company.....
Regiment.....
Approved.....DEC 27 1937
Director.

AUG 19 1937

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, Thomas H. Jeffries, Ordinary of said County, do certify
that I know Mrs. Elizabeth Van Tassel, the applicant for pension; that
she is the person she represents herself to be, and that she has been, continuously, a bona fide resident
citizen of said State since January 1st, 1920; that I also know Maggie Dickson
the witness who swears to the marriage of said Van Tassel and James A. Van Tassel, and 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 4th day of August, 1937.
(SEAL OF ORDINARY) Thomas H. Jeffries, Ordinary.

of Fulton County.

INSTRUCTIONS:

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Fulton COUNTY.

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

SECTION I.

- What is your name, and where do you reside? (Give Post Office and County)
Elizabeth Van Tassel, 58 Pine St. N.E., Atlanta, Ga. Fulton County
- How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? Fifty years
Give date, or year, of your birth. Aug. 7, 1887 Age? 50
- (1) When, (2) where and (3) to whom were you married?
Dec. 31, 1917, Atlanta, Ga. Mr. James A. Van Tassel
a. Have you married since the death of first and soldier husband? No
b. When and where did your first husband die? Feb. 21, 1917, Atlanta, Ga.
c. Were you residing together when he died? Yes
d. If not, how long had you resided apart?
e. Are you now a widow? Yes
f. Have you or your husband heretofore been paid a pension by the State? No
g. If so, when and for what cause were you or your husband placed on the roll?

SECTION II.

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

- When, where and in what Company and Regiment did your husband enlist as a soldier in
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry,
Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
Capt. Rickenbackers, Company 28, Regt. S.C.V.A.
- When and where did the Commands of your husband surrender or discharge from the Service?
- Was your husband personally present with his Command when it was surrendered or discharged?
- If he was not present, state specifically and clearly where he was?
- When did he leave the Command?
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?
- In what way was he prevented from going back to his Command?
- Was he captured by the enemy at any time?
- If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this

4th day of August, 1937.

Thomas H. Jeffries, Ordinary

of Fulton County.

(SEAL OF ORDINARY)

Elizabeth Van Tassel
Applicant.

3. Only widows who married prior to January 1, 1914, are eligible for pension.
 4. All applications must be made before the Ordinary of the County in which the applicant or witness reside and must be certified by such Ordinary.
 5. A widow entitled to pension is not eligible for a pension if she has remarried.
 6. If not this form of marriage license is obtainable. If not, prove marriage, by some person, or by general reputation.
 7. Do not take an application from any widow who is already receiving a pension.
 8. Do not take an application from any widow who is already receiving a pension.

Ordinary
 Fulton
 County.
 (SEAL OF ORDINARY)

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of Fulton

Before me, the Ordinary of said County, comes Mrs. Elizabeth Van Tassel who, after being duly sworn, deposes and says:

1. That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers;
2. That her deceased husband was not a pensioner of the State of Georgia at the time of his death, and, therefore, his Confederate military service has not heretofore been proven in connection with an application for pension;
3. That she is unable to obtain from any person or source evidence as to the Confederate military service of her deceased soldier husband;
4. That this affidavit is being made to authorize the use, as evidence, of any official record of said Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of the Adjutant-General, Washington, D. C.

Elizabeth Van Tassel

Sworn to and subscribed before me, this the

day of August, 1937.
H. J. Kemp Ordinary,
Fulton County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,

.....COUNTY.

.....of said State and County is hereby presented as a witness in support of the application of.....for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County).....
 How long and since when have you known.....applicant
2. Where does she now reside and since when has she been, continuously, a bona fide, resident citizen of this State?.....
3. When and to whom was she married?.....How do you know?
4. How long and since when did you know.....her husband?
5. When and where did.....the husband of applicant, die?
6. Were the applicant and her husband living together as husband and wife at the date of his death?
7. If not, how long.....live apart before his death? Were they divorced?
8. If the husband of the applicant was a pensioner, DO NOT answer the following questions.
 9. When, where and in what Company and regiment.....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 Company and Regiment? (Give date).....
12. When and where was his Command surrendered or discharged? (Give date and place).....
13. Were you personally present with this Command when it was surrendered? If not, where were you.....and how came you there?
14. Was the husband of applicant personally present with his Command at its surrender? If not where was he?.....and how came him there? When, where and for what cause did he leave his Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically).....
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?.....
16. What effort did he make to return to his Command and how do you know this?.....
17. Was he captured as a prisoner?.....If so, when and where? In what prison was he held?.....and when released?

Sworn to and subscribed before me, this the
day of....., 193.....
Ordinary
 of.....County.
 (SEAL OF ORDINARY)

(Witness)

WILSON T. AYERS

LEWIS E. WILLIAMS

AYERS & WILLIAMS.

HAY, GRAIN, HEAVY GROCERIES, FIELD SEEDS.
LIME, PLASTER, CEMENT, DOORS, SASH AND BLINDS.

PHONE 50.

ORANGEBURG, S. C. Jan 7, 1937

To all whom it may concern:

I hereby certify that
Mr. James Van Tassel was a member
of Capt. Rickenbacker's Company, 22
Regt. S.C.V.A.

C. R. Jones
Co. J. 22 Regt. S.C.V.A.

State of Georgia
County of Fulton.

Personally before the undersigned authority now
comes Maggie Dickson who upon oath
says that she knows Mrs. Elizabeth Van Tassel and
knows that she was living with her husband Mr. James A. Van Tassel
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 4 day of August 1937

H. J. Kern
O.C. Ordinary, Fulton Co., Ga.

Maggie Dickson

Court of Ordinary
FULTON COUNTY
STATE OF GEORGIA

CERTIFIED COPY OF
MARRIAGE LICENSE

AND
CERTIFICATE OF MARRIAGE
OF

MR. JAMES A. VAN TASSEL
AND

MISS ELIZABETH TAGGART

Recorded in Book U Page 14

THOMAS H. JEFFRIES
Ordinary.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. ELIZABETH VAN TASSEL, WIDOW OF JAMES A. VAN TASSEL,

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

ORDERED:

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

This, the 27th day of December 1937.

Dr. Thos. "Pat" G. V. Allen
Director, Confederate Division
State Department of Public
Welfare

MARRIAGE LICENSE

State of Georgia--Fulton County

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

You are hereby authorized and permitted to join in the honorable state of Matrimony MR. JAMES A. VAN TASSEL

and MISS ELIZABETH TAGGART

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

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

Given under my Hand and Seal this 18 day of Dec. 1913

JOHN B. WILKINSON L. S.
Ordinary

I hereby certify that MR. JAMES A. VAN TASSEL

and MISS ELIZABETH TAGGART

were joined together in the HOLY BANS OF MATRIMONY

on the 31 day of Dec. 1913, by me.

JERE A. MOORE, Minister

State of Georgia,
Fulton County.

ORDINARY'S OFFICE

S. H.

ATLANTA, GA. Dec. 4, 1913

H. T. KEMP

I, H. T. KEMP Clerk Court of Ordinary of said County, hereby certify

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

MR. JAMES A. VAN TASSEL

and MISS ELIZABETH TAGGART

as the same appears of record in this office.

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

day and year aforesaid.

H. T. Kemp
Clerk, Court of Ordinary.

State of Georgia,
Fulton County.

S. H.

ORDINARY'S OFFICE

ATLANTA, GA. Aug. 4. 1937.....19.....

H. T. KEMP

I, Clerk Court of Ordinary of said County, hereby certify

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

MR. JAMES A. VAN TASSEL

MISS ELIZABETH TAGGART

and

as the same appears of record in this office.

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

day and year aforesaid.

H. T. Kemp
Clerk, Court of Ordinary.



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

I, _____, hereby authorize

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

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____ day of _____, 1903. [L. S.]

Executed in presence of _____

To Those Herebefore Paid

1903.

No. 46

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. *Stanglin*

of *Fulton* County,

Widow of *W. W. Stanglin*

Co. _____ Regiment.

JOHN W. LINSEY,

Commissioner of Pensions.

WARRANT ISSUED

423 1903.

AND HANDLED TO

W. W. Stanglin

W. W. STANGLIN, STATE PRINTER, ATLANTA, GA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Hull

PERSONALLY COMES MRS.

Celena Vaughan

who, being sworn says on oath, that she is a bona fide resident of said County of Hull State of Georgia, and that she has resided in said State continuously ever since year 1832. That she is the Widow of William H. Vaughan who was a soldier in Company A of the Georgia Regiment of March Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to June 14 1862. That he lost his life on the 14 day of June 1862. (State here particulars of the husband's death, when, where and from what cause.)

He died while in the Army at Shar-
lotsville, Virginia, from disease con-
tracted while in the service.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1840.

I have been paid a pension as a resident of Troup County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me,

this 22nd day of January 1903.

Ordinary.

Post Office 250 Whitehall StAtlanta Ga

State of Georgia,

County of HullI, John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. Celena Vaughan, 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 1832.

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

Official
Seal.

Ordinary of

Hull

County.

NOTE.—All blank spaces must be filled.
Voucher must be made out and filed with this report, January 1st, 1903.

soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1842.

I have been paid a pension as a resident of Troup County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me,
this 22nd day of January 1903.
Ordinary.

Selma Vaughan
Post-Office 480 Whitehall St
Atlanta Ga

State of Georgia,

Troup County.

I, Johan R. McKinnon

Ordinary of said County, certify that I am well acquainted with Mrs. Selma Vaughan, 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 1842.

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

Official
Seal.

Ordinary of Troup County.

NOTE.—All blank spaces must be filled in by the Ordinary, and the seal must be placed in the space provided for the seal.

Georgia,

Troup

County.

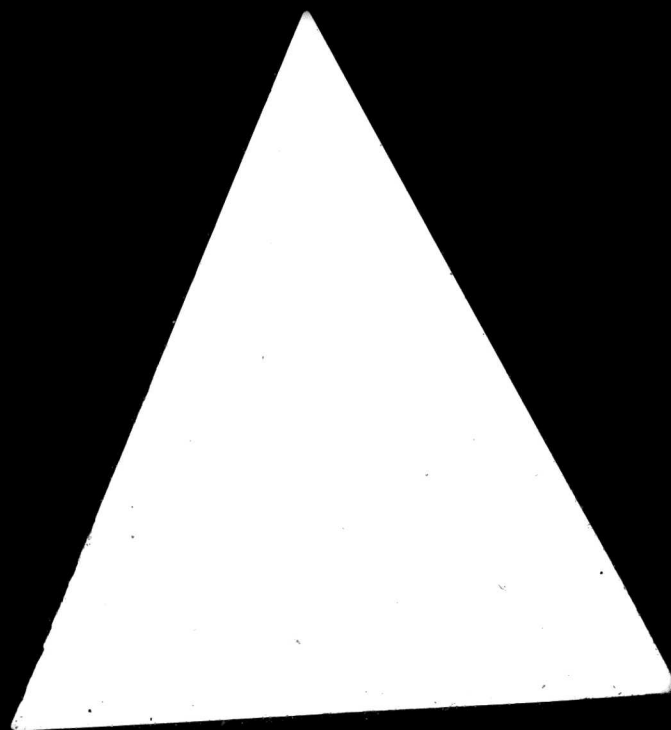
I the undersigned do certify that
County Troup Selma Vaughan now of the
is the same person who as a widow
pensioner was on the pension rolls of this county and drew a pension of \$6.00 dollars
for 1900, and the bearer is same.

Given under my hand and official seal of office

January 19th 1902

W. Strong, Ordinary [L. S.]

SEAL



Ex Dpt 7 March 1896
 The proofs are not satisfactory - The witnesses are negligent to such a fault that this reason for stating that death did come the loss of the arm - to say how they trace the epilepsy causing death to their injury -
 The app. sent by the phy-
 sian was raised the ability
 that was not a
 cause for the in-
 jury which was a
 was pronounced
 Rich - Johnson
 & C

Vaughan - Ex. P. 1896
 Fulton Rich Johnson
 County of

ACT DEC 16 1895

No. 3909
 Widow's Pension
 189
 Mrs. E. E. Vaughan
 56 1/2 Hill
 County of Fulton
 Widow of W. A. Vaughan
 Warrant issued 5/20 96 189
 and handed to
 Applicant.

RICHARD JOHNSON,
 Sec. Ex. Dep.

SEE 'D' HANDBOOK STATE OFFICES

POWER OF ATTORNEY.
 STATE OF GEORGIA.
 County of
 I, _____
 of _____
 to receive and receipt for the pension allowed and request that the writ come to
 at _____ day of _____ by _____
 Witness my hand and seal this _____ day of _____ 189____
 Executed in presence of _____
 [seal]
 I hereby authorize

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
at by 189
Witness my hand and seal this day of
Executed in presence of

[SEAL]

Vaughan, Geo. E., (MRS.)
In the City of
County of

ANT DEC 18 1896

No. 3909

Widow's Pension

189

Mrs. E. E. Vaughan

County of

Widow of W. A. Vaughan

Warrant issued 5/20 96

and handed to

Applicant.

RICHARD JOHNSON,
Sec. R. D.

Ex Bk 7 March 1896
The proofs are on sub-
inspecting - The on-
are on file to a
fully this name for
stating that no
and from the
am - to go
Trace the
my are to the
The off-
an account
which was
and from
my from
this person
Rich -

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA, } Personally came Mrs. E. E. Vaughan
COUNTY OF Fulton } who says on oath she is the
widow of W. A. Vaughan } to whom, in the County of
Fulton } she was married on the
22 day of November 1860, that she remained his wife up to the 13th
day of April 1894, at which time he died, and that she has not since married.
At the time of his death he was a resident of Fulton County, in said State of
Georgia, and was on the invalid pension roll of the State of Georgia, having been allowed a pension of
\$ 100. per annum on account of there state the grounds of his disability:
loss of his arm during the late
war

that the cause of his death was as follows: here set out fully the facts connected with and causing death:
How the injury received during his
service in the late war, the loss
of his arm from which he never
recovered, resulting in his death
from convulsions since the loss of his
arm up to the time of his death.

Dependent further says that she is now a resident of Fulton County and has con-
tinuously resided in the State of Georgia since the 14 day of Oct 1892
She applies for the pension provided by Act of the General Assembly, approved December 18th, 1895.
Sworn to and subscribed before me this 10 day of February 1896
Mrs. E. E. Vaughan
Ordinary of Fulton County
M. L. Bachman

Note - All blank spaces must be filled before signing.

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

STATE OF GEORGIA. } *M. L. Calhoun* Ordinary
COUNTY OF *Fulton* } in and for said County of *Fulton*
State of Georgia, hereby certify that I am acquainted with Mrs. *C. E. Vaughan*
the applicant for a pension in this case, and know from my own knowledge (or from positive proof pre-
sented to me by reputable witnesses) that she resides in this County, and that she has resided in the State
of Georgia continuously since the *14th* day of *October* *1842*, and has not lived out
of the State since that date. I also certify that the witnesses to wit: *T. M. Smith*
J. R. Mobley and *J. D. Roberts*, whose testimony she pre-
sents to sustain her claim, are known to me to be faithful witnesses, entitled to full faith and credit as such,
and that the full text of the affidavit was read to and understood by them before same was signed. I am
fully satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses
to read or hear read the proofs they sign.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
14th day of *February*, *1896*.
M. L. Calhoun Ordinary

NOTES.

The pension is only payable to those widows whose husbands were on the Invalid Pension Roll (Act
of 1887) and Amendments) at the time of death, and who died from the injuries or disease for which they
were pensioned. The marriage must have existed at the time the injury was received or disease contracted
for which the pension was granted, and the widow must have remained unmarried since the death of such
husband.

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

Affidavits must be made in presence of the Ordinary.

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA. } Personally came *T. M. Smith*,
COUNTY OF *Fulton* } *J. R. Mobley* and *J. D. Roberts*
known to me to be reputable and truthful persons who severally say on oath that from
their own personal knowledge Mrs. *C. E. Vaughan* who made
the foregoing affidavit is the widow of *W. D. Vaughan*, who died
in *Fulton* County and State of *Georgia* on the *13*
day of *April* *1894*, and that she has not since married, that she became his wife
on the *22* day of *March* *1860*, and so remained up to the time of his death,
and that she has resided in this State continuously since the *14* day of *Oct* *1842*.
Deponents further say that the cause of his death was as follows (here set out fully the facts connected with and
causing death, giving your opportunities for knowing such facts):

*Intense dysentery of his death was the
the cause of his death during the last
year. The signs developing in to
Epileptic Convulsions Epileptic
Paralysis resulting in death.*

We have no personal interest in the pension asked for.

Sworn to and subscribed before me this *14th* day of *February*, *1896*.
M. L. Calhoun Ordinary *Fulton* County, Georgia

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA. } Personally came before me
COUNTY OF *Fulton* } and
both of whom are known to me to be reputable physicians, who say on oath that they personally knew
W. D. Vaughan mentioned in the foregoing affidavit, that he
died on the *13* day of *April* *1894*, and that the cause of his death was as
follows, state disease, time of treatment, etc.

*General Paralysis. I was called to see Mr. W. D. Vaughan
April 17, 1894 and treated him until the 23rd when he died.
I also treated him for 2 years before for Epileptic
Convulsions which I believe was caused from the loss of
his arm (or injuries which he received during the last year)
or some disease which caused him to lose his arm. I was called to see him
on the 13th day of April 1894 and he died on the 13th day of April 1894.
Sworn to and subscribed before me this
+ *W. H. Byrd* M.D. *Arch. Aray* M.D.
M. L. Calhoun Ordinary of *Fulton* County*

13. Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the
 13th day of June 1897.

Term No. 1

Term No. 1

County.

1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 26

1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 26

State of Georgia,

Executed in presence of

Executed in presence of
R. C. Smith
Hutton County Ga

Vaughan, E. E.
 of the Court
 for the County of ...
 1888.
 NO. 222
 WIDOW'S PENSION,
 Further ending February 16th, 1898.
 TO
 Mrs. E. E. Vaughan
 of
 Fullton County
 Widow of M. J. Vaughan
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT ISSUED
 2/19
 AND FORWARDED TO
 J. B. Polity
 1898.

1897. IN THE DISTRICT C. T. A.
 No. 1152
QUIDDO'S PENSION.
 for year ending February 15th 1897.
 PAID TO
Wm E. Chaghtal
 of
Butler County
W. A. Douglas
 RICHARD JOHNSON,
 Commissioner of Pension.
 WARRANT ISSUED
 2/3
 AND HANDED TO
Chas
 1897.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Fulton

Personally Comes Mrs.

E. E. Vaughan

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

Fulton

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

continuously ever since *1860 Oct*

1862 That she is the Widow of

H. A. Vaughan

who was a Soldier in Company

of the

Regiment of

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

1861 and served in the Army up to

1861

That he lost his

life on the

day of

18

State here

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

Death from injuries received in war. The loss of one arm.

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 1860, that Georgia is her home and she resided in this State 23rd day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of *Fulton* County for the year ending February 15th, 1890, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me this *23rd* day of *July* 1897.

Mrs. E. E. Vaughan Ordinary.

Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Fulton

Personally Comes Mrs.

E. E. Vaughan

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

Fulton

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

continuously ever since

1860 Oct

1862 That she is the Widow of

H. A. Vaughan

who was a Soldier in Company

of the

9th

Regiment of

Georgia

Volunteers, that he enlisted in said regiment on or about the month of *4th day of March*

1862 and served in the Army up to

1st July

1863 That he lost his

life on the *Beal of Bridge Creek*

18

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

Death from injuries received in war.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been allowed a pension as a resident of *Fulton* County for the year ending February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.

Sworn to and subscribed before me, this *23rd* day of *July* 1898.

Mrs. E. E. Vaughan Ordinary.

Post-Office

State of Georgia,

Fulton

County.

I, *H. H. Hensley*

with Mrs. *E. E. Vaughan*

who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she

has continuously resided in this State since the

23rd

day of

July

1890

Given under my official signature and seal this the

day of *July* 1898.

H. H. Hensley

Ordinary of *Fulton* County.

Official Seal.

POWER OF ATTORNEY.

State of Georgia,

Walton County.

I Mrs E. E. Vaughan hereby authorize J. B. Roberts of Atlanta Ga

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

Robert Knight at Walton Ga

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

day of February 6 1899. Mrs E. E. Vaughan [L. S.]

Executed in presence of

R. C. Knight only.

Vaughan, E. E. Mrs
Walton Co

For Those Hereofore Paid.

1899.

NO. 908

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAY TO

Mrs. E. E. Vaughan

Walton County

Widow of Robert H. E.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

27 1899.

AND HANDLED TO

J. B. Roberts

GEO. W. JOHNSON, STATE PRINTER, ATLANTA.

Vaughan, E. E. Mrs
Walton County
TO Those Hereofore Paid

1900. I-V

NO. 997

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAY TO

Mrs. E. E. Vaughan

Walton County,

Widow of R. A. Vaughan

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 14 1900.

AND HANDLED TO

R. C. Knight

GEO. W. JOHNSON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Walton County.

I Mrs E. E. Vaughan hereby authorize

H. A. Knight of Atlanta Ga

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

Robert Knight at Walton Ga

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

day of Feb 14 1900. Mrs E. E. Vaughan [L. S.]

Executed in presence of

R. C. Knight only.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Walden

Personally Comes Mrs.

E. E. Vaughan

FULTON

who, being sworn, says on oath, that she is a bona fide resident of said county of
State of Georgia, and that she has married in said State
continuously ever since 14th Dec 1842 That she is the Widow of
Frederick Vaughan who was a soldier in Company
of the 9th Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of 4th March
1862 and served in the Army up to 1st July 1863 That he lost his
life on the Battle of Gettysburg 1863 (State here
full particulars of the husband's death, when, where and from what cause.)

Died from injuries received
in battle.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been allowed a pension as a resident of FULTON County for the year ending
February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.

Sworn to and subscribed before me, this 6th day of Feb 1899,
B. C. Knight Ordinary.
Post-Office Walden Ga

State of Georgia, Walden County.

I, B. C. Knight, Ordinary of said County, certify that I am well acquainted
with Mrs. E. E. Vaughan who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the 23rd day of Dec 1860.

Given under my official signature and seal this 6th day of Feb 1899.

Official
SealOrdinary of FULTON County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

Edna E. Vaughan

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

Fulton State of Georgia, and that she has resided in said State
continuously ever since her birth 1863 That she is the Widow of
William A. Vaughan who was a soldier in Company
6 of the 11th Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of March

1862 and served in the Army up to 2nd day of July 1863 That he lost his
life on the 2nd day of July 1863 (State here
particulars of the husband's death, when, where and from what cause.)

He was shot
in the hand and leg arm
soon afterwards and afterwards
was carried blood poison & paralysis
which caused his death

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, and that she became his wife in the year 1867.

I have been allowed a pension as a resident of Fulton County for the year ending
February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this 2nd day of July 1900,
B. C. Knight Ordinary.
Post-Office Walden Ga

State of Georgia,

Walden County.

I, B. C. Knight, Ordinary of said County, certify that I am well acquainted
with Mrs. E. E. Vaughan who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the 26th day of July 1864.

Given under my official signature and seal this 2nd day of July 1900.

Official
SealOrdinary of Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Walton County,

I, Mrs E. E. Vaughan hereby authorize
W. A. Wright of Atlanta, Ga.

to receive and receipt for the pension paid hereon and request that he remit same to
Ordinary Walton Co. at Monroe, Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 8th

day of January 1901.

Mrs E. E. Vaughan [L. S.]

Executed in presence of

R. C. Wright

Bank check to R. C. Wright Ord. Jan 18th
1901. Monroe Ga

POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

I, _____ hereby authorize
_____ of _____

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

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

day of _____ 1902.

[L. S.]

Executed in presence of

Virginia E. E. Vaughan
Fulton County

To Those Heretofore Paid.

1901.

No. 273

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. E. E. Vaughan

or

County,

Fulton

Widow of William A. Vaughan

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Jan 17 1901.

AND HANDLED TO

Wright

No. 128

Virginia E. E. Vaughan
Fulton Co

To Those Heretofore Paid.

1902.

No. 128

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. E. E. Vaughan

or

County,

Fulton

Widow of W. A. Vaughan

Co.

Regiment

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Jan 15 1902

AND HANDLED TO

Wright

STATE OF GEORGIA

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

Edna V. Vaughan

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since 1852 That she is the Widow of William A. Vaughan who was a soldier in Company C of the 9th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1862 and served in the Army up to 2nd day July 1863 That he lost his life on the 15th day of April 1863 (State here particulars of the husband's death, when, where and from what cause) From loss of left arm, receiving blow from

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852 I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1901, and now apply for the pension provided by law for the year ending February 15th, 1902.

Sworn to and subscribed before me, this 8 day of January 1901. R. C. Knight Ordinary. Post Office Monroe, Ga.

State of Georgia,

County of Fulton

Ordinary of said County, certify that I am well acquainted with Mrs. E. E. Vaughan 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 1852 day of January 1901.

Given under my official signature and seal, this the 8 day of January 1901.

Official Seal.

R. C. Knight

Ordinary of Fulton County.

POWER OF ATTORNEY

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA.

County of Fulton

PERSONALLY COMES MRS.

E. E. Vaughan

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since 1850 That she is the Widow of W. A. Vaughan who was a soldier in Company 9th Regiment of May Volunteers, that he enlisted in said regiment on or about the month of May and served in the Army up to 2nd July 1863 That he lost his life on the 13th day of April 1863 (State here particulars of the husband's death, when, where and from what cause) from blood poison, caused by loss of arm, and paralysis,

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1859

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1901, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me, this 13 day of January 1902. Mrs. E. E. Vaughan Post Office Fulton

State of Georgia,

County of Fulton

Ordinary of said County, certify that I am well acquainted with Mrs. E. E. Vaughan 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 1850 day of January 1902.

Given under my official signature and seal, this the 13 day of January 1902.

Official Seal.

R. C. Knight

Ordinary of Fulton County.

NOTE.—All blank spaces must be filled. Voucher and affidavit must bear date after January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

In Witness Whereof, I have hereunto set my hand and seal, this
day of _____ 1903.

[L. S.]

Executed in presence of _____

Vaughan, E. E. (m)
Fulton County

To Those Hereinbefore Paid

1903.

No. 132

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mr. E. E. Vaughan

Widow of _____ County.

W. A.

Co. _____ Regiment _____

JOHN W. LINDSEY,

Comptroller of Pensions.

WARRANT ISSUED

1903.

AND HANDLED TO

W. A.

Vaughan, E. E. (m)
Fulton County
TO THOSE HEREINbefore PAID.

1904.

No. 79

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mr. E. E. Vaughan

OF

Fulton County.

Widow of *W. A.*

Co. _____ Regiment _____

JOHN W. LINDSEY,

Comptroller of Pensions.

WARRANT ISSUED

1904.

AND HANDLED TO

W. A.

JOHN W. LINDSEY, Comptroller of Pensions.

Allowed Pensions

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES MRS.

E. E. Vaughan

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has husband in said State continuously ever since 1850. That she is the Widow of W. A. Vaughan who was a soldier in Company E of the 9th Regiment of Infantry Volunteers, that he enlisted in said regiment on or about the month of May 1862, and served in the Army up to and July 1863. That he lost his life on the 13th day of April 1863. (State here particulars of the husband's death, when, where and from what cause.)

Died from blood poison caused by low fever and paralysis

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1859.

I have been paid a pension as a resident of _____ County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this day of JAN 22 1903 1903,
John R. Wilkinson Ordinary, Post Office _____
Mrs E. E. Vaughan

State of Georgia, Fulton County, I, John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. E. E. Vaughan 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 1850.

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

Official Seal

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

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES MRS.

E. E. Vaughan

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since 1850. That she is the Widow of W. A. Vaughan who was a soldier in Company E of the 9th Regiment of Infantry Volunteers; that he enlisted in said regiment on or about the month of May 1862, and served in the Army up to and July 1863. That he lost his life on the 13th day of April 1863. (State here particulars of the husband's death, when, where and from what cause.)

Died from blood poison caused by loss of large and paralysis

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1859.

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.


Sworn to and subscribed before me, this day of JAN 22 1904 1904,
John R. Wilkinson Ordinary, Post Office _____
Mrs E. E. Vaughan


State of Georgia, Fulton County, I, John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. E. E. Vaughan 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 1850.

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

Official Seal

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

herself to be, and that she has continuously resided in this office since
 day of 1922
 Given under my official signature and seal, this the 22 day of JAN 22 1903 1903.

 Ordinary of Fulton County.
 NOTE - All blank spaces must be filled.
 Voucher and Acknowledgment must have date after January 1st, 1904.

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

 Ordinary of Fulton County.
 NOTE - All blank spaces must be filled.
 Voucher and Acknowledgment must have date after January 1st, 1904.



State of Georgia,
 Executive Office,
 Atlanta.

12 March 1896.

Mrs E E Vaughan
 City -
 Madam -

I enclose herewith a copy
 of the law under which you are seeking to
 get a pension - You will notice that death
 must have resulted from the effects of the
 injury for which the pension was granted - i.e.
 the loss of an arm - The witnesses say his death
 was caused from the loss of the arm, because thereby
 epileptic convulsions & partial paralysis were devel-
 oped - What the witnesses are wanted to show is
 how do they know that facts are as stated - what
 leads them to believe the resulting epilepsy & paraly-
 sis came from the loss of the arm - In the original
 application if I am not mistaken the witnesses
 traced the disease above mentioned to hardships
 of the service outside the loss of the arm - at any
 rate they must give some reason for their present
 opinion - The law states must not think such
 reasons that the loss of the arm caused the



State of Georgia,
 Executive Office,
 Atlanta.

disease is not satisfactory - because it does
 not convince me that what they say is fact -
 They may be honestly mistaken and if so it
 ought to be known -

The affidavit made by the physicians does
 not preclude the idea that he died from other
 causes than the loss of his arm - in the con-
 trary it says almost directly that other causes
 may have produced death - if his death was
 caused from loss of the arm alone, they should
 say so and give such a detailed history of
 the case as shows why they say so -

You can attach to the applica-
 tion such affidavits as you desire - same
 being made on separate sheets of paper -

Respect

Rich Johnson
 Sec Ex Off

how do they know that facts are as stated -
leads them to believe the resulting epilepsy & paralysis
came from the loss of the arm - In the original
application if I am not mistaken the witnesses
traced the disease above mentioned to hardships
of the service outside the loss of the arm - at any
rate they must give some reason for their present
opinion - The board state much without such
reasons that the loss of the arm caused the

being made on separate sheets of paper -
Respt
Rich Johnson
Sic R. J. H.

I. Doctor J. A. May 18th 1890
This is to certify
that I knew Mr. M. T. Vaughan
a number of times during the
years of 1864 as well as I
remember and he complained of
the most excruciating pain
in the "thump" of the arm
he had amputated in consequence
of gunshot wound received
during the war between the
States. I saw him to a
number of epileptic convulsions
during the period I rendered
professional service & think the
exquisite pain he realized in stumps
of his arm was the prime
cause of said epileptic convulsions.

II
I know Mr. M. T. Vaughan
well before the war and know
him to have been one of the
hunted game men of our
country. I think there is no
doubt about epileptic convul-
sions occasionally culminating
in paralysis as I have seen
several cases of Hemiplegia
& other varieties of paralytic
habit result from epileptic
convulsions. With such
assurance I am very respectfully
M. D. Gallaway M. D.
George's
Occasionally appeared M. D. Gallaway
Wallace County Mo. who am oath-bound that the state-
ments contained in the foregoing certificate
are true as stated
as above and observed before me May 15th 1890
A. C. Cook Attorney M. D. Gallaway M. D.
Wallace County

Georgia
Fulton County

3

Personally Exam before
Mr. J. M. Smith & R. H. Noble
J. B. Askerath

Now on oath says they know W. A. Vaughan
the deceased husband of E. E. Vaughan. That
he lost his arm in Confederate service
that before he lost his arm he was a
stout, able bodied man & enjoyed good
health, that after wards he would fre-
quently have Convulsions & Complaint of
his arm hurting him, that these Convulsions
became more frequent as he grew older
and more severe, that he continued to
have them along from the time he lost
his arm until his death, that they know
him all the time and never knew him to
have any other disease or sickness except
that caused from his arm, that they were
familiar with him all the while & if he
had contracted any other disease or had
been afflicted in any other way or would
have known it, that whenever he would
have these Convulsions he would inevi-
tably begin to complain of his arm
and would suffer extremely until
the Convulsion would come on, and
from these facts we know that the loss of
his arm was the cause of his suffering
and finally his death. We have no
over

his arm was the cause of his suffering
and finally his death. We have no
over

interest in the pension and make
these statements solely from what we
have known and seen. We further state
that these convulsions left him completely
helpless for weeks and some times he
would have the second one before
he could recover. That but a short time
intervened from the time he lost his arm
till he was partially paralyzed on the right
side and he continued to grow worse
which was the side he lost his arm -
and that was the side the pain & suffering
would invariably begin in.

Given to & subscribed by his Son
John M. G. G. J. M. & Son
with who is a witness J. H. Noble
Witness May 1878 J. H. Noble
J. H. Noble
Ordinary

23. 1878
Witness
J. H. Noble

AN ACT

To provide for and authorize the payment of pensions to
certain widows of Confederate soldiers who are on the
invalid pension roll, and have died from the effects of
the injuries for which they were pensioned.

SECTION 1. Be it enacted by the General Assembly of
Georgia, That the widow of every Confederate soldier
who was on the invalid pension roll of the State of Georgia,
on account of wounds received or disease contracted while
in the Confederate service, and who has died from the
effects of the injuries for which he was pensioned, shall
be allowed a pension of sixty dollars per annum from the
date of this Act, so long as she remains the widow of such
deceased pensioner; provided, said widow was married
to, or was the wife of, said Confederate soldier during the
date of service in said Confederate army.

SEC. II. Be it further enacted by the authority afore-
said, That the Governor be, and he is, hereby authorized
to draw his warrants on the treasury of this State in
favor of each and every widow who shall furnish satis-
factory proof that her deceased husband was on the Georgia
invalid pension roll at the time of his death, that he is
dead, that he died from the effects of the injuries for
which he was pensioned, and that she is still his widow.
That said warrants shall be for sixty dollars each, and
shall be payable yearly so long as the applicant remains
the widow of the deceased pensioner.

SEC. III. Be it further enacted, That all laws and parts
of laws in conflict with this Act be, and the same are,
hereby repealed.

Approved December 10, 1865.

22. Vaughan
C. H. Vaughan
C. H. Vaughan

which he was pensioned, and that she is still the widow.
That said warrants shall be for sixty dollars each, and
shall be payable yearly so long as the applicant remains
the widow of the deceased pensioner.

SEC. III. Be it further enacted, That all laws and parts
of laws in conflict with this Act be, and the same are,
hereby repealed.

Approved December 10, 1895

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I,

of

do hereby authorize

to receive and accept for the parties above named and myself that in such cases to

Witness my hand and seal this

day of

1909

Executed in presence of

INDICANT PERSON

1909

Name of Person

County

City

Approved

JOHN W. [illegible]

WATKINS

1947-1948

POWER OF ATTORNEY

STATE OF GEORGIA

COUNTY

AFFIDAVIT OF PHYSICIANS

STATE OF GEORGIA

Tulmon

COUNTY

Personally came before me C. R. King M.D. and

Thos. D. Lohr both known to me as reputable physicians

of said County, who, being severally sworn, say on oath that they have examined carefully

Elias L. Vaughan applicant for pension under Section 1864, Code, and after

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

He is a former member of the Georgia Infantry, 1st Regt., 1st Div., 1st Corps, and was wounded in the right arm and leg during the battle of Chickamauga.

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

Subscribed and sworn to before me this 10th day of August, 1909. C. R. King M.D. Thos. D. Lohr M.D. Ordinary.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA

Tulmon

COUNTY

I, John R. Cockburn Ordinary, in and for said County, hereby certify

that the applicant E. L. Vaughan resides in said County, and has

been a bona fide resident of this State since the 10th day of August, 1909

and that the witnesses, viz: John R. Cockburn

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

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

I further certify that the tax digest of Tulmon County shows that applicant

returned for taxation in his name in 1901 Dollars of

property, and in 1902 Dollars of property; in 1903

Dollars of property; in 1904

Dollars of property; in 1905

Dollars of property; in 1906

Dollars of property; in 1907

Dollars of property.

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

Witness my hand and seal of office this 10th day of August, 1909. John R. Cockburn Ordinary.

Tulmon County

Before me, John R. Cockburn Ordinary, on the above stated day and at the place above stated, the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digest of Tulmon County shows that applicant returned for taxation in his name in 1901 Dollars of

property, and in 1902 Dollars of property; in 1903

Dollars of property; in 1904

Dollars of property; in 1905

Dollars of property; in 1906

Dollars of property; in 1907

Dollars of property.

QUESTIONS FOR APPLICANT

STATE OF GEORGIA

Tulmon

COUNTY

Elias Lafayette Vaughan of said State and County, desiring to avail himself of the Pension Act (Section 1864, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.) Elias Lafayette Vaughan, Tulmon Co., Tulmon County, Ga.

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

3. When and where were you born? Sept. 10, 1854, in Tulmon Co., Ga.

4. When and where and in what company and regiment did you enlist or serve? 1st Regt., 1st Div., 1st Corps, Georgia Infantry.

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

6. When and where was your company and regiment surrendered and discharged? At the close of the war in Tulmon Co.

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

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

9. How much can you earn (gross) per annum by your own exertions or labor? Unable to earn more than \$10.00 per annum.

10. What has been your occupation since 1865? Preaching.

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

12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight. I was wounded in the right arm and leg during the battle of Chickamauga, and have been unable to work in that trade ever since, and can come or can hardly do any work at all or around it.

13. What property, real and personal, or income, do you possess, and its gross value? No property, real or personal.

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? None.

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

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? By preaching.

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Cost \$10.00 per annum, and I contributed nothing.

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? Preaching, \$10.00 per annum.

19. Have you a family? If so, who composes such family? Give their means of support. Have they a home, stand, or other property? Their ages and how employed? Yes, wife only, my preaching.

20. Are you receiving any pension? If so, what amount and for what disability? No pension as yet.

21. Have you ever made an application for pension before? No, have not.

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

Subscribed and sworn to before me this 10th day of August, 1909. Elias Lafayette Vaughan Applicant.

John R. Cockburn Ordinary.

Tulmon County.

Before me, John R. Cockburn Ordinary, on the above stated day and at the place above stated, the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digest of Tulmon County shows that applicant returned for taxation in his name in 1901 Dollars of

property, and in 1902 Dollars of property; in 1903

Dollars of property; in 1904

Dollars of property; in 1905

Dollars of property; in 1906

Dollars of property; in 1907

Dollars of property.

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

Witness my hand and seal of office this 10th day of August, 1909. John R. Cockburn Ordinary.

Tulmon County

Ordinary's Certificate

STATE OF GEORGIA,

Macon COUNTY

I, Wm. H. Doffner Ordinary of said County, certify that I know the applicant Elias L. Vaughan for pension is the person he represents himself to be and resides in said county. That I also know the affidavit swearing to the facts that he is resident of said county and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 27 day of Sept 1920

Wm. H. Doffner Ordinary

of Macon County

(SEAL)

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you give shall be the whole truth. So help you God." 2. Additional affidavits may be attached if blank spaces are insufficient. 3. All affidavits must be made before the Ordinary of the county in which the applicant or witness resides and must be certified by such Ordinary.

Naughton, Elias L.
Fulton
Nov. 13, 1914
E. 63

**Confederate
Soldier's Application**
Under Act 1910, As Amended by Act of 1919.

County Fulton
Name Elias L. Vaughan
Company E.
Regiment 63rd Va. Inf.
Approved _____

10/13/1920

J. W. LINDSEY,
Commissioner of Pensions
Bapt. Reform Ch. 2nd St. N. Albany, Ga.

Application for Soldier's Pension Under Act 1910 Amended by Act 1919

Questions For Applicants to Answer

STATE OF GEORGIA,

Fulton COUNTY

Elias L. Vaughan of said State and County, hereby applies for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and submit his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give County and Post-office)
Elias L. Vaughan, 36 Larkin St., Atlanta, Ga.

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

3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from 1861 to 1865?
Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
Spring of 1861, Bristol, Va., Co. "E", 63rd Va. Inf.

5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge)
From enlistment to surrender

6. When and where was your Company and Regiment surrendered or discharged from the Service?
April 1865, Macon, Ga., Company captured

7. Were you actually present with your command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were. Escaped when the Federal troops sought to capture company

a. Where was your command when you left it? Macon, Ga.

b. When did you leave the command? April 1865

c. For what cause did you leave? Federal troops captured company

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? Army surrendered

g. In what way were you prevented? Company held as prisoners until after surrender

h. What effort did you make to return?

i. Were you captured during the war? No

j. If so, when, and where? In what prison were you held and when were you released?

9. Are you drawing a pension of any amount from this State or the United States? No

10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?
Never applied

Sworn to and subscribed before me, this the

26 day of March 1920 Elias L. Vaughan

Wm. H. Doffner Ordinary

of Fulton County

(SEAL)

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
Elias L. Vaughan, who upon oath says:

That he was a member of Company "E", 63rd Va. Reg. of
Infantry and served with said company and regiment from his enlistment
at Bristol, Va., in the Spring of 1861 until the capture of his com-
pany at Macon, Ga., in April 1865 just before the surrender of the
Confederate Army. That he has made every effort to locate some mem-
ber of said company and regiment who could make affidavit as to his
service in the Confederate Army and has been unable to do so and he
now knows of no living member of said company and regiment.

Sworn to and subscribed before me
this March 2, 1920.

Thomas H. Jeffries
C C ORDINARY FULTON CO., GA.

Elias L. Vaughan

STATE OF GEORGIA.
COUNTY OF FULTON.

I, THOMAS H. JEFFRIES, Ordinary of Fulton County,
hereby certify that I am personally acquainted with Elias L. Vaughan,
the within applicant, having known of him and of his good works as
a Minister of the Gospel for more than thirty years. He is an honor-
able and upright gentleman, of fine character and high integrity and
any statement made by him is entitled to all faith and credit.

This March 2, 1920.

Thomas H. Jeffries
Ordinary Fulton Co., Ga.

STATE OF GEORGIA.
COUNTY OF FULTON.

I, THOMAS H. JEFFRIES, Ordinary of Fulton County,
hereby certify that I am personally acquainted with Elias L. Vaughan,
the within applicant, having known of him and of his good works as
a Minister of the Gospel for more than thirty years. He is an honor-
able and upright gentleman, of fine character and high integrity and
any statement made by him is entitled to all faith and credit.

This March 2, 1920.


Ordinary Fulton Co., Ga.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Wheeler County.

Subscribed and sworn to before me this

21st day of March 1897.

to receive and receipt for the pension allowed and payable to said

John M. McGehee

Witness my hand and seal this 10th day of April 1897.

Notary Public for

John M. McGehee

John M. McGehee

Wheeler, Georgia
Wheeler County
No. 234

INDIGENT PENSION
1897.

Name John M. McGehee

County Wheeler

Approved [Signature] 1897.

WARRANT RETURNED TO

John M. McGehee

4/16/97

Helix elongata -

Fletcher County

Question must be Answered.

Vaughn, Felix -
 Bristol County
 No. 2318
 Fustong

INDIGENT PENSION
1897.

Name Felix Waughen
County Fulton

1897.

TO OBTAIN FURTHER INFORMATION

6/6/92
Mr. Melrose

QUESTIONS FOR WITNESS. STATE OF GEORGIA.

Fulton County. }
R. A. Randall of said State and County, having been presented as a witness in support of the application of F. A. Vaughan for pension under the Act approved December 16th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside?
R. A. Randall, Atlanta, Fulton County
2. Are you acquainted with F. A. Vaughan, the applicant, is of how long have you known him?
Forty years
3. Where does he reside, and how long has he been a resident of this State?
Fulton
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this?
Yes - Was in the same Company
5. When, where and in what company and regiment did he enlist?
Enlisted in Atlanta in 1862 - in Company B 1st Ga. Battalion
6. Were you a member of the same company and regiment?
Yes
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service?
Three years. Was a good soldier - was discharged because the war was at an end.
8. What property, effects or income has the applicant? (Give your means of knowledge.)
None - I know because of personal acquaintance and constant association with him.
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same?
Had none
10. What is the applicant's occupation, and physical condition?
His physical condition is such that he is unable to work from Rheumatism & Chronic Disease - He does odd jobs
11. Is the applicant unable to support himself by labor of any sort, if so, why?
Applicant is unable to support himself because he is physically unable to do any little work.
12. How was he supported during the years 1895 and 1896?
By his own earnings and the help of his children
13. What portion of his support for those two years was derived from his own labor or income?
About One Third
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 16th, 1894?
He constantly complains of Rheumatic troubles & Chronic Disease
15. What interest have you in the recovery of a pension by this applicant?
None

Sworn to and subscribed before me, this 4 day of July, 1897.
R. A. Randall Witness.
W. H. Hulse Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, }
Fulton County. }
 Personally came before me J. G. Pierce and W. H. Rice, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully F. A. Vaughan, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:
On examination find he is a Chronic sufferer of Rheumatism & Rheumatism also had Chronic Indigestion all of which disables him from doing any manual labor.
 We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.
 Sworn to and subscribed before me, this 4 day of July, 1897.
J. G. Pierce Ordinary.
W. H. Rice

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, }
Fulton County. }
 I, W. H. Hulse, Ordinary in and for said County, hereby certify that the applicant F. A. Vaughan resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: J. G. Pierce & W. H. Rice are of trustworthy character and that their statements are entitled to full faith and credit.
 I further certify that before answering the foregoing questions, the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same was signed.
 I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1895, none dollars of property, and in 1896, none dollars of property.
 In my opinion the foregoing claim is made in good faith.
 Witness my hand and seal of office, this 5 day of July, 1897.
W. H. Hulse Ordinary
 of Fulton County.

NOTE.
 Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the answers you shall give will be the whole truth, so help you God." Additional affidavits may be attached if blank spaces are furnished.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Felix A. Vaughan 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 _____ 1833; that he is 65 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years in Company B, of 9th Regiment of Sa. Bat. Artillery; that his physical condition is as follows:

Chronic diarrhea - General debility
that his property consists of the following items _____

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of Fulton county been allowed a pension for the year 1898.

Sworn to and subscribed before me, this, the _____ day of Jan, 1898, W. H. Hulsey Ordinary.

State of Georgia,

Fulton County.

I, W. H. Hulsey Ordinary of said County, do certify that I am well acquainted with Felix A. Vaughan 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 _____ 1898,

day of

W. H. Hulsey Ordinary Fulton County.

NOTE.—The blank space must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Felix A. Vaughan 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 _____ 1833; that he is 65 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years in Company B, of 9th Regiment of Sa. Bat. Artillery; that his physical condition is as follows:

Chronic diarrhea - General debility
that his property consists of the following items _____

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of FULTON county been allowed a pension for the year 1898.

Sworn to and subscribed before me, this, the _____ day of Jan, 1898, W. H. Hulsey Ordinary.

State of Georgia,

FULTON County.

I, W. H. HULSEY Ordinary of said County, do certify that I am well acquainted with Felix A. Vaughan 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 _____ 1898,

day of

W. H. Hulsey Ordinary FULTON County.

NOTE.—The blank space must be filled.
NOTE.—An affidavit should not be situated before January 1st, 1899.

Note.—The blank spaces must be filled.

Ordinary _____ County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of _____

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

at _____

by _____

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

[L. S.]

Executed in presence of _____

(For Those Already Enrolled.)

NO. 1332

INDIGENT

SOLDIER'S PENSION,

1900.

Name Edith Maughan
County FULTON

WARRANT ISSUED

Jan 28 1900.

JOHN. W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. H. H.

Chas. W. H. H., State Prison, Atlanta.

W. H. H.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON

County.

Personally appears Felix Vaughan 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 _____ 1833, that he is 66 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 Years in Company B, of 9th Regiment of Ca. Bato. Artillery; that his physical condition is as follows: General Debility

that his property consists of the following items. _____

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Fulton county been allowed a pension for the year 1892.

Sworn to and subscribed before me, this, the _____ day of _____ 1900.

Felix Vaughan Ordinary.

State of Georgia,

FULTON

County.

I, W. H. HULSEY,

Ordinary of said County,

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

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

day of

FULTON

1900.

Ordinary

Fulton

County.

Note.—The blank spaces must be filled.

Note.—A Affidavit should not be accepted before January 1st, 1900.

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

at

by

Witness my hand and seal, this day of

1901.

Executed in presence of

For Those Already Enrolled.

No. 559

INDIGENT
SOLDIER'S PENSION.
1901.

Name *Edith Vaughan*
County *FULTON*

General disability

WARRANT ISSUED

May 17

1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Chick

JOHN W. LINDSEY, COMMISSIONER OF PENSIONS, GEORGIA.

in data

Vaughan Edith Co.
Fulton Co.

CODE SECTION 514.
(FOR THOSE ALREADY ENROLLED.)

No. 218

INDIGENT
SOLDIER'S PENSION
1902.

Name *Edith Vaughan*
County *Fulton*

Co. *4th* Regiment

WARRANT ISSUED

1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

Chick

JOHN W. LINDSEY, COMMISSIONER OF PENSIONS, GEORGIA.

in data

POWER OF ATTORNEY.
STATE OF GEORGIA, County. }

I hereby authorize

of

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

at

by

Witness my hand and seal, this day of 1902.

[L. S.]

Executed in presence of

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears

Felix Vaughn 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 1833; that he is 67 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company B of 7th Regiment of Art; that his physical condition is as follows: General Disability

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Fulton county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this the 27 day of January, 1901. Felix Vaughn Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 16 day of January, 1901.



John R. Wilkinson Ordinary Fulton County.

Note - The blank spaces must be filled.
Note - Affidavit should not be attested before January 1st, 1901.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears Felix Vaughn 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 1833; that he is years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company B of 7th Regiment of Art; that his physical condition is as follows: General Disability

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Fulton county been allowed a pension for the year 1901.

Sworn to and subscribed before me, this the 27 day of January, 1902. Felix Vaughn Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 16 day of January, 1902.



John R. Wilkinson Ordinary Fulton County.

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

POWER OF ATTORNEY.
STATE OF GEORGIA.

I, _____ County, }
hereby authorize _____
of _____
to receive and receipt for the pension allowed and request that he remit same to
at _____
by _____
Witness my hand and seal, this _____ day of _____ 1903.
[L. S.]
Executed in presence of _____

Vaughan, Felix A.
Fulton County, Ga.

CHIEF-SECTION 154
(FOR THOSE ALREADY ENROLLED.)

No. *308*

INDIGENT
SOLDIER'S PENSION
1903.

Name *Felix Vaughan*
County _____
Co. *4th Regt*
WARRANT ISSUED
1903

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W

ONE HUNDRED AND FIFTY DOLLARS

no data

POWER OF ATTORNEY.

STATE OF GEORGIA, _____
COUNTY, }
I, _____ hereby authorize _____
of _____
to receive and receipt for the pension allowed, and request that he remit same to
at _____
by _____
Witness my hand and seal, this _____ day of _____ 1904.
[L. S.]
Executed in the presence of _____

Vaughan, Felix A.
Fulton County

CHIEF-SECTION 154
(FOR THOSE ALREADY ENROLLED.)

No. *302*

INDIGENT
SOLDIER'S PENSION
1904.

Name *Felix Vaughan*
County *Fulton*
Co. *4th Regt*
WARRANT ISSUED
1904

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W

ONE HUNDRED AND FIFTY DOLLARS

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears Pelix Vaughn 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 _____, 1893; that he is _____ years old and
by occupation a _____, that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served for the term of 3 yrs in Company B, of 9th Regiment
of 1st Artillery; that his physical condition is as
follows: I & R

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1903. I have heretofore as a resident of _____
county been allowed a pension for the year 1 _____

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

Ordinary.

STATE OF GEORGIA,

_____ County.

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

Given under my official signature and seal, this _____
day of _____, 1903.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears Pelix Vaughn of
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the _____ day of _____, 1893; that he is _____ years old and
by occupation a _____, that he enlisted in the military service of the Con-
federate States (or of the State of _____) during the war between the
States, and served for the term of 3 yrs in Company B, of 9th Regiment
of 1st Artillery; that his physical condition is as
follows: Superior

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1904. I have heretofore as a resident of Fulton.
County been allowed a pension for the year 1 _____

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

John B. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton. County.

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

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



John B. Wilkinson Ordinary. _____ County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I _____ hereby authorize

of

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

by _____

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

[L. S.]

Executed in the presence of _____

*Virginia, Philip A.
Fulton County*

(FOR THOSE ALREADY ENROLLED.)

No. *376*

INDIGENT
SOLDIER'S PENSION
1905.

Name *Philip A. Vaughan*
County *Fulton*
Co. *B. Regiment 9th Ga.*

WARRANT ISSUED
1/18 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
C. P. H.

THE FARMERS' NATIONAL AND TRADING CO., ATLANTA, GA.

no date

*Vaughan, Philip A.
Fulton County*

Cons. Service 134.

(FOR THOSE ALREADY ENROLLED.)

No. *336*

INDIGENT
SOLDIER'S PENSION
1906.

Name *Philip Vaughan*
County *Fulton*
Co. *B. Regiment 9th Ga.*

WARRANT ISSUED
1/17 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
C. P. H.

THE FARMERS' NATIONAL AND TRADING CO., ATLANTA, GA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I _____ hereby authorize

of _____

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

by _____

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

[L. S.]

Executed in the presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears Willie Vaughan of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1853; that he is 71 years old and by occupation that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years in Company D, of 9th Regiment of Ga. Bat. Artillery; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

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

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

John P. Weir Ordinary.

STATE OF GEORGIA,

County.

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

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

Ordinary _____ County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

County.

County.

Personally appears Willie Vaughan 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 1833; that he is 70 years old and by occupation that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 years in Company D, of 9th Regiment of Ga. Bat. Artillery; that his physical condition is as follows: Age and poverty

that his property consists of the following items:

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

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

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

John P. Weir Ordinary.

State of Georgia,

County.

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

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

Ordinary _____ County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

County.

Personally appears John Vaughan of _____
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the _____ day of _____ 18____; that he is 74 years old
and by occupation a None, that he enlisted in the military service of the Con-
federate States (or of the State of Georgia) during the war between the
States, and served for the term of 3 yrs in Company B, of 7th Regiment
of 2nd Cal. Art.; that his physical condition is as
follows: Age & poverty

that his property consists of the following items: No property

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

Deponent desires to participate in the benefits of the Act approved December 15th,
1864, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1907. I have heretofore, as a resident of Fulton
County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the _____
day of _____ 1907.

John P. Williamson Ordinary.

State of Georgia,

County.

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

Given under my official signature and seal this _____
day of _____ 1907.

Ordinary _____ County.



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

State of Georgia,

County.

I, John H. H. H. Ordinary of said County,

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

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

Ordinary John H. H. H. County.



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

NOTES.

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

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

2. The law makes no allowance for an aim of it, unless the aim of it is rendered substantially and essentially useless.

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

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

5. 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.

6. The Ordinaries in the several counties are appointed by the physicians and applicants to these points.

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

W. H. HARRISON,
Clerk Ex. Dept

Vanzant & Co.
Fulton Co.

1890.

Vaughan, J. S.

No. 1344

APPLICATION FOR ALLOWANCE.

Arm disabled
Applicant J. S. Vaughn
County, Kuttawh

Amount, 20

Date of warrant, Feb 17.

Entered on record

Key 17 1890
J. W. H. H.
SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

applicant

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

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

For a soldier, unless the arm or leg has been

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

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

4. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must

5. 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.

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

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

W. H. HARRISON,
Clerk Ex. Dept.

No. 1340
 APPLICATION FOR ALLOWANCE.
 Given against
 Applicant, James Haughlin
 County, Shelton
 Amount, 50
 Date of warrant, July 17
 Entered on record
July 17 1890
 RECEIVED CLERK OF SUPERIOR COURT
 WARRANT PAID TO
applicant

STATE OF GEORGIA

PERSONALLY appears J. S. Vaughn of Tulsa county,
State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and
resident of said State, and has been continuously since the _____ day of _____.

1824; that he enlisted in the military service of the Confederate States (the State of _____) during the war between the

federate States () during the war between the States, and served as a Private in Company H, of 38 th Regiment.

States, and served as a private in Company 28, of 3rd Regiment
of Georgia Volunteers Lawton's Brigade; that whilst engaged
in the War at the battle of Pea Ridge in the State

in such military service, at the battle of Second Manassas in the State
of Virginia, on the 27 day of June 1862, he was
killed by a gunshot wound in the

wounded as follows: Received a gunshot wound in the
thigh, 1/2 in. from the shot-cassure.

third of left arm. The shot carries away portions of the radius and ulna. Also

away portions of the radius and ulna, and spin that would be the the metacarpal bone of the 4th digit - using the use of the left hand; a

It wasn't distracting the use of the left hand; a
a gunshot would ~~be~~ the left shoulder immediately.

where the joint the fall entering posteriorly
is covered by between the first and second of

and coming out between the first and second
of the left side. Also a gunshot wound in the back
of the left side about 6 inches to the right of the

entering the left side, about one inch to the right of the
elbow, and entering the body, which gunshot
wound the left arm substantially and internally. The

Deponent desires to participate in the benefits of the Act, approved October 24, 1888 and the acts amendatory thereof, and makes application for the allowance to which he

and the acts amendatory thereof, and makes application for the allowance to which he entitled for the year thereunder ending October 26, 1890.

Sworn to and subscribed before me, this the 2nd day of March 1906 } J. S. Vaughan

18th day of February 1890

NOTE.—State fully nature of wound or character of disease which caused the disability, and explain particularly the extent the disability. If claim is based on disease give full and connected history of disease, tracing it directly to the service.

Commissioned Officer's Affidavit.

STATE OF GEORGIA,

County. }
PERSONALLY came before me _____ of the county
of _____ State of Georgia, who, being duly sworn, says that he was
a commissioned officer in Company _____ of _____ Regiment of
Volunteers, and that deponent knows _____, and that he received the
wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit,
and that wounds (or disease) permanently disables the said _____

as stated by him in said affidavit. Deponent further states that said _____ is a *bona fide* citizen of this State and resides _____

in _____ county.
Sworn to and subscribed before me this)

Sworn to and subscribed before me this _____ day of _____ 189_____

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

STATE OF GEORGIA,
Fulton County.

PERSONALLY came James M. Sawyer, formerly of the 1st Georgia Cavalry, who, being duly sworn, say that they are well acquainted with J. B. Vaughn and know, from having been with him in the army, that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disabled applicant, as stated by him; the said applicant is a bona fide citizen of this State, and resides in Fulton county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this 17th day of February 1890
W. L. Cochran
Ordinary

NOTE.—Above affidavit must be made by three persons who personally know of the service of applicant and can state of their own knowledge precisely how he is disabled, and what disabled him.
NOTE 2.—The attesting officer must see that each witness reads, or has read to him the affidavit he signs.

STATE OF GEORGIA,
Fulton County.

PERSONALLY comes before me W. L. Cochran, Ordinary of said county, M. B. Luten and J. L. Leach, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined J. B. Vaughn and after such examination say that the applicant has been injured as follows:

We received a gunshot wound in the lower third of the left arm, the shot carrying away portions of the radius and ulna. Also a gunshot wound through the metacarpal bone of the thumb, destroying the base of the left hand. Also a gunshot wound through the left shoulder immediately below the joint, the ball entering posteriorly and coming out between the first and second ribs of left side, also a gunshot wound in the back, ball entering on left side about one inch to the right of the axillary gland, entering the body, which gunshot wounds under the left arm substantially and immediately under the axillary gland.

Sworn to and subscribed before me, this 15th day of February 1890
W. L. Cochran
Ordinary

NOTE.—The physicians will state fully the extent of the wound, and then give them to show the extent of the disability resulting therefrom.
NOTE 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier. Also state how long physicians have known and treated applicant.

STATE OF GEORGIA,
Fulton County.

I, W. L. Cochran, Ordinary of said county, do certify that I am well acquainted with J. B. Vaughn the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and he is disabled, as he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that before 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 17th day of February 1890.
W. L. Cochran
Ordinary, Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

KNOW ALL MEN BY THESE PRESENTS, That I, _____ of _____

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

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

Executed in the presence of us:

DIRECTION.

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

the one a carpal bone of the wrist
 side of the left hand. Also a gunshot wound through
 the left shoulder immediately below the joint.
 The ball entering posteriorly and coming out be-
 tween the first and second ribs of the left side. Also a
 gunshot wound in the back. Ball entering on left side about
 one inch to the right of the axillary gland entering the body. Wound gunshot
 wounds under the left arm substantially and immediately in the
 axillary space.

Sworn to and subscribed before me, this

15th day of February 1890

W. L. to each other

ORDINARY.

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

NOTE 2.—If claim is for disability resulting from disease, state how the disease is known to result from the service as a soldier.
 Also state how long physicians have known and treated applicant.

aforesaid.

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

day of _____ 1890

[L. S.]

Executed in the presence of us:

DIRECTION.

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

Maimed Soldiers.

Voucher No 1342

Amount \$ 50

Paid to J. B. Vaughn

For Com disabled

July 17 1890

Included in warrant No.

issued to Treasurer.

WARDEN CLERK

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

apparent

No. 1342

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb'y 17 1890

Mr. J. S. Vaughn of the County
of Fulton having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
approved, Dec. 24, 1888, and the same having been examined and allowed for

He is entitled to receive the sum of *50* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890.

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

By the Governor,

W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.



GOVERNOR.

\$50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

50 Dollars,
per above voucher, this 17 of Feb 1890
J. S. Vaughn

50

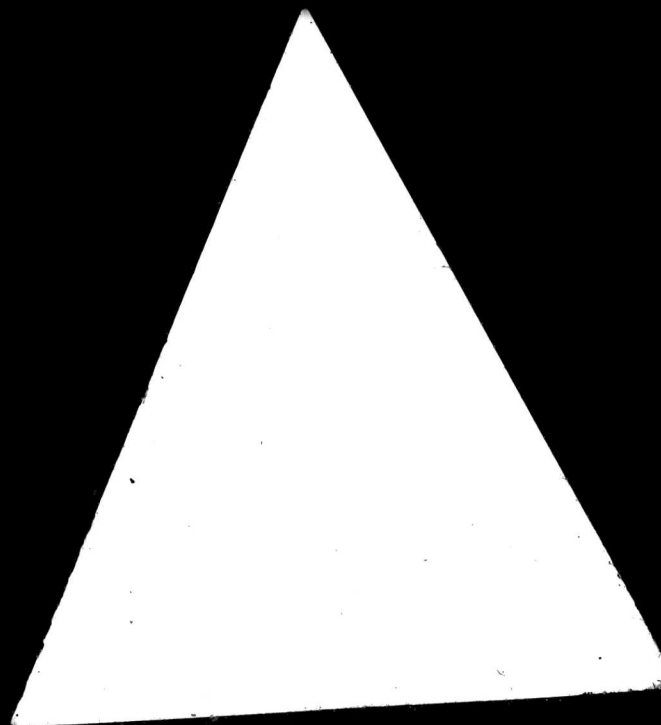
RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty + *00*

Dollars,

per above voucher, this

17 of *Feb*
J S V *1890*
Anglo



Widow's Indigent Pension

No. _____

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

Name *Mrs. Margaret Vaughan*
County *Polk*
Address *1014 Vaughan*
Oriskany
Approved _____

JOHN W. LINDSEY
Commissioner of Pensions

WARRANT HANDLED TO _____

MAILED _____ 1901

ALL PENSIONS ARE PAID BY CHECK

Handwritten notes and signatures in the middle section, including "Clay" and "Good" and a date "1901".

POWER OF ATTORNEY

STATE OF GEORGIA

Beatty County, I
Robert B. Beatty hereby authorize *Robert B. Beatty*
of *Polk* County, to receive and accept for the pension allowed and paid
to *Robert B. Beatty* by his check or registered mail.

Witness my hand this *19* day of *March* 1901.

Executed in presence of
Robert B. Beatty *Robert B. Beatty*
Robert B. Beatty *Robert B. Beatty*
County

Robert B. Beatty
1901

SEAL

[illegible]

Questions for Witnesses.

STATE OF GEORGIA,

Fullon County.

Thomas S. Terry of said State and County, having been presented as a witness in support of the Application of Mrs. Margaret Vaughan for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? Thomas S. Terry
in Atlanta Ga
2. Are you acquainted with the applicant, Mrs. Margaret Vaughan? Yes
3. If so, how long have you known her? Since 1841
4. Where does she reside, and how long and since when has she been a resident of this State? Residing in Atlanta since 1841
5. When and where was she born? about 1800
6. Were you ever acquainted with her husband? Yes
7. Where did he reside in 1861? Milltown County Ga
8. When and to whom was he married? about 1838
9. When and where was he born? about 1800
10. How long have you known him? since 1841
11. When and where did John Vaughan enlist in the war between the States and in what Company and Regiment did he enlist and how do you know this? April 1844 Co H 2d Ga Cav I was sent in same Company
12. Were you a member of the same Company and Regiment? I was
13. How long did he perform regular military duty? about 1 1/2 months
14. When and where was his Company and Regiment surrendered and discharged from service? at Anderson Ga 1845
15. Were you with the command when it surrendered? I was
16. Was at home about 30 days after the husband of applicant present?
17. If not present, where was he? at home in Fullon
18. When and where did he leave his Command? in March at Atlanta
19. For what cause? from Fullon
20. By whose authority he left? officer in command
21. How do you know all this? (State fully and clearly.) I was there during a battle in same Company
22. When and where did about 1845 die?
23. Where did he reside at his death and how long had he been a resident of Georgia at his death? from 1841 until his death
24. Do you of your own knowledge know that applicant is the lawful widow of John Vaughan?
25. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes
26. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? No property
27. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? No property
28. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? None to depend on
29. What is applicant's physical condition and her chances and ability to earn a support? not able to earn a support

30. Is applicant able to earn a support at labor of any sort, if not why? is not able to earn a support
31. How was she supported for 1899 and 1900? by help of son
32. How much did applicant contribute to her support for last two years? nothing at all
33. Give a full and complete statement of applicant's physical condition? she is unable to do any work
34. What interest have you in the recovery of this pension by the applicant? none at all

Sworn to and subscribed before me this 13 day of March 1901
John R. Watkins Ordinary.
Fullon County.

Affidavits of Physicians.

STATE OF GEORGIA,

Butts County.

Personally before me comes James T. Eckenrode and both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. Margaret Vaughan applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this she is an old woman, unable to do any work, and is in consequence unable to earn a support at any work or calling and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 9th day of March 1901
J. H. Kaur Ordinary.
Butts County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Butts County.

I, J. H. Kaur Ordinary in and for said county, hereby certify that the applicant, Mrs. Margaret Vaughan resides in said county, and has been a bona fide resident of this State since 1841 day of March 1841; and that the witnesses, J. A. Jarrell and J. A. Jarrell are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Butts county shows that applicant returned for taxation in her own name in 1899 None dollars worth of property, and in 1900 None dollars worth of property.

Witness my hand and official seal, this 13 day of March 1901.

J. H. Kaur Ordinary.
Butts County.

- Notes:- 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses to the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply--and are now widows. Those married since March April, 1861, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.

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

22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
No property

23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it?
No property

24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom?
None to anyone

25. What is applicant's physical condition and her chances and ability to earn a support?
Not able to earn as before

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of *Butts* county shows that applicant returned for taxation in her own name in 1899 *None* dollars worth of property, and in 1900 *None* dollars worth of property.

Witness my hand and official seal, this *15* day of *March* 1901.

J. H. Hays Ordinary,
Butts County.

SEAL

Notes—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth so help you God."
 2. Additional affidavits may be attached, if blank spaces are insufficient.
 3. All affidavits must be made before Ordinary.
 4. Only widows who were the wives of the dead husbands while they wore soldiers need apply—and are now widows. Those married since 30th April, 1865, not entitled.
 5. Witnesses and two Physicians are necessary to make out claim.

Georgia Butts County

Personally came before me
J. H. Hays Ordinary, in and
 for said County *H. M. Vaughn*
 who being duly sworn said
 on oath that his Father
Era Vaughn was married
 to *Margaret Vaughn* in the
 Spring of 1859 and lived as
 man and wife until his
 death and she is now his
 widow.

Sworn to *H. M. Vaughn*
 and subscribed
 before me this
 May the 20 1901
J. H. Hays
 Ordinary

Georgia, Butts County.

Personally came before
 me *Dr. J. Lee Byron*, who on oath
 says that *Era Vaughn* departed
 this life on the 2nd day of March
 1889. I was the attending phy-
 sician in his last illness.

Known to and
 subscribed before } *J. Lee Byron M.D.*
 me this "day"
 of May 1901.

J. H. Hays
 Ordinary B. C.

I do certify that the witness
J. Lee Byron is of trustworthy
 character and his statements
 are entitled to full faith and
 credit. I further certify that
 the full text of the above affi-
 dant was known to him before
 signing.

J. H. Hays Ordinary
 Given under my hand
 and Official Signature this
 11th day of May 1901

May 11th 1901
J. H. K...
Ordinary

the full text of the above aff-
davit was known to him before
signing. J. H. K...
Given under my hand
and Official Signature this
11th day of May 1901

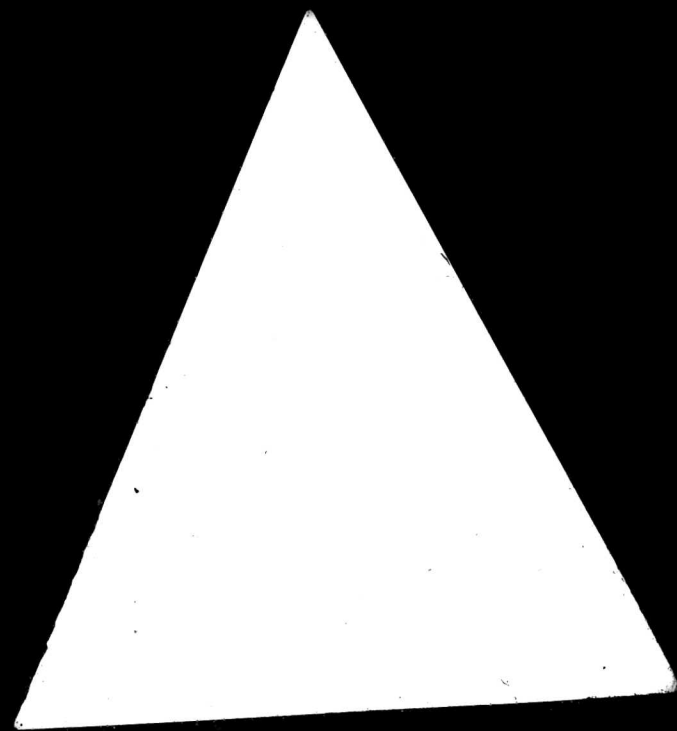
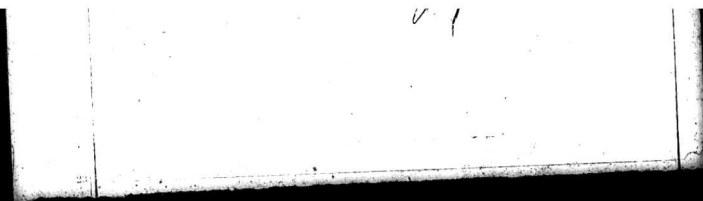
Georgia Butts County:

Personally came W. M. Vaughn
who being duly sworn says on
Oath that he is the son of
Ella Vaughn and the step son
of Mrs. Margaret Vaughn who
was married to his father
in the Spring of 1859 and
lived together as man and wife
until the death of my father
in 1889.

Sworn to and
Subscribed before
me this Nov. 18-1901

J. H. K...
Ordinary

W. M. Vaughn



ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY

I, T. D. O'Neal, Ordinary of said County, do certify that I know Mary B. Vaughan, the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 8 day of Oct 1919.

That I also know Mrs. D. O'Neal, widow as to marriage, and I also know

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

Sworn under my hand and official seal of office on the 13 day of Oct 1919.
(SEAL) Wm. D. O'Neal Ordinary
County

NOTES: 1. When any questions are answered the Ordinary shall swear applicant and the witnesses to the following words: "You do solemnly swear that the statements made by you and the witnesses are true and correct to the best of your knowledge and belief." 2. Additional affidavits may be attached if desired by the county of residence. 3. Only widows who married prior to first January, 1901, are entitled to pension. 4. Attach certified copies of marriage license or other affidavits that are and prove full term of husband's service. 5. Widows of Disabled Pensioners were sworn to the following: "I, the undersigned, do hereby certify that the statements made by me and the witnesses are true and correct to the best of my knowledge and belief." 6. Widows of Disabled Pensioners were sworn to the following: "I, the undersigned, do hereby certify that the statements made by me and the witnesses are true and correct to the best of my knowledge and belief."

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1919.

County Fulton
Name Mary B. Vaughan
Widow of Felix Vaughan 1910
Company B
Regiment 4th Co.
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-23-1919

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

Fulton COUNTY.
I, T. H. Jeffries Ordinary of said County, do certify that I know Mrs. Nancy B. Vaughan the applicant for this pension, and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 8 day of Oct 1929

That I also know Mrs. R. O. Leach witness as to marriage, and I also know that both of the foregoing were duly sworn by my Clerk before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 15 day of Oct 1929
(SEAL) T. H. Jeffries Ordinary.
Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth, 'No help you God.'"
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1881, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service—because he made no proof of service and was not required to do so.

Widow's Application

To Be Put on File in Her Own Right When Husband Was on the Regular Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1918.

No. 1
County Fulton
Name Nancy B. Vaughan
Widow of T. H. Vaughan 1910
County Fulton
Residence Rt. 2, Ga.
Approved

I, W. L. LANSBURY,
Commissioner of Pensions,
First Printed On Blue Ribbon, Jan. 1910

10-23-1917

Vaughan, Nancy C.
Fulton Co.

For Fulton County

1929

Application for Pension
Due Deceased Pensioner
(UNDER ACT 1910)
(To pay expenses of last illness and funeral)

T. H. Jeffries Ordinary
For Nancy B. Vaughan
Date of Death Dec 2 1929
Amount \$ 100.00

Approved and ordered paid OK

Dec. 11, 1929 R. GAT. LAWRENCE
Commissioner of Pensions.

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

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Fullon COUNTY.

Personally before me comes Mrs. Nancy C. Vaughan of said County, who, after being duly sworn, says that she is the widow of Felix Vaughan to whom, in the County of Campbell, State of Ga, she was married on the 30 day of Nov, 1871, and that she remained his wife, and resided with him to the date of his death in April, 1910, and that she has not since his death remarried. At the time of his death he was a resident of Fullon County, in said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$60.00 in Fullon County for 1910 per annum, on account of being a soldier in Company B, 22d Regiment, (Volunteers or State Militia).

That she is now a bona fide resident citizen of said County of Fullon, and she has so continuously resided since 10 day of November, 1871.

Sworn to and subscribed before me, this the

8 day of Oct, 1919, Arthur B. Wadant, Ordinary of Fullon County.

(SEAL)

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

STATE OF GEORGIA,

Fullon COUNTY.

Personally before me comes Mrs. S. J. Lewis known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Nancy C. Vaughan who made the foregoing affidavit, is the lawful widow of Felix Vaughan who died in Fullon County in said State of Ga on 25 day of April, 1910, and that she has not since remarried. That she became the wife of Felix Vaughan on the 30 day of Nov, 1871, and that she and he had resided together as man and wife continuously since 30 day of Nov, 1871, and that the he was the same man who was on the pension roll of said State Ga, from Fullon County when he died.

Sworn to and subscribed before me, this the

8 day of Oct, 1919, Arthur B. Wadant, Ordinary of Fullon County.

(SEAL)

Application for Pension Due to a Deceased Pensioner

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

(Under Act Approved August 15, 1904)

GEORGIA,

Fullon COUNTY.

Personally before me, the Ordinary of said County, comes Harry G. Poole Jr with Harry G. Poole of said County, who, after being sworn, on oath says that he knew Mrs. Nancy C. Vaughan of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Fullon County, in this State, on the 2 day of Dec, 1929, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$197.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,

Arthur B. Wadant, Ordinary of Fullon County.
(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Fullon COUNTY.

I, Thos. H. J. J. J., Ordinary of said County, do certify that I personally know Harry G. Poole Jr with Harry G. Poole who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. Nancy C. Vaughan while in life and that this was the same person whose name appears on the Pension Roll of Fullon County, and was paid a Pension of Fifty (\$50.00) Dollars, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this

(Seal of Ordinary)

6 day of Dec, 1929, Thos. H. J. J., Ordinary of Fullon County.

INSTRUCTIONS:

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

the 30 day of Nov 1871, and that she said he had resided together as man and wife continuously since 30 day of Nov 1871, and that the he was the same man who was on the pension roll of said State La from Fulton County when he died.

Sworn to and subscribed before me, this the 8 day of Oct 1879

Arden B. Moulton Ordinary

of Fulton County

(SEAL)

Mrs S J Lewis

(SEAL OF OFFICE) Fulton County

INSTRUCTIONS:

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

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

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

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

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

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

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

M. Nancy Carrie Vaughn.

IN ACCOUNT WITH
HARRY G. POOLE
FUNERAL DIRECTOR
184 PRYOR STREET, S. W.
ATLANTA, GA.
WALNUT 18225 18225

1896 1929

Dec. 2nd 1899
To Casket and services complete. \$ 122.00
One car 5.00
\$ 127.00

Atlanta Ga.
Fulton County.
I hereby certify that the above account was for the funeral expenses of Mrs. Nancy Carrie Vaughn who died in Atlanta Ga. Dec 2nd 1899 with out sufficient funds to pay her burial expenses and is just due correct and unpaid.

Arden B. Moulton
C. G. O. Secretary, Fulton County

Harry G. Poole
Manager

State of Georgia,) To any Minister of the Gospel, Judge of Sup'r
Campbell County.) Court, or Justice of the Peace-- to celebrate:

You are hereby authorized and permitted to join in the Honorable state of matrimony Felix A. Vaughn and Nancy C. Tatum, according to the Rites of your Church, provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and, for so doing, this shall be your sufficient License.
Given under my hand and seal, this 30th day of November, 1871.
R. C. Beaver, Ordinary, (Seal)

I hereby certify that Felix A. Vaughn and Nancy C. Tatum were joined together in the Holy bans of matrimony on the 30th day of Nov. 1871, by me.
Jas. M. Hopkins, J. P.

Georgia, Campbell County.

I, W. S. McFarlin, Ordinary of said county, do hereby certify that the above and foregoing is a copy of the Marriage License, and Certificate of Marriage of Felix A. Vaughn and Nancy C. Tatum, as appears of record in this office in book "C", page 209, of Marriage Records.
Witness my hand and seal of Office, this 28th day of October 2, 1879.

W. S. McFarlin
Ordinary,
Campbell county, Georgia.

is just one correct and unpaid.
William B. Mudgett
C.C. Notary Public, Fulton County
Harry G. Sibley
Manager

Georgia, Campbell County.

I, W. S. McFarlin, Ordinary of said county, do hereby certify that the above and foregoing is a copy of the Marriage License, and Certificate of Marriage of Felix A. Vaughn and Nancy C. Tatum, as appears of record in this office in book "C", page 239, of Marriage Records.

Witness my hand and seal of Office, this Seventh October 2, 1919.

W. S. McFarlin, Ordinary,

Campbell county, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I, _____, hereby authorize _____

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

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

day of _____ 1904.

[L. S.]

Executed in presence of _____

Warrant of Court
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. *73*

WIDOW'S PENSION

FOR
YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. S. Vaughn
OF
Fulton County.

Widow of *John W. Vaughn*
Co. *A* Regiment *1st Ga*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/25 1904,
AND HANDED TO _____

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

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

In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____ 1904. [L. S.]

Executed in presence of _____

Van Dine, J. (ms)
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. 73

WIDOW'S PENSION

FOR
YEAR ENDING DECEMBER 31, 1904.
PAID TO

Mr. S. Vaughn

of *Fulton Co.* County.

Widow of *John W. Lindsey*

Co. *A* Regiment *7th*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO *4/22* 1904.

Geo. W. Brantley, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

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

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

Executed in presence of _____

Vaughn, J. (ms)
Fulton County
To Those Heretofore Paid.

1905.

No. 47

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mr. S. Vaughn

of

Fulton County.

Widow of *John W. Lindsey*

Co. *A* Regiment *7th*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

AND HANDLED TO *4/20* 1905.

Geo. W. Brantley, State Printer, Atlanta.

December 31, 1904.

Sworn to and subscribed before me,

this day of JAN 22 1904 1904

John R. Wilkinson Ordinary

Post Office

State of Georgia,

Fulton County.

I, *John R. Wilkinson*,

Ordinary of said County, certify that I am well acquainted with Mrs. *Celina Vaughan* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 32

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

Official Seal

John R. Wilkinson Ordinary of

County,

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

Sworn to and subscribed before me,

this day of JAN 2 1905 1905.

John R. Wilkinson Ordinary.

Post-Office

State of Georgia,

Fulton County.

I, *John R. Wilkinson*, Ordinary of said County, certify that I am well acquainted with Mrs. *Celina Vaughan* Who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 32

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

Official Seal

John R. Wilkinson Ordinary of

Fulton County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

Vaughan's Pension
Fulton County

No. *OK*

**WIDOW'S
Indigent Pension
1901.**

Name *Sarah C. Vaughan*

County *Fulton*

Widow of *Wm. C. Vaughan*

C. C. - 2 miss -

Approved *8/6* 1901

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO

1901

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

1/2-1901
1-5-1901

Pension Office
8/14-1901

Appl statement of
husbands death and
the evidence submitted
therein fails to show
the performance of Civil
duties and will
not serve by law
and for inability
to discharge - not
entitled to Pension

J. W. Lindsey
Chief of Pension

STATE OF GEORGIA.

POWER OF ATTORNEY.

County.

I, _____ hereby authorize _____

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

recite the same to me at _____ by his clerk or registered mail.

Witness my hand this _____ day of _____

Executed in presence of _____

Ordinary.

County _____

L. R.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, _____ hereby authorize _____ of _____ County, to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail. Witness my hand this _____ day of _____ 190 _____

Executed in presence of _____

Ordinary,

County.

REAL

Pension Office.
4/14-1901
App. returned of
husbands claim, and
the union returned
to him - fail to show
the performance of 2 1/2
months, actual work
long term by him
and you intend
to discharge - not
intend to return
to work.
W. C. Vaughn
Barnes

WIDOW'S

Indigent Pension

1901.

back to Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

W. C. Vaughn

Questions for Applicant.

STATE OF GEORGIA.

County.

John R. Vaughn of said State and County, desiring to avail himself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed Oct 1900, hereby submits her proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Post Office.)
Darnell E. Vaughn, 374 North Ave. Atlanta Ga
2. How long and since when have you been a resident of this State?
Since the Fall of 1868
3. When and where were you born?
Walter County Ga
4. When and where was your husband born—state his full name, and when were you and he married?
Robert E. Vaughn, born 1830, William A. Vaughn, married 25th March 1868
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States?
2nd Mississippi Regt. Co. E. Gunpowder Miss
6. How long did your husband serve in said Company and Regiment?
Enlisted 22nd Feb- 1862, served till honorably discharged, post given.
7. When and where did your husband's Company and Regiment surrender and was discharged?
He was in Va.
8. Was your husband present at the time and place when his Company and Regiment surrendered?
He was, but being honorably discharged.
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?
As stated above he was honorably discharged at Richmond Va.
10. When and where did your husband die?
30th day July 1862, Atlanta Ga. 15th day Nov 1863.
11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty?
Age and Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight.
About 3 years ago after long illness. I can scarcely make a living.
13. What has been your occupation since your husband's death?
Laundry work.
14. How much can you earn gross, by your own exertion or labor?
about \$25 per year.
15. What property, real or personal, or income do you have or possess, and its gross value?
None.
16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899-1900, and what disposition, if any, by sale or gift, have you made of the same?
None.
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
Walter Co. No property.
18. How have you been supported since death of husband, and especially for 1899 and 1900?
By laundry work.
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income?
as near as I can estimate about 20 dollars
20. What was your employment during 1899 and 1900—how much did you receive for each year?
Laundry work about 50 dollars
21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property?
Myself and a deceased sister whom I maintain.
22. Have you ever made an application for pension before?
once before
23. How many applications have you made for a Pension, and under what claim?
only once under the poverty claim.

Sworn to and subscribed before me this _____

18 _____

1901.

John R. Vaughn, Ordinary, of _____ County.

Questions for Witnesses.

STATE OF GEORGIA,

Fulton County.

In person came before me, Wm. F. Grubbs of said State and County, having been presented as a witness in support of the Application of Mrs. Sarah E. Vaughan for a Pension under the Act of March 3, 1883, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Wm. F. Grubbs and Wm. Bonds
Atlanta, Ga.
2. Are you acquainted with the applicant, Mrs. Sarah E. Vaughan?
about 50 yrs
3. Where does she reside, and how long and since when has she been a resident of this State?
Fulton, Co. Ga. - residing since Fall 1865
4. When and where was she born?
Walter, Co. Ga.
5. Were you ever acquainted with her husband?
Yes
6. Where did he reside in 1861?
Mississippi
7. When and to whom was he married?
23rd March 1855: Sarah E. Vaughan
8. When and where was he born?
1830 - Abbeville, County, S.C.
9. How long have you known him?
about 50 yrs
10. When and where did he die?
Feb 1862, Guntown, Mississippi
11. States, and in what Company and Regiment did he enlist and how do you know this?
Co. E, 2nd Regt. Miss. Volunteers, My Brother-in-law
12. Were you a member of the same Company and Regiment?
No
13. How long did he perform regular military duty?
Enlisted 22nd Feb. 1862, was honorably discharged from service
14. When and where was his Company and Regiment surrendered and discharged from service?
was discharged and surrendered with Gen. Lee
15. Were you with the command when it surrendered?
No
16. Was Wm. G. Vaughan the husband of applicant present?
No - being honorably discharged
17. If not present, where was he?
at Seaboard, Ala.
18. * When and where did he leave his Command?
Near Richmond, Va.
19. For what cause?
Being honorably discharged as being rendered
20. By whose authority he left?
Major - signed May 2nd, 1862, and Gen. R. E. Lee
21. How do you know all this? (State fully and clearly.)
I know it from my personal acquaintance and papers which verifies my statement
22. When and where did Wm. G. Vaughan die?
Atlanta, Ga. 15th Nov 1893
23. Where did he reside at his death and how long had he been a resident of Georgia at his death?
Atlanta, Ga. since the Fall of 1865
24. Do you of your own knowledge know that applicant is the lawful widow of Wm. G. Vaughan?
Yes
25. Has she remained unmarried since her husband's death, and how do you know this?
Yes
26. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge?
None
27. What property, effects or income did applicant possess in 1869 and 1900 and what disposition did she make of it?
None - none to dispose of
28. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom?
None - whatever
29. What is applicant's physical condition and her chance and ability to earn a support?
very poor and unable to make a support

29. Is applicant able to earn a support at labor of any sort, if not why?
No - because of age and physical disability

30. How was she supported for 1869 and 1900?
by doing laundry work when able

31. How much did applicant contribute to her support for last two years? about 50 dollars

32. Give a full and complete statement of applicant's physical condition?
she is old and infirm - General health poor

33. What interest have you in the recovery of this pension by the applicant? none

Sworn to and subscribed before me this 20 day of March, 1901.
John R. Wickham County, Fulton }
Wm. F. Grubbs }
Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,

Fulton County.

Personally before me come Dr. J. W. H. Paul and Dr. Wm. G. Vaughan both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. Sarah E. Vaughan applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is that Mrs. Sarah E. Vaughan is not able to earn a living on account of infirmities consequent to old age.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 14 day of March, 1901.
John R. Wickham County, Fulton }
J. W. H. Paul M.D. }
Wm. G. Vaughan M.D. }

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, John R. Wickham Ordinary in and for said county, hereby certify that the applicant, Mrs. Sarah E. Vaughan resides in said county, and has been a bona fide resident of this State since the Fall of 1865 day of 1865, and that the witnesses, Mr. Wm. F. Grubbs and Wm. Bonds are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavit was read to the applicant and witnesses before the same was signed and subscribed.

I further certify that the tax digest of Fulton county shows that applicant returned for taxation in her own name in 1869 None dollars worth of property, and in 1900 None dollars worth of property.

Witness my hand and official seal, this 20th day of March, 1901.
John R. Wickham County, Fulton

SEAL

NOTES - 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply - and are now widows.
5. Witnesses and two Physicians are necessary to make out claims.

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

very poor and unable to make a support

and the evidence you must give must be sufficient to show that you are indigent.

2. Additional affidavits may be attached if more persons are indigent.

3. All affidavits must be made before a Justice of the Peace.

4. Only widows who were the wives of the late husbands, while they were soldiers need apply—and are now widows. Those married after 31st April, 1902, are not entitled.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

County: }

I,

hereby authorize

of

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

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

day of

1902

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County: }

I,

hereby authorize

of

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

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

day of

1903.

[L. S.]

Executed in the presence of

Vaughan, Sarah E.
To Those Heretofore Paid

1902.

No. 29

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Sarah E. Vaughan

Fulton.

County.

Cathy L. Vaughan

Widow

Co.

Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDRED TO

SA

FOR THE YEAR ENDING DEC. 31, 1902.

Vaughan, Sarah E.
To Those Heretofore Paid

1903.

No. 20

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. Sarah E. Vaughan

OF

Fulton.

County.

Widow of *Wm. C.*

Co. *E. and 2nd* Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1903

AND HANDRED TO

SA

FOR THE YEAR ENDING DEC. 31, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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

PERSONALLY COMES MRS.

Sarah E. Vaughn
who, being sworn, says on oath, that she is a bona fide resident of said County of
Fulton, State of Georgia, and that she has resided in said State
continuously ever since *1865*. That she is the Widow of
Wm. C. Vaughn who was a soldier in Company
E of the *2nd* Regiment of *Mississippi*
Volunteers, that he enlisted in said regiment on or about the month of *Feb 22*
1861 and served in the Army up to *July* 1862. That he died
on the *15* day of *Nov* 1893.

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 *1865*.

I have been allowed an Indigent pension as a resident of **Fulton**,
County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the
year ending December 31, 1903.

Sworn to and subscribed before me
John R. Wilkinson Clerk
this *13* day of *Jan* 1903.
Official Seal

State of Georgia,
Fulton County.

Ordinary of said County, certify that I am well
acquainted with Mrs. *Sarah E. Vaughn* 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 *1865*.

Given under my official signature and seal, this *13* day of *Jan* 1903.
Official Seal
John R. Wilkinson Ordinary of **Fulton** County.

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

Form No. 1.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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

PERSONALLY COMES MRS.

Sarah E. Vaughn
who, being sworn, says on oath, that she is a bona fide resident of said County of
State of Georgia, and that she has resided in said State
continuously ever since *1865*. That she is the Widow of
Wm. C. Vaughn who was a soldier in Company
E of the *2nd* Regiment of *Miss*
Volunteers, that he enlisted in said regiment on or about the month of *Feb 22*
1861 and served in the Army up to *July* 1862. That he died
on the *15* day of *Nov* 1893.

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 *1865*.

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

Sworn to and subscribed before me,
this *13* day of *JAN* 1903.
John R. Wilkinson Ordinary. Post-Office

State of Georgia,
County.

Ordinary of said County, certify that I am well
acquainted with Mrs. *Sarah E. Vaughn* 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 *1865*.

Given under my official signature and seal, this *13* day of *JAN* 1903.
Official Seal
John R. Wilkinson Ordinary of **Fulton** County.

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

NOTE.—All blanks must be filled.
Vouchers and warrants must bear date after January 1st, 1902.

NOTE.—All blanks must be filled.
Vouchers and warrants must bear date after January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

of

hereby authorize

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

at

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

day of

1904

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I,

of

hereby authorize

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

at

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

day of

1905

[L. S.]

Executed in presence of

Vaughan, Sarah E.
Fulton, Ga.
TO THOSE HERETOFORE PAID.

1904.

No. 19

INDIGENT
WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904

PAID TO

Mrs. Sarah E. Vaughan

County.

Widow of *Mrs. E. C. Vaughan*

Co. *B. 2nd Regt. 10th Inf.*

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

1/23-3 1904.

AND HANDLED TO

JOHN W. LINDSEY, State Printer, ATLANTA.

Vaughan, Sarah E.
Fulton County
TO THOSE HERETOFORE PAID.

1905.

No. 71

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905

PAID TO

Mrs. Sarah E. Vaughan

OF

Fulton County.

Widow of *Mrs. E. C. Vaughan*

Co. *B. 2nd Regt. 10th Inf.*

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT ISSUED

1/20 1905.

AND HANDLED TO

1/21

JOHN W. LINDSEY, State Printer, ATLANTA.

Form No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES MRS.

Sarah E. Vaughan

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

Fulton, State of Georgia, and that she has RESIDED in said Statecontinuously ever since 1865. That she is the Widow ofWilliam C. Vaughan, who was a soldier in CompanyA of the 2nd Regiment of MassVolunteers, that he enlisted in said regiment on or about the month of Feb 221861, and served in the Army up to July 1862. That he diedon the 15 day of Nov 1863.A 70Deponent 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 1855.I have been allowed an Indigent pension as a resident of Fulton.County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the
year ending December 31, 1904.

Sworn to and subscribed before me,

this 12th day of Jan 1904.

Post Office

Ordinary.

State of Georgia,

Fulton County.I, John R. Wilkinson,Ordinary of said County, certify that I am well
acquainted with Mrs. Sarah E. Vaughan and 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 1865.Given under my official signature and seal, this the 12th day of Jan 1904.

Ordinary of

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

Form No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES MRS.

Sarah E. Vaughan

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

Fulton, State of Georgia, and that she has RESIDED in said Statecontinuously ever since all her life. That she is the Widow ofWilliam C. Vaughan, who was a soldier in CompanyC of the 2nd Regiment of MassVolunteers, that he enlisted in said regiment on or about the month of February1861, and served in the Army up to 1862. That he died onthe 15 day of November 1863.Discharged July 1867.Age and povertyDeponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1855.I have been allowed an Indigent pension as a resident of Fulton.County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the
year ending December 31, 1905.

Sworn to and subscribed before me,

this 14 day of Jan 1905.

Ordinary.

Post Office 83 Kennedy St.State of Georgia,
Fulton County.

County.

Ordinary of said County, certify that I am well

acquainted with Mrs. Sarah E. Vaughan, 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 1865.Given under my official signature and seal, this the 14 day of Jan 1905.

Ordinary of

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____
In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____, 1906.

[L. S.]

Executed in presence of _____

Vaughan Sarah C.
Fulton County
To Those Heretofore Paid.
1906.
No. *17*
INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1906.
PAID TO *Mrs. Sarah C. Vaughan*
OF *Fulton* County,
Widow of *Sam. G. Vaughan*
Co. *C. 1st Inf. Regt.*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED *117*
AND HANDLED TO *apf*
1906.

THE COMMISSIONER OF PENSIONS AND THE SECRETARY OF THE STATE, ATLANTA, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____
In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____, 1907.

[L. S.]

Executed in presence of _____

Vaughan Sarah C.
Fulton Co
To Those Heretofore Paid.
1907.
(*Vaughan 1907*)
No. *43*
INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1907.
PAID TO *Mrs. Sarah C. Vaughan*
OF *Fulton* County,
Widow of *Sam. G. Vaughan*
Co. *C. 1st Inf. Regt.*
JOHN W. LINDSEY,
Commissioner of Pensions.
WARRANT ISSUED *116*
AND HANDLED TO *apf*
1907.

THE COMMISSIONER OF PENSIONS AND THE SECRETARY OF THE STATE, ATLANTA, GA.

Form No. 2 FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

Mrs. Sarah C. Vaughn
who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since Birth. That she is the Widow of William C. Vaughn who was a soldier in Company C of the 2nd Regiment of Miss Volunteers, that he enlisted in said regiment on or about the month of Discharged 1865, and served in the Army up to Discharged 1865. That he died on the 1st day of Jan 1892.

Age and poverty

Dependent 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 1855.

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

Sworn to and subscribed before me this 18 day of Jan, 1906.

Sarah C. Vaughn
Post Office 40 Edmund St

State of Georgia,
County of Fulton

John R. Robertson
Ordinary of said County, certify that I am well acquainted with Mrs. Sarah C. Vaughn, 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 Jan 1892.

Given under my official signature and seal, this 18 day of Jan, 1906.

Official Seal

John R. Robertson
Ordinary of Fulton County.

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

Form No. 3 FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

Mrs. Sarah C. Vaughn
who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since Birth. That she is the Widow of William C. Vaughn who was a soldier in Company C of the 2nd Regiment of Miss Volunteers, that he enlisted in said regiment on or about the month of Discharged 1865, and served in the Army up to Discharged 1865. That he died on the 1st day of Jan 1892.

Age and poverty

Dependent 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 1855.

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 18 day of Jan, 1907.

Sarah C. Vaughn
Post Office 40 Edmund St

State of Georgia,
County of Fulton

John R. Robertson
Ordinary of said County, certify that I am well acquainted with Mrs. Sarah C. Vaughn, 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 Jan 1892.

Given under my official signature and seal, this 18 day of Jan, 1907.

Official Seal

John R. Robertson
Ordinary of Fulton County.

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES Mrs.

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said Statecontinuously ever since Birth. That she is the Widow ofWilliam C. Vaughn who was a soldier in Company 1stof the 2nd Regiment of InfantryVolunteers, that he enlisted in said regiment on or about the month of June1862, and served in the Army up to Discharged 1862. That he died onthe 9th day of April 1893.Age and poverty.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1855.

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

Sworn to and subscribed before me this 18th day of Jan, 1906.

John R. Wickerson, Ordinary.

Post Office 40th Street

State of Georgia,
Fulton, County.

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

day of 18 1906.

Given under my official signature and seal, this 18th day of Jan, 1906.

Official Seal

John R. Wickerson
Ordinary of Fulton County.

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES Mrs.

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

continuously ever since Birth. That she is the Widow of

William C. Vaughn who was a soldier in Company 1st

of the 2nd Regiment of Infantry

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

1862, and served in the Army up to Discharged 1862. That he died on

the 9th day of April 1893.

Age and poverty.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1855.

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 18th day of Jan, 1907.

John R. Wickerson, Ordinary.

Post Office 40th Street

State of Georgia,
Fulton, County.

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

day of 18 1907.

Given under my official signature and seal, this 18th day of Jan, 1907.

Official Seal

John R. Wickerson
Ordinary of Fulton County.

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

acquainted with Mrs. Prank C. Vaughan, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the _____ day of _____ 18____.

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

Official Seal

John R. Westerson
Ordinary of Fulton County.

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

am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the _____ day of _____ 18____.

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

Official Seal

John R. Westerson
Ordinary of Fulton County.

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

LIGHT PRINT AND. OR BAD COPY

SOLDIER'S DISCHARGE.

TO ALL WHOM IT MAY CONCERN.

Know Ye, That John R. Westerson a Private of
Captain John R. Westerson Company 9th Regiment of
Ark. who was enlisted _____ day of _____
one thousand eight hundred and _____ to serve _____ is hereby
HONORABLY discharged from the Army of the Confederate States.

Said William C. Vaughan was born in North Carolina
in the State of North Carolina _____ years of age, _____
inches high, _____ and by occupation when enlisted, a _____

Given at Columbia _____ day of Feb, 1862.
1862.

J. M. Stone
Col. 1st Regt. S.C. Artillery

SOLDIER'S DISCHARGE.

TO ALL WHOM IT MAY CONCERN.

Know Ye, That *John V. [unclear]* or
 Captain *[unclear]* of the *[unclear]* Regiment of
[unclear] who was enlisted on the *[unclear]* day of *[unclear]*
 one thousand eight hundred and *[unclear]* to serve
 is hereby
 HONORABLY discharged from the Army of the Confederate States.

Said *William H. [unclear]* was born in *Urberville, Virginia*
 in the State of *South Carolina* *[unclear]* years of age, *[unclear]* feet
[unclear] inches high, *[unclear]* inches long, *[unclear]* hair,
 and by occupation when enlisted, a *[unclear]*.

Given at *[unclear]* day of *[unclear]*
 1862.

L. M. [unclear] 2nd Corp. 2nd Regt. 1st Div.
Adj. Gen. [unclear]

J. M. ... (D. 2. Corp. 8. 5. 7. 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 841. 842. 843. 844. 845. 846. 847. 848. 849. 850. 851. 852. 853. 854. 855. 856. 857. 858. 859. 860. 861. 862. 863. 864. 865. 866. 867. 868. 869. 870. 871. 872. 873. 874. 875. 876. 877. 878. 879. 880. 881. 882. 883. 884. 885. 886. 887. 888. 889. 890. 891. 892. 893. 894. 895. 896. 897. 898. 899. 900. 901. 902. 903. 904. 905. 906. 907. 908. 909. 910. 911. 912. 913. 914. 915. 916. 917. 918. 919. 920. 921. 922. 923. 924. 925. 926. 927. 928. 929. 930. 931. 932. 933. 934. 935. 936. 937. 938. 939. 940. 941. 942. 943. 944. 945. 946. 947. 948. 949. 950. 951. 952. 953. 954. 955. 956. 957. 958. 959. 960. 961. 962. 963. 964. 965. 966. 967. 968. 969. 970. 971. 972. 973. 974. 975. 976. 977. 978. 979. 980. 981. 982. 983. 984. 985. 986. 987. 988. 989. 990. 991. 992. 993. 994. 995. 996. 997. 998. 999. 1000.

****LIGHT PRINT AND, OR BAD COPY****

Fulton Co
State of Ga

In further evidence of the date of my husband
... volunteered
into a Company being formed sometime in Sept. 1861
in Mountain View, said Company never completed.
... then joined Co. E 2nd Miss Regt
for 2 yrs service, about 22 Feb. 1862 and received an
honorable discharge by order of Genl. Lee on 31st Dec.
1862. I further testify that after the battle of Spotsylvania
the Union Army as well as private homes in Mountain
View were converted into a hospital for the many wounded
soldiers who were in this battle. The Ladies of the town
compelled to wait upon and nurse the wounded
men twice a day for about 2 hours each time for a period
of six weeks. Besides to carry such nourishments as we
had twice a day for the wounded soldiers for which
I received no compensation. I was in very needy
circumstances besides the care of a helpless invalid sister
upon my husband for support alone dependent. I feel
compelled to state all I can say in support of my claim
for a pension under my husband's service
given to authorized
before one year ago
John R. Wilkinson acting

The State of Mississippi
Personally appeared
before me, H. Grant Mayor of the town of
Shannon, Mississippi, an official Justice of the Peace
for said County, the within named C. S. Brothers
who on oath says he knew H. C. Vaughan during
the years of 1861 and 1862 and that he did enlist
at Mountain View in Capt John F. Brooks Company
of Infantry and that the same was known and
designated as Co. E 2nd Miss Regt Volunteer Inftry
C. S. R. and that said H. C. Vaughan was a
member of said Company and Regiment and
because of illness was honorably discharged
Signed
H. Grant Mayor
and Official J. P.

men, twice a day for about 2 hours each, come for a portion
 of 16 weeks. Besides to carry such necessaries as we
 had twice a day for the wounded soldiers, for which
 I received no compensation. I was in very needy
 circumstances, besides the care of a helpless invalid & later
 upon my husband for support, alone dependent. I feel
 extremely, & about all I can say in support of my claim
 for a pension under my husband & devise
 given to our children
 before my death, as of Mrs. D. E. Vaughan
 John R. Wilkinson attorney

H. Grant Mayor
 and Safford, J. P.

John D. Carter

Vaughan, H. S.
Fuller
1914

Code Section 1232

+ No. _____

**INVALID
SOLDIER'S PENSION,
190**

Name *H. S. Vaughan*
County *Fuller*
Co. _____
Disability *Chronic*
Amount, \$ *100*

JOHN W. LINDSEY,
Comptroller of Finance.

WARRANT HANDED TO

Official will write Name of Applicant, Comptroller
and Register on back of this warrant.

State of Georgia, State Capitol, Albany.

7/3-1914

STATE OF GEORGIA,

County, _____

POWER OF ATTORNEY.

Form No. 1.

I, _____, hereby authorize _____
to receive and receipt for the pension allowed and
payable to me by _____
at _____
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____, 19____.

Executed in the presence of _____

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

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

day of _____, 190 _____

[L. S.]

Executed in the presence of _____

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears W. S. Vaughan of said Fulton Co.

County, State of Georgia, who being duly sworn, says on oath that he was born on the 11th day of May, 1846, that he is a bona fide citizen and resident of Georgia, and has been continuously since the Birth day of May, 1846, that he enlisted in the military service of the Confederate States (or the State of Ga.) on the _____ day of _____, 1864, during the war between the States, and served in Company 7 of 1st Ga. Reserve Brigade, and was honorably discharged on the _____ day of April, 1865; that whilst engaged in such military service, and in line of duty in April, 1865, he was disabled or wounded as follows: while at Andersonville

guarding prisoners, contrabanded Messrs. which settled on my eyes and caused the loss of one eye and weakened the other, until about 5 years ago I lost sight of the other (The Right).

Where was command surrendered? Thomasville Ga.

Was applicant present? I was

If not, where was he?

How come there?

And by whose authority? State fully: _____

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 terminating ending October 26th, 190 _____

Sworn to and subscribed before me, this the _____ day of _____, 190 _____

W. S. Vaughan
John W. Emerson
Ordinary

W. S. Vaughan
John W. Emerson
Post Office Atlanta

Notes.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claim is based on disease, give full and connected history of disease, tracing it directly to the service.
Notes.—Do not trouble to mention wounds which do not disable.
Notes.—The Ordinary will see that all blank spaces are filled when the affidavits are signed.

INVALID

SOLDIER'S PENSION,

190

WARRANT HANDED TO

13-1914

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA,

County.

Personally appears before me, the undersigned Ordinary in and for said County _____ and _____ personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say under oath, that they are personally and well acquainted with _____ whose application is herewith presented for a pension, that he has resided in this State continuously since the _____ day of _____ 18____ that he served in Company _____ of the _____ Regiment of _____ Brigade, and from our personal knowledge he, while in line of duty, was injured by the service as follows: (Give full statement, and tell in your own language when, where, and how the injury happened, or the disease was contracted, and to what extent applicant is disabled from work as a direct result thereof. If he does any labor or can do any, state what.)

Where was applicant's command surrendered?

Was he with it?

Were all of you present?

If not, where was he?

Where were you all?

How do you know the facts you state to be true?

We personally know above stated facts. We were with him in the army and have known him ever since.

He was honorably discharged or retired from the service on _____ day of _____ 18____.

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 and subscribed before me, this _____ day of _____ 1904.

Ordinary.

NOTE:—The Ordinary will see that the full text of the affidavit is understood by the witnesses, and that they are legally qualified to do so.

2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.

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

4.—Three witnesses are required.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA,

Fulton County.

Personally comes before me _____ Ordinary of said County, _____ and _____ both known to me as reputable physicians of said County, who, being severally sworn, say on oath, that they have carefully examined _____ and after such personal examination, say that the present condition of applicant is as follows: _____

and that such condition is permanent. Said condition arises from the following facts: _____

We have treated applicant professionally for _____ years, and his condition, as above stated, does _____ arise from hereditary or congenital causes, or from vicious or intemperate habits.

Sworn to and subscribed before me, this _____ day of _____ 1904.

_____ J. J. Moss M.D.

NOTE.—State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state its location, character and present condition. If from disease, give its nature and character, and its cause or origin, as understood by officials.

NOTE.—The Physicians will be careful to fill every blank space in oath.

STATE OF GEORGIA,

Fulton County.

I, _____ 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 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 and has been a bona fide resident since the _____ day of _____ 18____.

I also certify that the statements made by _____ are persons of respectability, that their statements are worthy of full credit and belief, and that the full text of the affidavit was read to and understood by them before they signed the same.

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

Ordinary _____ Fulton County.

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

Where were you all?

How do you know the facts you state to be true?

We personally know above stated facts. We were with him in the army and have known him ever since.

He was honorably discharged or retired from the service on _____ day of _____ 190____. 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 and subscribed before me, this _____

day of _____ 190____

Ordinary.

Note 1.—The Ordinary will see that the full text of the affidavit is understood by the witnesses, and that they are legally qualified to the same.
2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.
3.—All blank spaces must be filled when signed.
4.—Three witnesses are required.

I, John H. W. Vaughan, Ordinary of said County, do certify that I am well acquainted with W. S. Vaughan the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in the 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 and has been a bona fide resident since the _____ day of _____ 190____.

I also certify that the witnesses W. A. Manner are persons of respectability, that their statements are worthy of full credit and belief, and that the full text of the affidavit was read to and understood by them before they signed the same.

Given under my official signature and seal, this _____ day of _____ 190____.

Ordinary John H. W. Vaughan County.

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

Tulston County.

Application to be Allowed Pension for Total Blindness Under Act of General Assembly of August 19, 1912

NAME W. S. Vaughan

COMPANY B

REGIMENT 1st Co. Reserve

1915

W. S. Vaughan, Applicant

Pension off
11/11-1913
The low increasing
Pension \$2000
from 2nd appy
to 1st appy in 1913
Race - only appy
option on 1st appy
1st appy Race &
1st appy Race &
1st appy Race &
1st appy Race &

Residence of Strong
Application for Pension for Total Blindness
 Under Act August 19, 1912

STATE OF GEORGIA,
Fulton COUNTY.

Personally before me, the undersigned Ordinary of said County, comes *W. S. Vaughan*
 who after being duly sworn on oath says, That he is on the Pension of
 the State of Georgia as a member of Company, *4th Ga Reserve*
 C. S. A. Vol., or Georgia Militia, and has been paid a pension of *\$12* Dollars annually, and was so
 paid in 1913. That he has become totally blind by reason of *Iritis*
(state cause that produced blindness)

And that he makes this application that he may be allowed an increase in his pension for total
 blindness.

Sworn to and subscribed before me
 this *4th* day of *June*, 1913.
John R. Wilkinson Ordinary
Fulton County.

W. S. Vaughan
maud

STATE OF GEORGIA,
Fulton COUNTY.

Personally before me, the undersigned Ordinary of said County, comes *W. A. Maner*
 who, after being duly sworn, on oath says: That he is a resident of
Fulton County, and that he is a practicing physician, and has been for *12*
 years, and that he knows *W. S. Vaughan* of said County. That he is NOW
 and has been for the past *one* year totally blind; which blindness was the result of
arteritis

Sworn to and subscribed before me
 this *6th* day of *June*, 1913.
John R. Wilkinson Ordinary
Fulton County.

W. A. Maner, M.D.

STATE OF GEORGIA,
Fulton COUNTY.

ORDINARY'S OFFICE.

John R. Wilkinson being the Ordinary of said County,
 do certify that *W. S. Vaughan* is on the *Invalid* Pension Roll of
Fulton County, and has been paid a pension of *\$12* for 1913, and that
 he is a bona fide resident of said County, and that he has become totally blind. That he knows Dr.
W. A. Maner, M.D. who is a resident practicing physician of said County, and
 is a truthful man and physician of high standing, and what he says is worthy of belief and credit.

Given under my hand and official
 seal, and signed this day and year
 above stated.

(SEAL)

John R. Wilkinson
 Ordinary, *Fulton* County.

T. J. MOSS, M. D.
 ATLANTA PHONE 27
 CHATTAHOOCHEE, GA.

Chattahoochee Ga. June 26 1914

To whom it may Concern
 This is to Certify that I have been
 personally acquainted with Mr. W. S. Vaughan
 now a pension applicant on account of
 his eyes for about thirty years.
 I assisted him in obtaining pension a
 number of years ago on account of one
 eye being out said to be caused from
 measles contracted in time of service
 in Confederate army. Both eyes have been
 more or less inflamed and weak
 since I first knew him. He is now
 blind in the other eye causing total blindness.
 No doubt the first or primary cause brought
 on this total blindness on account of extra
 work with good eyes sympathy of old trouble
 to first blindness.

Very truly yours
T. J. Moss, M.D.

Sworn to and subscribed before me
this 6 day of June 1913
John R. Wilkinson Ordinary
Fulton County.

W. A. Maner, M.D.

STATE OF GEORGIA.
Fulton COUNTY.

ORDINARY'S OFFICE.

John R. Wilkinson being the Ordinary of said County.
to certify that W. S. Vaughn is on the Invalid Pension Roll of
Fulton County, and has been paid a pension of \$30.00 for 1913, and that
he is a bona fide resident of said County, and that he has become totally blind. That he knows Dr.
W. A. Maner M.D. who is a resident practicing physician of said County, and
is a truthful man and physician of high standing, and what he says is worthy of belief and credit.

Given under my hand and official
seal, and signed this the day and year
above stated.

(SEAL)

John R. Wilkinson
Ordinary, Fulton County.

in Confederate army, each eye have been
more or less inflamed and weak
since I first knew him. He is now
blind in the other eye, causing total blindness.
No doubt the first or primary cause brought
on this total blindness on account of extra
work with good eyes, sympathy of old trouble
to first blindness.

Very truly,
W. A. Maner, M.D.

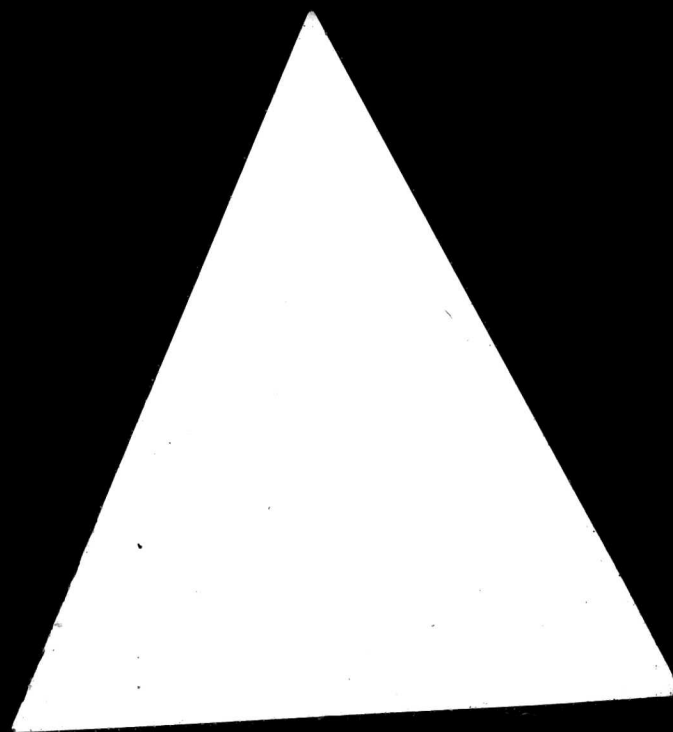
Dr. Dunbar Roy,
Dr. Newton Craig,
Grand Opera House,
Atlanta April 28, 1913.

This is to state that Mr. W. S. Vaughn has consulted me for his eyes
and I have operated upon the same. He is suffering from an incurable blind-
ness and is unable to do any work whatever.

P/H

Yours very truly,

Dunbar Roy M.D.



Vaughan, William A.

Fulton Co.

No. 327

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCT. 31, 1900

FOR

James B. Vaughan

Applicant H. B. Vaughan

County Fulton

Amount 100

Date of Warrant Dec 14/00

Entered on Record

Dec 14/00

do H. B. Vaughan

67954
Ap. 11/10/00

W. Vaughan, Notary Public

Forston Co

No 327

APPLICATION FOR ALLOWANCE

FOR THE YEAR ENDING OCT. 31, 1889.

FOR

James H. Vaughan

Applicant

County

Amount

Date of Warrant

Entered on Record

1889

1889

1889

1889

1889

STATE OF GEORGIA.

Fulton County.

PERSONALLY appears Wm. A. Vaughan of Fulton county, State of Georgia, who, being duly sworn, says on oath that he is a born free and resident of said State, and has been such continuously since the 1st day of January 1827; that he enlisted in the military service of the Confederate States (as of the State of Georgia) during the war between the States, and served as a Private in Company 10, of 9th Regiment of Georgia Volunteers McGuire's Brigade; that whilst engaged in such military service, at the battle of Gettysburg in the State of Virginia, on the 2nd day of July 1863, he was wounded as follows: gun shot, wounded in the right arm causing amputation of the arm below the elbow

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. 31, 1889.

Sworn to and subscribed before me, this 11th day of February, 1889, W. A. Vaughan
W. H. G. Gentry

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

STATE OF GEORGIA.

Fulton County.

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

Sworn to and subscribed before me, this 11th day of February, 1889, W. A. Vaughan
W. H. G. Gentry

ORDINARY.

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

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

STATE OF GEORGIA.

Fuller County.
I, *W. L. Kallum* Ordinary of said county, do certify that I am well acquainted with *Mr. J. W. Wrentham*, 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:

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 *11* day of *February* 188*8*

W. L. Kallum
Ordinary *Fuller* County.

POWER OF ATTORNEY.

STATE OF GEORGIA.

KNOW ALL MEN BY THESE PRESENTS, That I, of county, in said State, do hereby appoint

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

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

day of

188

(L. S.)

Executed in the presence of us:

DIRECTION:

Send money to me as follows, by

to

P. O.

County, Georgia.

NOTES.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of fact showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg; but the limb must for all purposes be "substantially and essentially useless."
4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. If application is for loss of fingers or toes the proofs must be made to show the number and points where amputated.
6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
7. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

STATE OF GEORGIA,

Fulton County.

I, *W. L. Leachman* Ordinary of said county, do certify that I am well acquainted with *Tom B. Vaughan* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

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

Given under my official signature and seal, this *5th* day of *February*, 189*0*

W. L. Leachman

Ordinary

Fulton County.

Vaughan, W. B.
1890

1890

Vaughan, W. B.

No. *237*

APPLICATION FOR ALLOWANCE

Loss right arm

Applicant *W. B. Vaughan*

County *Fulton*

Amount *100*

Date of payment *Feb 5*

Entered on record *Feb 5*

1890

W. B. Vaughan

Applicant

Applicant

Vaughan, W. B.
1891

No. *2161*

APPLICATION FOR ALLOWANCE

Loss of arm

Applicant *W. B. Vaughan*

County *Fulton*

Amount *100*

Date of Warrant *May 12*

Entered on record *Feb 11*

1891

W. B. Vaughan

Applicant

Applicant

STATE OF GEORGIA,

Fulton County.

I, *W. L. Leachman* Ordinary of said County, do certify that I am well acquainted with *William B. Vaughan* the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *12th* day of *Feb*, 189*1*

W. L. Leachman

Ordinary

Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears *Wm. A. Vaughan* of *Fulton* county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the *11th* day of *Feb*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *6*, of *9th* Regiment of *Georgia* Volunteers *Anderson*'s Brigade; that whilst engaged in such military service, at the battle of *Battle of* in the State of *Pa* on the *2nd* day of *July*, 1863, he was wounded as follows: *I am shot wound on the right arm causing amputation of the bone below the elbow*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of *one hundred* dollars.

Sworn to and subscribed before me, this the *11th* day of *January*, 1890 *W. A. Vaughan*

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

POWER OF ATTORNEY.

STATE OF GEORGIA

Fulton County.

KNOW ALL MEN BY THESE PRESENTS, That I,

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *11th* day of *January*, 1890

Executed in the presence of us:

Signature

Send money to me as follows, by

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears *Wallace A. Vaughan* 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 *11th* day of *Feb*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *6*, of *9th* Regiment of *Georgia* Volunteers *Anderson*'s Brigade; that whilst engaged in such military service at the battle of *Battle of* in the State of *Pa* on the *2nd* day of *July*, 1863, he was wounded as follows: *I am shot wound on the right arm causing amputation of the bone below the elbow*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of *one hundred* dollars, for *187*

Sworn to and subscribed before me, this the *11th* day of *January*, 1891. *W. A. Vaughan*

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 *11th* day of *January*, 1891.

[L. S.]

Executed in the presence of us:

Signature

Send money to me as follows, by

to

County, Georgia.

P. O.

STATE OF GEORGIA.

Fulton County.

I, W. L. Leachman Ordinary of said county, do certify that I am well acquainted with W. A. Vaughan the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this 2nd day of March 1892

W. L. Leachman

Ordinary

Fulton

County.

Fulton Co.
W. A. Vaughan
March 20/92

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 3, 1892

Name W. A. Vaughan
County Fulton
Disability loss of arm
Amount, \$ 100
Entered on record met 2 1892.
By W. H. Harrison
AGENT.

Application

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

Vaughan, W. A.

Fulton Co.

1892

Application for Pension

No. 1769

State of Georgia
Applicant, William A. Vaughan
County, Fulton
Amount, 100
Date of Warrant, 3/20
Entered on record, 3/20 1892.

Warrant

Applicant

STATE OF GEORGIA

For Applicants Heretofore Allowed Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I, _____ County, State of Georgia, do hereby appoint

of _____ my true and lawful attorney in fact, for _____ 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 in fact to receive for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1892.

Executed in the presence of us,

Send money to me as follows, by _____

P. O.

STATE OF GEORGIA, _____ to _____ County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

PERSONALLY appears William A. Vaughan of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously since the 1st day of March 1837; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 44 of 9th Regiment of Georgia Volunteers; that whilst engaged in such military service at the battle of Gettysburg on the 2nd day of July 1863, he was wounded as follows:

Wounded by a rifle ball causing the amputation thereof above the elbow

Dependent desires to participate in the benefits of the Act, approved October 24, 1887, and the act amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 25, 1892. I have heretofore been allowed a pension of

One hundred Dollars for 1891

Sworn to and subscribed before me this 7th day of March 1892.

W. L. Walker Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

Know all Men by these Presents, That I, William A. Vaughan of Fulton County, in said State, do hereby appoint

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

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

day of March 1892.

[L. S.]

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 OF GEORGIA.

PERSONALLY appears William A. Vaughan 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 1st day of November 1837; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 44 of 9th Regiment of Georgia Volunteers; that whilst engaged in such military service at the battle of Gettysburg on the 2nd day of July 1863, he was wounded as follows:

Wounded by a rifle ball causing the amputation thereof above the elbow

Dependent desires to participate in the benefits of the Act, approved October 24th, 1887, and the act amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 25, 1892. I have heretofore been allowed a pension of

One hundred Dollars for 1891

Sworn to and subscribed before me, this 7th day of March 1892.

W. L. Walker Ordinary.

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

STATE OF GEORGIA.

I, W. L. Walker Ordinary of said County, do certify that I am well acquainted with William A. Vaughan 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 the foregoing affidavit, and power of attorney, was signed, in a proper manner, and in the presence of me, and that the same are true and correct, and that the same are in conformity with the provisions of the Act, approved October 24th, 1887, and the act amendatory thereof, and that the same are in conformity with the provisions of the Act, approved October 24th, 1887, and the act amendatory thereof, and that the same are in conformity with the provisions of the Act, approved October 24th, 1887, and the act amendatory thereof.

Given under my official signature and seal, this 7th day of March 1892.

W. L. Walker Ordinary Fulton County.

STATE OF GEORGIA.
BOMER OF ATTORNEY.

Send money to me as follows, by

to

P. O.

County, Georgia.

STATE OF GEORGIA
POWER OF ATTORNEY

POWER OF ATTORNEY.
STATE OF GEORGIA, }
COUNTY. }

Know all Men by these Presents. That I,

of

County, State of Georgia, do hereby appoint

of

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

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

day of

1894.

[L. S.]

Executed in the presence of us

DIRECTIONS

Send money to me as follows, by

to

P. O.

County, Georgia.

*Reported dead by hand
July June 1894. G.H. 1894
(For this Army Enrolled)
Vaughan, William A*

W. H. Harrison

**Soldier's Pension.
1894.**

Name	William A. Vaughan
County	Pull'on
Disability	Loss of arm
Amount, \$	100.

2/12

1894

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDLED TO

Applicant

See to Harrison, who prints, 1894.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County. }

PERSONALLY appears William A. Vaughan 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 1st day of November 1887; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company C, of 9th Regiment of Georgia Volunteers 1st Brigade; that whilst engaged in such military service at the battle of Gettysburg in the State of Penn. on the 2nd day of July 1862 he was wounded as follows: Gun shot wound of right arm causing the amputation of arm above the elbow

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

One Hundred dollars, for the year 1893

Sworn to and subscribed before me, this, the

13th day of March 1894.

W. L. Calhoun Ordinary

STATE OF GEORGIA, }

Fulton County. }

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

Given under my official signature and seal, this 13th day of March 1894.



W. L. Calhoun Ordinary. Fulton County.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 12th
day of March 1894.



W. J. Galt
Ordinary Fulton County.

Audited Feb. 11 1889.

Wm. B. Wright
COMPTROLLER GENERAL

Fulton

Maimed Soldiers.

Voucher No. 327

Amount \$ 100.

Paid to Wm. A. Vaughan

For Loss of Right

Arm.
Feb. 11 1889

Included in Warrant No.
issued to Treasurer.

1889

WARRANT CLERK

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

Applicant

Audited

18

COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. 237

Amount \$ 100.

Paid to W. A. Vaughan

For Loss of right

Arm.
Feb. 5 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK

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

Applicant

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 324.

Atlanta, Ga. Feby 11 1889

Mr. William V. Vaughan of the County
of Fulton having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
Dec. 24, 1888, and the same having been allowed for

Eighteen Hundred and no/ Dollars
He is entitled to receive the sum of

for such disability, the same being the allowance due for the year ending October 24, 1889
The Treasurer will pay the same and hold his receipt on this voucher, and return same to
Executive Department for warrant.

By the Governor
W. H. Harrison

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
One Hundred and no/

per above voucher, this 11 of Feby 1889.
W. A. Vaughan

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 237

Atlanta, Ga. Feby 5 1890

Mr. W. A. Vaughan of the County
of Fulton having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
approved, Dec. 24, 1888, and the same having been examined and allowed for

Loss right 1000/ Dollars
He is entitled to receive the sum of One Hundred Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889

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

By the Governor,
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
One Hundred and no/

per above voucher, this 5 of Feby 1890.
W. A. Vaughan

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
One Hundred & 00/100
 Dollars,
 per above voucher, this *11* of *Feb* 1880.
W. A. Vaughan

RECEIVED OF STATE TREASURER, R. U. HARDEMAN
One Hundred & 00/100
 Dollars,
 per above voucher, this *5* of *Feb* 1880.
W. A. Vaughan

Vaughan, W. A.
Fulton
 1891.
 Maimed Soldiers.
 Audited. 1891.
 Voucher No. *101*
 Amount \$ *10.00*
 Paid to *W. A. Vaughan*
 for *Loss of arm*
Oct 12 1891.
 Included in warrant No.
 issued to Treasurer.
 1891.
 WARRANT-CLERK.
 Geo. W. Harrison, State Printer, Atlanta.
Applicant

1891.

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. }

No. 701

Atlanta, Ga. Feb'y 12 1891.

Mr. Wm. F. Vaughan of the County
Shulton 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
Sum of one hundred and 00/100 Dollars
He is entitled to receive the sum of one hundred Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

H. J. Martin
GOVERNOR.

By the Governor,

M. A. Harrison
SECY EXECUTIVE DEPARTMENT.

\$100⁰⁰

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

One Hundred 00/100 Dollars,
per above voucher, this 12 of Feb'y 1891.

W. F. Vaughan

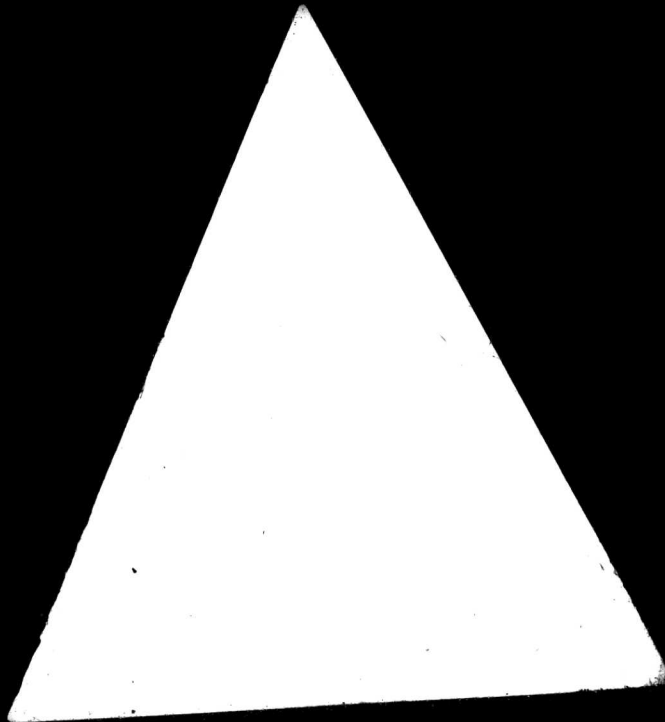
160^a

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

One Hundred 00/100 Dollars.

per above voucher, this *12* of *Decy* 1891.

W. A. Vaughan



100/413
R-52

Confederate

Soldier's Application

✓ UNDER ACT 1810

Trudeau

J. H. Thompson

for Regt

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Fulton County.

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

1. What is your name and where do you reside? E. C. Leach
Soldier's Home Atlanta, Ga.
2. How long and since when have you known S. H. Daughton the applicant?
Ever since I saw him in 1855 to 1862
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Reynolds, Ga. He came to see me the last of May and told me he would remain
4. When, where and in what Company and Regiment did S. H. Daughton enlist during war from 1861 to 1865? (Give date and place). March 12, Co K 52nd Regt N.Y.
5. How did you obtain your information of this Service? He was my 1st Lt. and was with him in service until he was captured Nov 24, 63
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date). from March 1862 till May 1863
7. When and where was his Command surrendered or discharged (Give date and place). Guantanamo C.
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? No
11. If not where was he and how came him there? He was a prisoner of war and was not home till after surrender
12. When did he leave his Command? 12th May 1863 Where was his Command when he left it? Baker's Creek, Va. or what cause did he leave? Captivity
By whose authority did he leave? _____ and how long was he granted leave? _____ How do you know all that you have stated to be true? If by your own knowledge (Tell clearly and specifically)
13. In what way was he prevented from returning to his Command? from being in command
How do you know? _____
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner? Yes If so, when and where? 15 May at Baker's Creek, Va.
In what prison was he held? Johnson Island, Va. and when released?

Sworn to and subscribed before me, this the 6th day of May 1911
Maxwell A. Anderson Ordinary
of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes S. L. King who on oath says that they are freeholders residing in said County and we know S. H. Daughton the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make list by items and value.)
House at full

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items). None
2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant? Wife's Brother
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full value? or was it made to obtain a pension?
Sworn to and subscribed before me, this the 1st day of May 1911
Maxwell A. Anderson Ordinary,
of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

John R. Williamson Ordinary of said County, certify that I know the applicant S. H. Daughton for Pension is the person he represents himself to be and resides in said County. That I also know E. C. Leach the witness swearing to the service and S. L. King who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of Fulton shows that he and wife
Value for tax is in 1908 \$ None for 1909 \$ None for 1910 \$ None

Sworn under my hand and official seal of office this 14 day of May 1911
John R. Williamson Ordinary,
of Fulton County.

- NOTES 1. Before any questions are answered the Ordinary shall swear applicants and all witnesses in the following words: "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

12. When did he leave his Command? 14 July 1893 Where was his Command when he left it? Baker's Creek, Minn. For what cause did he leave? Captivity
By whose authority did he leave? _____ and how long was he granted leave? _____ How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) _____

13. In what way was he prevented from returning to his Command? from being in command
How do you know? _____

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

15. Was applicant captured as a prisoner? Yes If so, when and where? 1 May
at Baker's Creek, Minn.
In what prison was he held? Johnson Island, St. Lawrence Co., N.Y. and when released _____

Sworn to and subscribed before me, this 6th day of Oct, 1911
Marshall W. Johnson Ordinary
of Fulton County.

service and _____ and were duly sworn by me before signing the foregoing affidavit and they are all residents of said County and their statements are entitled to full faith and credit. That the Tax Returns of Fulton shows that he and wife _____ for 1909 \$ Blank for 1910 \$ Blank value for tax is in 1908 \$ Blank
Sworn under my hand and official seal of office this 14 day of Nov, 1911.
John W. Johnson Ordinary
of Fulton County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words: "You do solemnly swear that you will give answers to each question asked you and the evidence you shall give shall be the whole truth so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of residents unnecessary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, _____

I, _____, hereby authorize _____

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

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____, 1896.

[L. S.]

Executed in presence of us _____

Dr. Kable 1045-
Veal, J. T.

(For Those Already Enrolled.)

Fulton Co

No. *679*

SOLDIER'S PENSION.
1896.

Name *J. T. Veal*

County *Fulton*

Disability *Army Dr. Hall's*

Amount, \$ *100.00*

2/26 1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

appet

Dep. W. Harrison, State Printer, Atlanta.

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.

Personally appears J. T. Veal 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 21st day of October 1837; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company 8, of 18th Regiment of Georgia Volunteers, Hood's Brigade; that whilst engaged in such military service in the State of Virginia, on the day of June 1863, he was wounded, injured or diseased as follows:
Shot with a minnie ball in left arm causing loss of same

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 30th, 1896. I have heretofore as a resident of Fulton County been allowed a pension of \$80 hundred dollars, for the year 1895.

Sworn to and subscribed before me, this, the 26th day of Feb'y 1896. J. T. Veal
M. L. Calhoun, Ord.

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

STATE OF GEORGIA,
Fulton County.

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

Given under my official signature and seal, this 26th day of Feb'y 1896.



N. L. Calhoun
Ordinary Fulton County.
LOMBARD ALLOMEN

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

STATE OF GEORGIA,
Fulton County.

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

Given under my official signature and seal, this 26th
day of Feb'y 1896.



CLERK OF GEORGIA

N. L. Colburn
Ordinary Fulton County.

LOMER DE VILLOREY

OK

INDIGENT PERSON

1908

Name *John W. Lane*
Occupation *Farmer*
County *Keokuk*

Approved

JOHN W. LANE

WARRANT RETURNED

STATE OF IOWA

POWER OF ATTORNEY

Given

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I, _____ hereby authorize

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

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

Executed in presence of _____

Neal, May 11, 1908
OK for 1908
W. W. Neal

INDIGENT PENSION.

1908

W. W. Neal
John W. Neal
W. W. Neal
W. W. Neal

190

JOHN W. LINDSEY

WARRANT HANDED TO

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

COUNTY.

I, John W. Neal of said State and County, desiring to avail himself of the Pension Act (Section 1204, 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.)
John W. Neal, 114 North Fulton County, Georgia

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

3. When and where were you born? Winnetka, La. Feb. 29/1888

4. When and where and in what company and regiment did you enlist or serve? Co. K. 56 Regt. Atlanta Va. 1861

5. How long did you remain in such company and regiment?
Twenty-one months, then three years

6. When and where was your company and regiment surrendered and discharged?
James River Va. May 1/1865

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

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

9. How much can you earn (gross) per annum by your own exertions or labor? Nothing

10. What has been your occupation since 1865? General labor

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty?" Age, infirmary and poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight. Have been growing ever weaker since 1888. Have been unable to work for about four years. Have had rheumatism for several years, which almost blind me.

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

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? None

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

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?
By doing odd work at night, etc. at odd jobs

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

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? General labor

19. Have you a family? If so, who composes such family? Give their means of support. Have they a home, stand, or other property? Their ages and how employed? Wife, two children, no property, no home

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

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

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

Sworn to and subscribed before me this the _____ day of _____ 1908

John W. Neal Ordinary, _____ County.

Applicant.

QUESTIONS FOR WITNESSES

STATE OF GEORGIA,

Fulton County.

1. What is your name and where do you reside? *John W. Vance*

2. Are you acquainted with *John W. Vance* the applicant? If so, how long have you known him? *Since his birth*

3. Where does he reside, and how long and since when has he been a resident of this State? *Atlanta, Ga. has been in the State since his birth*

4. When, where and in what company and regiment did he enlist, and how do you know? *See No. 11. He was in 1861. He has been in the army since then.*

5. Were you a member of the same company and regiment? *Yes*

6. How long did he perform regular military duty? *From 1861 to 1865*

7. When and where was his command surrendered? *At Appomattox*

8. Were you present when it surrendered? *Yes*

9. Was applicant present? *Yes*

10. If he was not present, where was he? *At Appomattox*

When did he leave his command? *At Appomattox* How do you know all of this? *By what authority he left? Being a member*

11. What property, effects or income has the applicant? (Give your best knowledge.) *None*

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907? *None*

13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? *None*

14. What is the applicant's occupation and physical condition? *He is a farmer and is in good health*

15. Is the applicant unable to support himself by labor of any kind, if so, why? *He is not*

16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? *By his own labor*

17. What portion of his support for these four years was derived from the own labor or income? *None*

18. Give a full and complete statement of the applicant's physical condition that entitled him to a pension under Section 1204, Code, and how long he has been in that condition? *He has been in that condition since 1861*

19. What property have they? Children's age and what other property? *None*

20. When was the applicant born? *1841*

21. When was the applicant married? *1861*

22. When was the applicant divorced? *None*

23. When was the applicant widowed? *None*

24. When was the applicant deceased? *None*

25. When was the applicant born? *1841*

26. When was the applicant married? *1861*

27. When was the applicant divorced? *None*

28. When was the applicant widowed? *None*

29. When was the applicant deceased? *None*

AFIDAVIT OF PHYSICIANS

STATE OF GEORGIA,

Fulton County.

Personally seen by *Dr. Roberts M.D.* and *Dr. Roberts M.D.* both known to me as reputable physicians

of said County, who have carefully examined me so that they have examined carefully.

John W. Vance applicant for pension under Section 1204, Code, and after

examining me, they have concluded that his physical condition is as follows:

He is a farmer and is in good health. He is a farmer and is in good health. He is a farmer and is in good health.

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

John W. Vance 1841

John W. Vance 1841

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton County.

I, *John W. Vance* Ordinary, in and for said County, hereby certify

that the applicant, *John W. Vance* resides in said County, and has

been a bona fide resident of this State since the day of *1841*

and that the witnesses, *John W. Vance*

are not lawfully married, 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

before me, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of *Fulton* County shows that applicant

returned for taxation in his name in 1901 *Dollars of*

property, and in 1902 *Dollars of property; in 1902*

Dollars of property; in 1903

Dollars of property; in 1904

Dollars of property; in 1905

Dollars of property; in 1906

Dollars of property; in 1907

Dollars of property.

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

Witness my hand and seal of office, this *22nd* day of *August* 1908

John W. Vance Ordinary.

Fulton County.

14. What is the applicant's occupation and physical condition? *He is a farmer, but is unable to work.*

15. Is the applicant unable to support himself by labor of any sort, if so, why? *He is such an invalid that he cannot work.*

16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? *By his wife, who is a farmer's wife.*

17. What portion of his support for these four years was derived from his own labor or income? *None.*

18. Give a full and complete statement of the applicant's physical condition, that enables him to a person under Section 1234, Code of the State of New York, to be considered as a pauper.

19. What property does he own? *He owns a small farm, but it is not sufficient to support him.*

20. What property does he own? *He owns a small farm, but it is not sufficient to support him.*

honest protection, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of _____ County shows that applicant received for taxation in his name in 1901 _____ Dollars of property; in 1902 _____ Dollars of property; in 1903 _____ Dollars of property; in 1904 _____ Dollars of property; in 1905 _____ Dollars of property; in 1906 _____ Dollars of property; in 1907 _____ Dollars of property.

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

Witness my hand and seal of office, this _____ day of _____ 1908.

John H. [Signature] _____
 County Clerk.

Notarized and sworn to before me, the County Clerk of the County of _____, New York, on the _____ day of _____, 1908, at _____, New York.

Widow's Pension

UNDER ACT 1910

County

Name

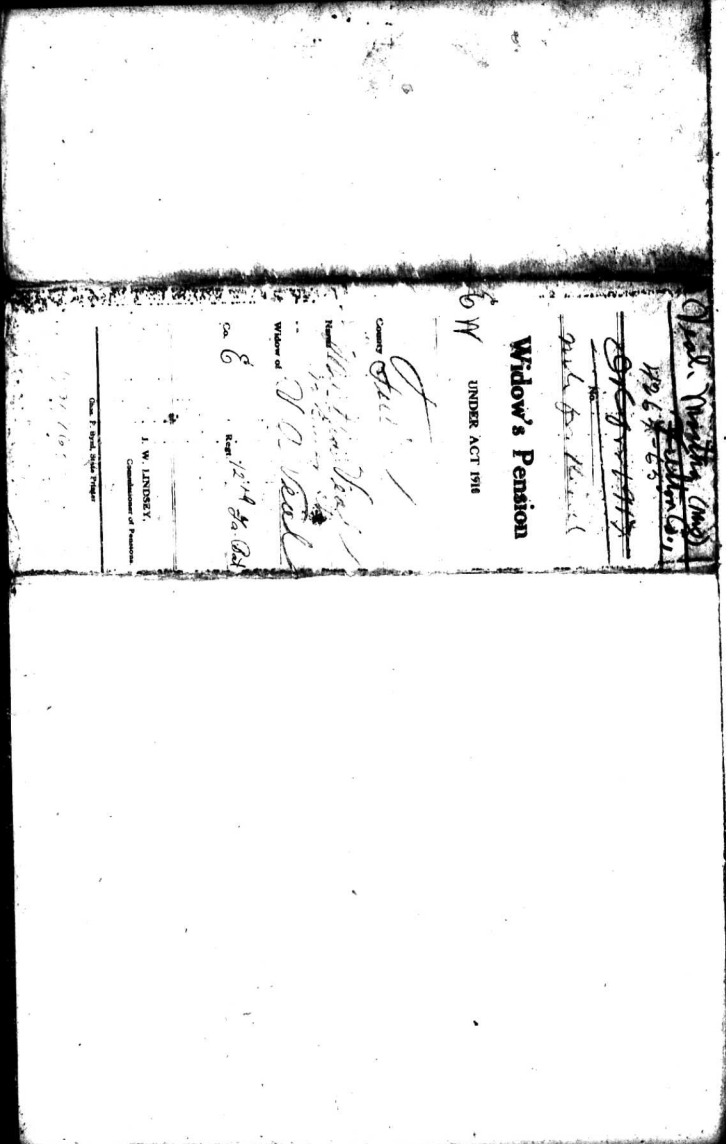
Widow of

Co.

Regt.

J. W. LINDSEY,

Commissioner of Pensions.



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

STATE OF GEORGIA,
Fulton County.

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

1. What is your name, and where do you reside? Martha Neal, 12 Riverside St. Atlanta Ga.
 2. How long and since when have you been a continuing resident of the State of Georgia? All my life
 3. When, where and to whom were you married? October 16 on the 1st day of July 1867
 4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service) Co. G. 13th Ga. Inf. 1st Div. of Georgia Volunteers
 5. When and where did the Commands of your husband surrender or discharge from the army? at Appomattox
 6. Was your husband personally present at the time of the surrender or discharge of this Command? Yes
 7. If he was not present state clearly where he was? Yes
 8. Where was his command when he left? Yes
 9. For what cause did he leave his Command? Yes
 10. By whose authority did he leave his Command? Yes
 11. For how long was he granted leave of absence? Yes
 12. What was his physical condition when he left his Command? Yes
 13. What effort did he make to return to his Command? Yes
 14. In what way was he prevented from going back to Command? Yes
 15. Was he captured by the enemy at any time? Yes
 16. If so, when and where captured and where held as a prisoner, and when and for what cause released? Yes
 17. When and where did your husband die? Atlanta Ga. 2-19-10
 18. Were you residing together when he died? Yes
 19. If not, how long had you resided apart? Yes
 20. What property of any description did you own, hold or control for your use and its cash value Nov. 4, 1908? (State same by items and where situated) No property
 21. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None
 22. What property of any description of any value have you now? None
 23. Give list and cash value. None
 24. What are your annual earnings or income from any source and their value? None
 25. Have you or your husband heretofore been paid a pension by the State? Yes
 26. If so, when and for what cause, were you or your husband placed on the Roll? Under Act of March 3rd 1877
- Sworn to and subscribed before me this the 31 day of May 1910 Martha Neal
Charles H. Mason Ordinary.
of Fulton County.

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

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

1. What is your name and where do you reside? J. M. Parker, 1015 1/2 St. George, Atlanta, Ga.
2. How long and since when have you known Mr. & Mrs. Martha M. Parker applicant?
3. How long and since when has she continuously resided in this State? (Give date.) Since 1886
4. When and to whom was she married? J. M. Parker How do you know? Personally, he is her husband.
5. How long and since when did you know J. M. Parker her husband? At his wife's house in 1886
6. When and where did J. M. Parker the husband of Applicant die? October 10, 1894, in Atlanta, Ga.
7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? None
9. Were they divorced? No
10. When, where and in what Company and Regiment did J. M. Parker enlist? 1st Georgia Battalion, 1864
11. Were you a member of the same Company? Yes
12. How long within your personal knowledge did he perform actual military service with his Company and Regiment? About 4 years
13. When and where did his Command surrender, and was discharged? April 9, 1865, at Appomattox, Virginia
14. Were you personally present when it was surrendered? No If not where were you? At Appomattox and how came you there? As a member of the 1st Georgia Battalion
15. Was the husband of applicant personally present at surrender? Yes If not where was he? At Appomattox when, where and for what cause did he leave Command? (Give date.) April 9, 1865 By whose authority did he leave his Command? By the authority of the commanding officer and how long was he granted leave? He was granted leave for three years
16. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? None
17. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? He has been in the service of the Government since he was discharged

Sworn to and subscribed before me this the 3rd day of May, 1916 J. M. Parker his husband
Charles C. Mason, Jr. Ordinary.
of DuPont County.

AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA.

Personally before me comes J. M. Parker who on oath says that they are freeholders of said County and that they know of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows:

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

Schedule (B).
We know the property sold or given away since Nov. 4th, 1908, its cash value to be as follows:
Personal property \$
Money, notes and accounts due \$

Schedule (C).
We also know what property she has now in her possession, use and control to-wit:
Acres of land, worth \$
Horses and Mules \$
Cows and Hogs \$
Other Property \$
Income and Earnings \$
Total Value of all property and effects \$

Sworn and subscribed before me this the 3rd day of May, 1916 J. M. Parker Ordinary.
of DuPont County.

ORDINARY'S CERTIFICATE.
STATE OF GEORGIA.

J. M. Parker County. Ordinary of said County do certify that, I know J. M. Parker the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th Nov. 1908.

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

That the Tax Returns J. M. Parker Returned for Tax is for 1908 \$ None for 1910 \$ None for 1911 \$ None for 1912 \$ None for 1913 \$ None for 1914 \$ None for 1915 \$ None for 1916 \$ None for 1917 \$ None

Sworn under my hand and official seal of office this 3rd day of May, 1916 J. M. Parker Ordinary.
(SEAL.) DuPont County.

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

Howard H. Mason, Clerk Ordinary.
of Dulton County.

5 Attach certified copies of marriage and divorce records to this report.

Widow's Application

To Be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910.

Name _____
County _____
Widow of _____
Company _____
Approved _____

J. W. LINDLEY
Clerk Ordinary of Ferguson
CHIEF OF BUREAU PUBLIC AFFAIRS

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA.

Dulton County

Personally before me comes Martha Neal of said County, who, after being duly sworn, on oath says, that she is the widow of V. A. Neal to whom in the County of Grady State of Georgia she was married on the 1st day of July 1867 and that she remained his wife, and resided with him to the date of his death Aug 15 1915 and that she has not since his death remarried. At the time of his death he was a resident of Dulton County, in said State of Georgia, and he was on the Grady Pension Roll of the State and paid a pension of \$ 50.00 in Dulton County for 1915 per annum on account of being a soldier in Company C. 1st Georgia Battalion Volunteers of State Militia.

At the death of V. A. Neal he was in the use and possession of the following property none whatever

of the cash value of \$ _____

What property of any kind and of any value have you in your use, control and possession now, and

the cash value, (State fully.) _____

Acres land _____ \$ _____

Horses and Mules _____ \$ _____

Hogs, Cows, etc. _____ \$ _____

Total Cash value of all property _____

That she is now a bona fide resident citizen of said County of Dulton and she

has so continuously resided since 22 day of Sept 1902

Sworn to and subscribed before me, this 21 day of May 1916 Martha X Neal

Howard H. Mason Clerk Ordinary, Dulton County.

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

STATE OF GEORGIA.

Grady County

Personally before me come R. H. Sellers known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Martha Neal who made the foregoing affidavit, is the lawful widow of V. A. Neal who died in Dulton County in said State of Georgia on 15th day of Aug 1915 and that she has not since remarried. That she became the wife of V. A. Neal on the 1st day of July 1867 and that she and he had resided together as man and wife continuously since 1st day of July 1867 and that she V. A. Neal was the same man who was on the pension roll of said State from Dulton County when he died.

Sworn to and subscribed before me, this the 1st day of Sept 1916 R. H. Sellers Clerk Ordinary, Grady County.

Affidavit of Witnesses to Prove Marriage and to Whom

Death of Husband.

STATE OF GEORGIA.

Grady County.

Personally before me came *R. H. Sellers* known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge *Mrs. Mary Deal* who made the foregoing affidavit, is the lawful widow of *W. A. Deal* who died in *Fulton* County in said State of *Georgia* on *13th* day of *Aug* 19*16* and that she has not since remarried. That she became the wife of *W. A. Deal* on the *1st* day of *July* 18*67* and that she and he had resided together as man and wife continuously since *1st* day of *July* 18*67* and that *W. A. Deal* was the same man who was on the pension roll of said State from *Fulton* County when he died.

Sworn to and subscribed before me, this the

1st day of *Sept* 19*16*

R. H. Sellers Ordinary

of *Grady* County.

Deal, V. A.
Fulton County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 57
(Trans. from DeKalb 1902)

DISABLED
SOLDIER'S PENSION
1903.

Name V. A. Deal
County Fulton DeKalb
Co. E 12 Regiment 4th
Disability back thigh wound
Amount, \$ 50.00

1/24 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W. A. Deal
WED. W. HARRISON, STATE PRINTER, ATLANTA

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

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

by _____

at _____

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

day of _____ 1903.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____ at _____ IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____ day of _____ 1903. [L. S.]

Executed in presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 57
(Trans. from Atlanta 1903)

DISABLED

SOLDIER'S PENSION
1903.

Name W. A. Neal
County Fulton
Co. B. 12 Regiment 4th
Disability breast & arm
Amount, \$ 50.00 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W. A. Neal
JOHN W. LINDSEY, STATE PRINTER, ATLANTA

no date

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ by _____ at _____ IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1904. [L. S.]

Executed in the presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 100
DISABLED
SOLDIER'S PENSION
1904.
Name W. A. Neal
County Fulton
Co. B. 12 Regiment 4th
Disability breast & arm
Amount, \$ 50.00 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W. A. Neal
JOHN W. LINDSEY, STATE PRINTER, ATLANTA

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton County.

Personally appears,

V. A. Neal 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 *23* day of *May* 18*47*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *C*, of *12th* *Regiment* of *Volunteers* *Batt. 1st* *Brigade*; that whilst engaged in such military service in the State of *Georgia*, on the *12* day of *May* 18*64*, he was wounded, injured or diseased as follows:

Wounded in back & hip

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 *De Kalb* County, been allowed an invalid pension of *50* Dollars, for the year 1902.

Sworn to and subscribed before me, this *1* day of *Jan* 1903.

John R. Wilkinson Post-office *De Kalb*
NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,
Fulton County.

I, *John R. Wilkinson* Ordinary of said County, do certify that I am well acquainted with 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 *8* day of *Jan* 1903.

John R. Wilkinson Ordinary *Fulton* County.

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

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears

V. A. Neal 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 *23* day of *May* 18*47*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *C*, of *12th* *Regiment* of *Volunteers* *Batt. 1st* *Brigade*; that whilst engaged in such military service in the State of *Georgia*, on the *12* day of *May* 18*64*, he was wounded, injured or diseased as follows:

Wounded in back & hip

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 *De Kalb* County, been allowed an invalid pension of *50* Dollars, for the year 1903.

Sworn to and subscribed before me, this *1* day of *Nov* 1904.

John R. Wilkinson Post-office *De Kalb*
NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,
Fulton County.

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

Given under my official signature and seal, this *Jan 21* day of *Jan* 1904.

John R. Wilkinson Ordinary *Fulton* County.

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

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. COUNTY.

Personally appears V. A. Veal 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 year 1847 that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 12th Batt. Volunteers, Artillery, 1st Brigade; that whilst engaged in military service in the State of Va on the 17 day of Sept 1864, he was wounded, injured or diseased as follows:

Body wound

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

Sworn to and subscribed before me, this the 17th day of Sept 1905.

Post-office.

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

STATE OF GEORGIA,
Fulton. COUNTY.

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

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

Ordinary Fulton. County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton. County.

Personally appears V. A. Veal 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 year 1847 that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 12th Batt. Volunteers, Artillery, 1st Brigade; that whilst engaged in such military service in the State of Va on the 17 day of Sept 1864, he was wounded, injured or diseased as follows:

Body wound, Winchester

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Fulton County, been allowed an invalid pension of Fifty Dollars, for the year 1905.

Sworn to and subscribed before me, this the 17th day of Jan 1906.

Post-Office.

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

State of Georgia,
Fulton. County.

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

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

Ordinary Fulton. County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of _____ 1907.

[L. S.]

Executed in presence of _____

Paul H. A.
Fulton Co.

CASE SERVICE 250
(FOR THOSE ALREADY ENROLLED)

No. *112*

DISABLED
SOLDIER'S PENSION
1907.

Name *W. A. Neal*
County *Fulton*

Co. *1st* Regiment *1st* Div.

Disability *both arms*

Amount, \$ *50.00*

417 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

app

W. H. LINDSEY, SECRETARY, ALABAMA.

no date

GEORGIA, De Kalb County.

I Certify, That J. A. Deal
the holder of this Certificate was Invalid Pensioner,
and paid the sum of Fifty Dollars
from this County, in 1902, and that he, or she, now resides in Fulton
County.

Given under my hand and official signature, this Jan 6th 1903.

M. R. S. Place
Ord Secy

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears V. A. Neal 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 1847; that he enlisted in the military service of the Con-
federate States (or of the State of Ga) during the war between the
States, and served as a Private in Company 16, of 12th Regiment
of Ga Volunteers's Brigade; that whilst engaged
in such military service in the State of Ga, on the 17 day
of Sept, 1864, he was wounded, injured or diseased as follows:

Body wound at Shiloh

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

Sworn to and subscribed before me, this the
day of JAN 1907.

John R. Wilkinson.

V. A. Neal
Postoffice De Kalb

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

State of Georgia,

Fulton County.

I, John R. Wilkinson, Ordinary of said County,

do certify that I am well acquainted with V. A. Neal,
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, 1907.

John R. Wilkinson
Ordinary Fulton County.

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

M. B. R. Selace
Ord. recd. 1/1/07

particulars by the extent of the disability resulting from the wound or disease.

State of Georgia,

Fulton County.

John R. Williamson

Ordinary of said County,

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

Given under my official signature and seal this _____
day of _____ 1907.

John R. Williamson

Ordinary **Fulton** County.



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

W. H. G. C.
Fulton County
No. *Oct 4 1902*
INDIGENT PENSION.
1907

Name *J. E. Verhine*
County *Fulton*
Co. *C* *1st. G. Regt.*
Approved *1907*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO.

SPW. 5-5-1907

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

Franklin Printing and Publishing Co., Inc. W. Harris
Atlanta, Georgia

9/2/07

This. Met. of the. Same.
There was

1907

STATE OF GEORGIA,
COUNTY, *Fulton*
I, *J. E. Verhine*,
do hereby certify that the within and foregoing is a true and correct copy of the original as the same appears in the files of the
Commissioner of Pensions.
Witness my hand and seal, this *4th* day of *October*, 1907.
[L. S.]
J. E. Verhine
Commissioner of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY,

hereby authorize

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

at by 190

Witness my hand and seal, this day of 190

Executed in presence of

John W. Lindsey
Commissioner of Pensions
this was

John W. Lindsey
Commissioner of Pensions

INDIGENT PENSION.

1907

John W. Lindsey

Commissioner of Pensions

at 4/10/1907

1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDER TO

4/10/1907

Ordinary with seal, name of Applicant, Company and Regiment in full as indicated above.

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Ordinary with seal, name of Applicant, Company and Regiment in full as indicated above.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Fulton County,

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

1. What is your name and where do you reside? (Give, State, County and Postoffice.)
John W. Lindsey, Fulton County, Ga.
2. How long and since when have you been a resident of this State?
64 years in Fulton County, Ga.
3. When and where were you born?
Fulton County, Ga.
4. When and where and in what company and regiment did you enlist?
1862 in 4th Co. 1st Regt. U.S. Cavalry, U.S. Army.
5. How long did you remain in such company and regiment?
7 years in 4th Co. 1st Regt. U.S. Cavalry, U.S. Army.
6. When and where was your company and regiment current and discharged?
Company and Regiment Discharged at Richmond, Va.
7. Were you present with your company and regiment when it was surrendered?
Yes.
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?
Left the 4th Co. 1st Regt. U.S. Cavalry by Order of Regt. Surgeon at Richmond, Va.
9. How much can you earn (gross) per annum by your own exertions as laborer?
Nothing.
10. What has been your occupation since 1865?
Nothing.
11. Upon which of the following grounds do you base your application for pension viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"?
Infirmary and poverty.
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
As it has been stated in my application, I have been in such condition since 1865, and have been unable to earn my support since that time.
13. What property, real and personal, or income, do you possess, and its gross value?
None.
14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same?
None.
15. In what County did you reside during those years, and what property did you then return for taxation?
In Fulton County, Ga.
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905?
By my own earnings as a watchman.
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
Nothing.
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year?
As a watchman at the U.S. Army, U.S. Cavalry, U.S. Army.
19. Have you a family? If so, who composes such family? Give their names and ages. Have they a husband, or other property? Their ages and how employed?
None.
20. Are you receiving any pension? If so, what amount and for what disability?
None.
21. Have you ever made an application for pension before?
None.
22. How many applications have you ever made and under what class?
None.

Subscribed and sworn to before me this 1st day of May, 1907.
John W. Lindsey
Ordinary.
Fulton County.

Every Question MUST Be Answered

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name and where do you reside? W. C. Henderson
2. Are you acquainted with Barry J. Henderson, the applicant, if so how long have you known him? Yes 47 years
3. Where does he reside, and how long and since when has he been a resident of this State? 12 years in Fulton 3 in the State at the time
4. When, where and in what company and regiment did he enlist, and how do you know? Co. 6 11th Reg. Tennessee Inf. - Mar 24 - 1862
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? 1862 - 1863 - 1864 - 1865
7. When and where was his command surrendered? April - 1865
8. Were you present when it surrendered? At Houston Tex. No
9. Was applicant present? No
10. If he was not present where was he? At Home on sick furlough
11. When did he leave his command? Apr 29 1865 For what cause? Sick
12. By what authority he left? By Surgeon's order and being a party
13. What property, effects or income has the applicant? (Give your means of knowledge) None - By Surgeon's order and being a party
14. What property, effects or income did the applicant have in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? None - By Surgeon's order and being a party
15. Has he conveyed away any of his property in the last four years? if so, what was it, and to whom? None
16. What is the applicant's occupation and physical condition? He is old and infirm and crippled
17. Is the applicant unable to support himself by labor of any sort; if so, why? One week of his infirmity and his crippled condition
18. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? By his Sons
19. What portion of his support for these four years was derived from his own labor or income? About one half
20. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under section 1254, Code. This General Disability and age would entitle him to a pension
21. Who composes family? What property have they? Children's ages and their earning capacity? Wife and two children 14 & 12 & 8 and 2. No property
22. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this 2d day of May 1907.

John R. Henderson, Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

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

That we ought have no interest in his recovery. He has quite public trouble. His trouble are incurable as his age and the permanent. Today is not incurable to cure or during, but any trouble and that we have no interest in said pension being allowed, or anything.

Sworn to and subscribed before me, this 2d day of May 1907.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John R. Henderson Ordinary, in and for said County, hereby certify that the applicant, W. C. Henderson resides in said County, and has been a bona fide resident of this State since the day of 1862 and that the witnesses, viz: W. C. Henderson, W. C. Henderson, W. C. Henderson are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Fulton County shows that applicant returned for taxation in his name in 1901 None Dollars of property; in 1902 None Dollars of property; in 1903 None Dollars of property; in 1904 None Dollars of property; in 1905 None Dollars of property.

In my opinion the foregoing claim is Not made in good faith. Witness my hand and seal of office, this 2d day of May 1907.

John R. Henderson, Ordinary.

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

15. Is the applicant unable to support himself by labor of any sort; if so, why? his infirmity and his crippled condition

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? By his Sons

17. What portion of his support for these four years was derived from his own labor or income? About one half

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code His General Disability and age

19. Who composes family? What property have they? Children's ages and their earning capacity? Wife and two children ages 4, 10 & 12 and 1. No property.

20. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this 2 day of May 1907
John R. Wilkinson Ordinary.

returned for taxation in his name in 1901. _____ Dollars of property; in 1902 _____ Dollars of property; in 1904 _____ Dollars of property; in 1905 _____ Dollars of property.

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

Witness my hand and seal of office, this 20 day of May 1907
John R. Wilkinson Ordinary.
of Fullon County.

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

Application for Pension
Due Deceased Soldier Under
Act 1891.

By
John R. Wilkinson
Ordinary of
Fullon County

Clk. _____ Reg't. _____ Vols. _____

APPROVED AND PAID

Application for Pension Due Deceased Soldier

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Fulton County.

Personally before me comes Mrs. M. J. Werhine, of said county, after being duly sworn, on oath says that she is the widow of J. E. Werhine who was duly enrolled as a Indigent Pensioner from the county of Fulton and was paid a pension of Sixty (60) Dollars from Fulton county for 1900 and that the said J. E. Werhine died in Fulton county on the 16th day of Oct 1900, and at the time of his death a Pension of 60 dollars was due him from Fulton county and unpaid for 1901. Applicant further swears that she married the said J. E. Werhine on the 24th day of Feb 1864 in Cobb county and State of Georgia and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 10th day of Jan 1901.
Harold B. Gorman } Mary J. Werhine [L.S.]
Fulton County. }

AFFIDAVIT OF WITNESS.

GEORGIA, Fulton County.

Personally before me comes Charles R. Gorman, who on oath says that he knew J. E. Werhine while in life and that he knows Mrs. Mary J. Werhine the above applicant; that he knows that the said J. E. Werhine and Mary J. Werhine were in due form of law married in the county of Cobb in the State of Georgia on the 24th day of Feb 1864, and that they resided together as husband and wife from date of marriage to the day of his death on the 16th day of Oct 1900, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 10th day of Jan 1901.
Harold B. Gorman } Charles R. Gorman
Fulton County. }

Notarize this form and forward by mail to the Pension Office where there is no widow.
 25 - Ordinary must send in all cases certified copy of marriage license attached.

of James day of Jan 1864 and that they resided
 the 24th day of Jan 1864 together as husband and wife
 together as husband and wife from 1864 to the day of his death on the 18th
 day of Oct 1864 and I now know that she is his dependent widow.
 Sworn to and subscribed before me this 10th day of Jan 1864
James B. Gorman }
Julien County.

Form 10. This form may be used by guardians or minor children where there is no widow.
 24. Ordinary must read in all cases periodical copy of marriage license attached.

NAME Vernice, James YEAR 1908 COUNTY Julien

WOMAN AND CHILD BORN? Bartow County, Georgia.

ENLISTED DAY AND PLACE? March 4th, 1868, Cobb County, Georgia.

RANK.

COMPANY AND REGIMENT Co. C. 41st. Cal. Regt.

NAME OF CAPTAIN AND SOLDIER?

REMARKS At home, sick furlough, while in the Service.

REMARKS, WHEN NOT WOUNDED

REMARKS.

WOMAN AND CHILD DECEASED? Command surrendered at Kinston, North Carolina, April 1868.

IF NOT IN DEED OF DEATH, WHEN WERE YOU Left the command, sick furlough by order of Regimental Doctor. Witness states: Left Command 60 days before the surrender.

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. E.O. (Devy) Lindsay, - Same Command- No date.

22.

IT NOT PRACTICAL AT SURRENDER, WHENEVER YOUR

DIED, WHEN AND WHERE?

REPORT,

WITNESSES. E.O. (Barry) Lindsay, - Same Command- No date.

the.

Left the command, sick from
long by order of Regiments
Doctor. Witness stated
Left Command 60 days before
the surrender.

No.

Widow's Application

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

TV

County *Fulton*

Name *M. J. Verhine*

Widow of *J. C. Verhine*

Lo 41 - Ia

Approved

J. W. LINDSEY

Commissioner of Finance

Chas. F. Byrd, State Printer, Atlanta

4071 3/15-1911

Widow's Application
 To Be Filled in Her Own Right, when
 Husband Was on Roll at Death.
 Name *Mrs. M. J. Verhine*
 Widow of *J. C. Verhine*
 County *Fulton*
 Approved *4-4-11*
 J. W. LAMBERT
 Clerk of Fulton
 460 3/15-1911

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
Fulton County.

Personally before me comes *Mrs. M. J. Verhine* of said County, who, after being duly sworn, on oath says, that she is the widow of *J. C. Verhine* whom in the County of *Cobb* State of *Georgia* she was married on the *24th* day of *Jan* 1864 and that she remained his wife, and resided with him to the date of his death in *Oct* 1910 and that she has not since his death remarried. At the time of his death he was a resident of *Fulton* County, in *Atlanta* said State of Georgia, and he was on the *Indigent* Pension Roll of the State and paid a pension of *\$60.00* in *Fulton* County for 1910 per annum, on account of being a soldier in Company *C - 41st* *Se* Regiment *Confederate* *Volunteers of State Militia*.

At the death of *J. C. Verhine* he was in the use and possession of the following property *One Small House and lot 42 Oliver*
 of the cash value of *\$800.00*
 What property of any kind and of any value have you in your use, control and possession now, and the cash value. (State fully.) *One Small House & lot as above stated*
 Acres land *None*
 Horses and Mules *"*
 Hogs, Cows, etc. *"*
 Total Cash value of all property *\$800.00*

That she is now a bona fide resident citizen of said County of *Fulton* and she has so continuously resided since *21st* day of *Oct* 1914

Sworn to and subscribed before me, this the *13th* day of *March* 1911
Walter H. Anderson Ordinary,
 of *Fulton* County.

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

STATE OF GEORGIA,
Fulton County

Personally before me come *Walter H. Anderson* and *S. B. Garner* known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge *Mrs. M. J. Verhine*, who made the foregoing affidavit, is the lawful widow of *J. C. Verhine* who died in *Fulton* County in said State of *Georgia* on *10th* day of *Oct* 1910 and that she has not since remarried. That she became the wife of *J. C. Verhine* on the *24th* day of *Jan* 1864 and that she and he had resided together as man and wife continuously since *24th* day of *Jan* 1864 and that the *J. C. Verhine* was the same man who was on the pension roll of said State *Georgia* from *Fulton* County when he died.

Sworn to and subscribed before me, this the *13th* day of *March* 1911
Walter H. Anderson Ordinary,
 of *Fulton* County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.

Personally before me came *W. H. Roberts* - who after being sworn on oath says, that they are freeholders of said County, and that they know *Mrs. M. G. Burkhead* said County and knew her said husband *J. C. Burkhead* at his death on the *16th* day of *Oct.* 1910 that she and he were in the use, possession and control of the following property at his death to wit: *One Small House & Lot No 42 Oliver St Atlanta Georgia* of the value of *\$500.00* That she is now in the use, possession and control of the following property to wit: *The same as above stated, One Small House & Lot No 42 Oliver St Atlanta Ga.* of the value of *\$500.00*

Sworn to and subscribed before me, this the *13* day of *Aug* 1911 *W. H. Roberts* *L. R. Harris*
Marcellus H. Anderson Ordinary.
of *Fulton* County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.

John Burkhead Ordinary of said County, do certify, that, I know *Mrs. M. G. Burkhead* the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on a *Oct 24 1894* *W. H. Roberts* *L. R. Harris* witness as to marriage and I also know *W. H. Roberts* *L. R. Harris* who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax *Book* *Atlanta* County shows that *she* returned property to the amount of *61.25* for 1908 *61.25* for 1909 *61.25* for 1910 *61.25*

Sworn under my hand and official seal of office this *13th* day of *Aug* 1911.

(SEAL) *John Burkhead* Ordinary.
of *Fulton* County.

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

(SEAL)

County: Sulton

NOTES: 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the following words: You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God.

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

3. All affidavits must be made before the Ordinary.

4. Only widows who married prior to first January 1970, are entitled.

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

Vardine, Mary Jane (Mrs)
Fulton Co.

For Fulton County

1929

**Application for Pension
Due Deceased Pensioner**

(UNDER ACT 1919)

(To pay expenses of last illness and funeral)

Thos H Jeffries Ordinary

For Mrs Mary Jane Vardine

Date of Death Mar 14 1929

Amount \$100.00

Approved and ordered paid by

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

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

SAM R. GREEN 7808 PRINCE P. J. BLOOMFIELD, SEC.

SAM R. GREENBERG & CO.

AMBULANCE FUNERAL DIRECTORS CHAPEL

88 FORREST AVE. N. E. PHONE WALNUT 7808

ATLANTA, GA.

TO Mrs. Mary Jane Vardine Deceased

3/14/29 Casket 175.00
Embalming 25.00
Flowers 25.00
Vault 25.00
Monies 47.50 325.00

County of Fulton
State of Georgia

Personally appeared before me Sam R. Greenberg
of Sam R. Greenberg & Co. who on oath swears
the above account is just due and
unpaid.

P. J. Bloomfield
Notary Public, Fulton Co. Ga.

Sam R. Greenberg

Application for Pension Due to a Deceased-Pensioner
(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)
(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Sam R. Greenberg of said County, who, after being sworn, on oath says that he knew Mrs. M. J. Verhine 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 14 day of March 1929, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$375.00, per sworn statements fully and completely ITEMIZED hereto attached.

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

Sam R. Greenberg

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Geo. H. Jeffries, Ordinary of said County, do certify that I personally know Sam R. Greenberg, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs. M. J. Verhine while in life and that this was the same person whose name appears on the Pension Roll of Fulton County, and was paid a Pension of Two Hundred (\$200) Dollars in said County for 1928, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 28 day of March 1929,
Geo. H. Jeffries, Ordinary
(Seal of Ordinary) Fulton County

INSTRUCTIONS:

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

tached hereto.

Given under my hand and official seal, this

(Seal of Ordinary)

28 day of March 1929
Rus. D. Harris, Ordinary
Tulahoma County

INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid," etc.)

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

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

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

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

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

Atlanta Ga
March 14th 1911

Hon of W Lindsey

Dear Sir

Mrs M of
Vershine & husband died before the
1st of Jan 1911 he was on the
Pension roll. His widow ought
to have his pension for this year.
I send you her application
herewith. Please approve it at once
and let her get the money now as
she is needing it very badly.
and oblige your friend
J L Cobb

Atlanta Ga
Jan 10th 1911

Hon Ordinary
Marietta Ga

Dear Sir of C Vershine
and M of Vershine were married
in your County Jan 1864
Will you please send me a copy
of the marriage license, as she needs
it to attach to Pension papers
I will see that your cost is paid
by her as soon as she gets the money.
Her husband is dead and she is
trying to get the pension due him
Very Respt

Jan 12/11 J L Cobb
All Records were turned
over to the Court House here
by Sherman in Sep 1864
J M Garver
ord 7

here with. I fear the money now as
and let her get the money.
she is needing it very badly.
and oblige your friend
J. L. Cobb.

paying it. I am Resp^t
Long, 1/2/11 J. L. Cobb
All Receipts were turned
with the Court House here
by Sherman in Sep 1864
J. M. Lane
over

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

STATE OF GEORGIA, County of

FULTON

Ordinary in and for said County of

FULTON

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

FULTON

the applicant for a pension in this case, and

know from my own knowledge (or from positive proof presented to me by reputable witnesses) that she

resides in this County, and that she resided in the State of Georgia on December 25, 1890, and has not lived

out of the State since that date. That she is the widow of

thousand, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

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

the 14th day of

1896.

Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I hereby authorize

to receive and receipt for the pension paid hereto and request

of that he remit same to

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

day of

1896.

Executed in the presence of

Verner Martha A.
Fulton County

FOR THOSE HERETOFORE PAID.

1896.

3/15 Building 1896
To Building 1897
No. 2 3 8

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. Martha A. Verner

OF

Fulton County.
Fidelity Building Co.
widow of Verner

WARRANT ISSUED

AND HANDED TO

appet

Geo. W. Harrison, State Printer.

Georgia Pension Office
 C. L. B. B. B. Ordinary in and for said County of
 Fulton hereby certify that
 Martha A. Verner has been
 receiving a pension for the year ending February 15th, 1896.
 Given under hand and seal of
 office this 29th day of February, 1896.
 C. L. B. B. B. Ordinary

290121094 290121094 290121094 290121094 290121094
 Certificate of Ordinary of the County of Applicant's Residence.
 Form No. 1.
 STATE OF GEORGIA, County of Fulton
 I, C. L. B. B. B. Ordinary in and for said County of
 Fulton, State of Georgia, hereby certify that I am acquainted with Mrs.
 Martha A. Verner, the applicant for a pension in this case, and
 know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she
 resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived
 out of the State since that date. That she is the widow of W. H. Verner
 deceased, and, as such, has heretofore been allowed a pension for the year ending February 15th, 1896.
 In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this
 the 29th day of February, 1896.

{C. L. B. B. B.} W. L. Lealhum Ordinary.

Form No. 2.
 POWER OF ATTORNEY.

STATE OF GEORGIA, _____ County.

I, _____ hereby authorize
 of _____ to receive and receipt for the pension paid hereon and request
 that he remit same to _____ at _____
 In Witness Whereof, I have hereunto set my hand and seal, this
 day of _____ 1896. [L.S.]

Executed in the presence of

1896
 No. 23
 WIDOW'S PENSION
 for year ending February 15th, 1896.
 PAID TO
 Martha A. Verner
 OF
 Fulton County
 WARRANT ISSUED
 AND RETURNED TO
 OFFICE

FOR THOSE MEMBERS PAID.
 Deane's Medical Co.
 Fulton County

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

Vertha A. Verner

who being sworn, says on oath, that she is a bona fide resident of said county of Fulton State of Georgia, and that she has resided in said State continuously ever since June 13 1872 That she is the Widow of H. Verner

who was a Soldier in Company 40 Regiment of Georgia of the March Volunteers, that he enlisted in said regiment on or about the month of August 1862 and served in the Army up to August 1865 That he lost his life on the 14th day of August 1865 (State here

full particulars of the husband's death, when, where and from what cause.)
He died August 14th, 1865 at Newell Tennessee from over heat and release from
vesicles. Married Sept. 14th, 1865.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Fulton County for the year ending February 10th, 1890, and now apply for the pension provided by law for the year ending February 10th, 1890.

Sworn to and subscribed before me, this 5th day of February 1890.

Dr. L. H. Williams Ordinary.

Post-office

INDEXED

PENSION

Vertha A. Verner
mark

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 52, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Fulton County for the year ending February 10th, 1890, and now apply for the pension provided by law for the year ending February 10th, 1900.

Sworn to and subscribed before me, this 5th day of FEB 1896.

Notary Public Ordinary.

Post-office

her
Hester P. Turner
munk

PENSION

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

County.

Mr. James Wilson hereby authorizes W. A. Wilson of Atlanta Ga to receive and receipt for the pension paid hereon, and request that he remit same to

day of Jan 1903. James Wilson [L.S.]

Executed in the presence of

James Wilson

James Wilson
Fulton County
To Those Heretofore Paid.

1903.

No. 127

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. James Wilson
OF
Fulton County,

Widow of _____
Co. _____ Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

127 1903

AND HANDLED TO

James Wilson

Geo. W. HARRISON, STATE PRINTER ATLANTA, GA.

Putnam County.

day of June 1902

Lane Wilson [L. S.]

Executed in the presence of

Bill Ainsout

Vinson Jones (two)
Fulton, County
To Those Heretofore Paid.

3061

No. 125

**INDIGENT
WIDOW'S PENSION,**

For year ending Dec. 31, 1903

PAID TO

Mo. Sam Varney
OF
Fulton County,

Widow of _____
Co. _____ Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/23 1903

AND HANDED TO
G. A. Brown

... ..

Butler COUNTY.

I, Mr. Jane Vinson hereby authorize
Geo. A. Vinson of Atlanta Ga
to receive and receipt for the pension paid herein and request that he remit same to
me by hand at Atlanta Ga
Geo. A. Vinson

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 22nd day of June 1904.

Executed in presence of
R. Dillingham NP
Fulton Co. Ga

Vinson & Jones
Fulton County
TO THOSE HERETOFORE PAID.

1904.

119

INDIGENT WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO

Maryland Vincent
Fulton.

Fulton.

County.

Widow of Co. 2d
Co. 4 32d Cavry. 1st Regiment.

JOHN W. LINDSEY,
Commissioner of Penitentiaries

12

WARRANT ISSUED

1904
-22-

AND HASTINGS, TEXAS

...

66 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 1040 1041 1042 1043 1044 1045 1046 1047 1048 1049 1050 1051 1052 1053 1054 1055 1056 1057 1058 1059 1060 1061 1062 1063 1064 1065 1066 1067 1068 1069 1070 1071 1072 1073 1074 1075 1076 1077 1078 1079 1080 1081 1082 1083 1084 1085 1086 1087 1088 1089 1090 1091 1092 1093 1094 1095 1096 1097 1098 1099 1100 1101

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES Mrs.

Mrs. Jane Vinson

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since 50 years. That she is the Widow of Alvin P. Vinson who was a soldier in Company F of the 2nd Army Regiment of Jan Volunteers, that he enlisted in said regiment on or about the month of 10th May 1862, and served in the Army up to Apr 9th 1865. That he died on the 3rd day of May 1887.

I & P

Deposant 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 1883.

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

Sworn to and subscribed before me, this 22 day of Jan 1904.

John P. Wilkinson Ordinary.

Post Office

State of Georgia,

County of FultonI, John P. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. Jane Vinson 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 22nd day of Jan 1883.

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



John P. Wilkinson Ordinary of Fulton County.

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES Mrs.

Mrs. Jane Vinson

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since 50 years. That she is the Widow of Alvin P. Vinson who was a soldier in Company F of the 3rd Army Regiment of Jan Volunteers, that he enlisted in said regiment on or about the month of 10th May 1862, and served in the Army up to Apr 9th 1865. That he died on the 3rd day of May 1887.

I & P

Deposant 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 1883.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 22 day of Jan 1904.

John P. Wilkinson Ordinary.

Post Office

State of Georgia,

County of FultonI, John P. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. Jane Vinson 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 22nd day of Jan 1883.

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



John P. Wilkinson Ordinary of Fulton County.

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

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

Ordinary of _____ County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

I, Jane Vinson, hereby authorize
S. A. Vinson of Fulton County
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at my home

In Witness Whereof, I have hereunto set my hand and seal, this 20th
day of January, 1905.

Executed in presence of
John B. Workman
(Ordinary)

Vinson, Jane
Fulton County
To Those Hereinbefore Paid.

1905.

No. 154

INDIGENT
WIDOW'S PENSION,
For year ending Dec. 31, 1905.

PAID TO
Mrs. Jane Vinson
OF
Fulton County,
Widow of Richard J. Vinson
Co. B. 1st Cal. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/20 1905.

AND HANDS TO
S. A. Vinson

The Pensioner's name and address, and the date of payment.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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

PERSONALLY COMES MRS.

} *Jane Vinson*

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

That she is the Widow of *Abraham H. Vinson* who was a soldier in Company *D* of the *3rd* Regiment of *Georgia* Volunteers, that he enlisted in said regiment on or about the month of _____ 1860, and served in the Army up to _____ 1860. That he died on the _____ day of _____ 1860.

Dependent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18_____.

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

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

W. J. Vinson
Post Office _____

State of Georgia,
Fulton County.I, *W. J. Vinson*
Ordinary of said County, certify that I am well

acquainted with Mrs. *Jane Vinson*, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of _____ 18_____.

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

Official
Seal.

W. J. Vinson
Ordinary of **Fulton** County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____ 1906.

[L. S.]

Executed in presence of _____

Vinson, Jane
Fulton County
To Those Hereofore Paid

1906.

No. 72

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO _____
OF _____

County, _____
Widow of _____

Co. _____ 31st Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

447 1906.

AND HANDLED TO

8/17

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

Vinson, Jane
Fulton Co

To Those Hereofore Paid.

1907.

No. 74

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO _____

OF _____

County, _____

Widow of _____

Co. _____ 13th Regt.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

448 1907.

AND HANDLED TO

J. W. Lindsey

THE W. B. LINDSEY PRINTING AND PUBLISHING CO., ATLANTA, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, *Jane Vinson*, hereby authorize
John W. Lindsey of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____
day of *Jan* _____ 1907.

Executed in presence of

John W. Lindsey

Jane Vinson [L. S.]

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

Jane Vinson

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since 1854. That she is the Widow of Clayton H. Vinson who was a soldier in Company A of the 1st Regiment of Inf. Volunteers, that he enlisted in said regiment on or about the month of 1861, and served in the Army up to 1865. That he died on the 2 day of May 1867 at the age of 30 years.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852.

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

Sworn to and subscribed before me

this 1 day of JAN 1906.J. B. Williamson, Ordinary.

Post Office

State of Georgia,

Fulton County.

Ordinary of said County, certify that I am well acquainted with Mrs. Jane Vinson, 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 1854 day of 1867.

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

Official
Seal

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

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES MRS.

Jane Vinson

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has RESIDED in said State continuously ever since 1854. That she is the Widow of Clayton H. Vinson who was a soldier in Company A of the 1st Regiment of Inf. Volunteers, that he enlisted in said regiment on or about the month of 1861, and served in the Army up to 1865. That he died on the 2 day of May 1867.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852.

I have been 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 1 day of JAN 1907.J. B. Williamson, Ordinary.

Post Office

State of Georgia,
Fulton County.I, Jane H. Williamson,

Ordinary of said County, certify that I am well acquainted with Mrs. Jane Vinson, 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 1854 day of 1867.

Given under my official signature and seal, this the 1 day of JAN 1907.

Official
Seal

Jane H. Williamson
Ordinary of Fulton County.

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

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

Sworn to and subscribed before me

this 1 day of JAN 1906.

John R. Wilkinson, Ordinary.

Post Office

State of Georgia,

Fulton County.

I, John R. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. Jane Vinson, 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 1887.

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

{ Official
Seal }

John R. Wilkinson
Ordinary of Fulton County.

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

County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me

this 2 day of JAN 1907.

J. D. Wilkinson, Ordinary.

Post Office

State of Georgia,

Fulton County.

I, John R. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. Jane Vinson, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18.

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

{ Official
Seal }

John R. Wilkinson
Ordinary of Fulton County.

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

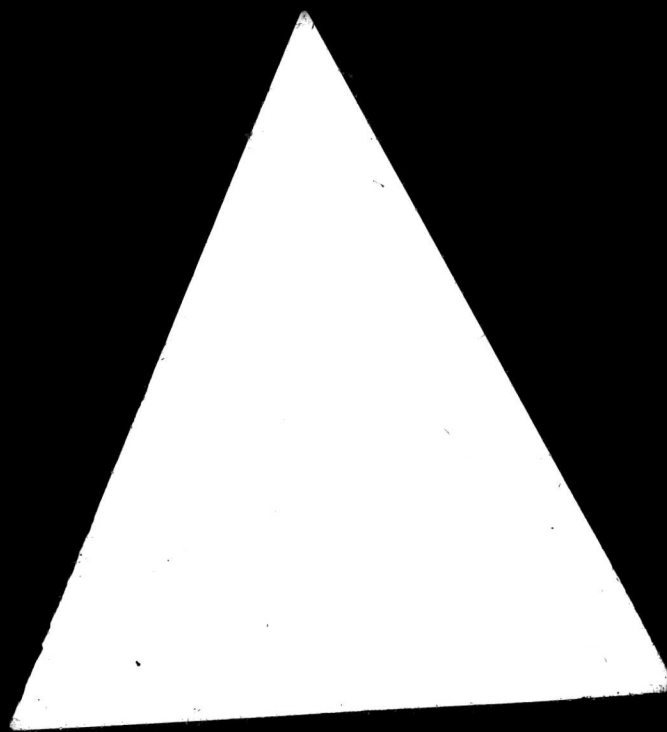
GEORGIA, Milledgeville County.

I Certify, That Mrs Jane Vinson
the holder of this Certificate was an indigent Pensioner,
and paid the sum of Sixty Dollars
from this County, in 1907, and that he, or she, now resides in Fulton
County.

Given under my hand and official signature, this Jan 15th 1907

J. D. Beane Ordly
Milledgeville County

Mellon County



7/24/65

[illegible]

Prescribed in practice

[illegible]

STATE OF GEORGIA

UOET

POWER OF ATTORNEY

STATE OF GEORGIA

Count

William A. Voss and James A. Voss hereby have appeared as a witness in support of the application of James A. Voss under Section 1984, Code, and after being duly sworn and answered to make the following statement, which is true and correct to the best of their knowledge and belief, as follows:

1. What is your name and where do you reside?
Dr. Mullion, St. Louis
2. Are you acquainted with *Jacobson C. Vance* the applicant? If so, how long have you known him?
Yes he is my brother in law
3. Where does he reside, and how long and since when has he been a resident of this city?
In Altruda La. Resided in the State all his life
4. When, where and in what company and regiment did he volunteer to go to war?
March 1862. Russell's Co. C. 1st Regt. Louisiana
5. Were you a member of the same company and regiment?
Yes
6. How long did he perform regular military duty?
About a year
7. When and where was his command surrendered?
April 1865 - Vicksburg, La
8. Were you present when it surrendered?
I was not. It happened on the 28th
9. Was applicant present?
He was not. He was on the 28th
10. If he was not present, where was he?
At home in Louisiana
- When did he leave his command?
After the 28th
- By what authority he left?
Authority of the officers
- How do you know all of this?
By being in the ranks of the 1st Regt. Louisiana
11. What property, effects or income has the applicant? (Give your means of knowledge).
Nothing. He is my brother. I know his condition
12. What property, effects or income did the applicant possess in 1861, 1862, 1863, 1864, 1865, 1866 and 1867?
Under 1861-1867 he had no property, effects or income
13. How has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
He has conveyed away his property to his brother
14. What is the applicant's occupation and physical condition?
He is a doctor. He has nothing. He is physically unable to do any thing. He is partially paralyzed and has a fever. He is blind.
15. Is the applicant unable to support himself by honest means, if so, why?
Yes. He is unable to support himself by honest means.
16. How was he supported during the years 1861, 1862, 1863, 1864, 1865, 1866 and 1867?
By his brother
17. What portion of his support for these four years was furnished him by the estate of Jacobson C. Vance?
Nothing from his estate. He was blind.
18. Give a full and true statement of the applicant's condition in 1861, 1862, 1863, 1864, 1865, 1866 and 1867.
Nothing. He is blind.
19. Give a full and true statement of the applicant's condition in 1868, 1869, 1870, 1871, 1872, 1873, 1874, 1875, 1876, 1877, 1878, 1879, 1880, 1881, 1882, 1883, 1884, 1885, 1886, 1887, 1888, 1889, 1890, 1891, 1892, 1893, 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906, 1907, 1908, 1909, 1910, 1911, 1912, 1913, 1914, 1915, 1916, 1917, 1918, 1919, 1920, 1921, 1922, 1923, 1924, 1925, 1926, 1927, 1928, 1929, 1930, 1931, 1932, 1933, 1934, 1935, 1936, 1937, 1938, 1939, 1940, 1941, 1942, 1943, 1944, 1945, 1946, 1947, 1948, 1949, 1950, 1951, 1952, 1953, 1954, 1955, 1956, 1957, 1958, 1959, 1960, 1961, 1962, 1963, 1964, 1965, 1966, 1967, 1968, 1969, 1970, 1971, 1972, 1973, 1974, 1975, 1976, 1977, 1978, 1979, 1980, 1981, 1982, 1983, 1984, 1985, 1986, 1987, 1988, 1989, 1990, 1991, 1992, 1993, 1994, 1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2

1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 26

2000

and
each patient is not a registered physician
of the State of New York, and it can be that the laws require specially
to be a physician to perform such duties. I do, and the
attending physician may that the whole physical condition is as follows:

and further commenting say that his present physical condition is as follows:

He is old and
Broken Down Mentally and Physically,
has no power left on his left side.
He is unable to earn a living nor any
kind of a living at any work he could
do.

L. Williams M.D.
John Allen & Co

Secretary.

ORDINARY'S CERTIFICATE

STATE OF GEORGIA

COPY

I, Charles O. Peterson Ordinary, in and for said County, hereby certify
 that the within James A. Bone resides in said County, and has
 been a bona fide inhabitant of said County for the term of five years.
Charles O. Peterson Mayor John Smith
 are all competent witnesses, and that their signatures are entitled to full faith and credit.

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

County assess that applicant	County assess that applicant
Marshall, for the year in the year of	Dollars of
Marshall, for the year in the year of	Dollars of property; in 1901
Marshall, for the year in the year of	Dollars of property; in 1902
Marshall, for the year in the year of	Dollars of property; in 1903
Marshall, for the year in the year of	Dollars of property; in 1904
Marshall, for the year in the year of	Dollars of property; in 1905
Marshall, for the year in the year of	Dollars of property; in 1906
Marshall, for the year in the year of	Dollars of property; in 1907
Marshall, for the year in the year of	Dollars of property

IN BY signing the foregoing claim, I, John A. Smith do hereby certify that the above is a true and correct copy of the original as the same appears in the records of the County of Jefferson State of Missouri.

Witness my hand and seal of office this 10th day of August 1908.

John A. Smith County Clerk

1. The first of these is the fact that the Commission has not yet received the information requested by the Commission in its letter of 10 October 1991. The Commission is therefore unable to proceed with its investigation.

13. Has he conveyed away any of his property in the same manner as above? *No, except if he plans to.*
14. What is the applicant's occupation and physical condition? *We own nothing. He is characteristically unable to do any thing. partly paralyzed and full of wrinkles.*
15. In the applicant unable to support himself by labor or any other means? *Yes, for reasons of his age and physical condition.*
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? *By his wife, income from Social Security, and other sources.*
17. What portion of his support for these four years was derived from his own labor or income? *Nothing from his own labor or income.*
18. Give a full and complete statement of the applicant's financial condition, including all assets and liabilities, as of the date of the filing of this application. *He is a bankrupt, and has no assets or liabilities.*
19. What is the name of the person or persons who are the owners of the property described in the foregoing questions? *He is the owner of the property described in the foregoing questions.*
20. What is the name of the person or persons who are the owners of the property described in the foregoing questions? *He is the owner of the property described in the foregoing questions.*

I further certify that before answering the foregoing questions the applicant and, when witness took the oath, being present, had that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the test before of _____ County shows that applicant is a resident of the State of _____ Dollars of property; in 1903 _____ Dollars of property; in 1904 _____ Dollars of property; in 1905 _____ Dollars of property; in 1906 _____ Dollars of property; in 1907 _____ Dollars of property

I, the undersigned, being sworn, depose that _____ 1908 _____ Dollars of property

Witness my hand and seal of office _____ County

Notary Public _____

ORDINARY'S CERTIFICATE

STATE OF GEORGIA.

COUNTY

I, Fulton Debbies Ordinary of said County, do certify that I

know Lucy Voss the applicant for this pension, and that she is the

person she represents herself to be, and that she is a bona fide continuing resident of said County and was

on the 19 day of Oct 1920

that I also know Wm M. & Bessley witnesses as to marriage, and I also know

E. O. Bessley that both of the foregoing were duly sworn by myself

before signing the respective affidavits, and that they are truthful and trustworthy and their statements

are entitled to full faith and credit.

Sworn under my hand and official seal of office this 19 day of Oct 1920

(SEAL.) Fulton Ordinary, Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence furnished by you shall be true to the best of your knowledge and belief." 2. All affidavits must be sworn to and signed by the applicant and the witnesses before the Ordinary. 3. All affidavits must be sworn to and signed by the applicant and the witnesses before the Ordinary. 4. All affidavits must be sworn to and signed by the applicant and the witnesses before the Ordinary. 5. All affidavits must be sworn to and signed by the applicant and the witnesses before the Ordinary. 6. All affidavits must be sworn to and signed by the applicant and the witnesses before the Ordinary.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1919.

County Fulton
Name Lucy Voss
Widow of W. A. Voss
Company E
Regiment Artillery Legion
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Best Printing Co. State Printers, Atlanta.

10-30-1920

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY.

I, Thos H Jeffries Ordinary of said County, do certify that I know Mrs. Lucy Voss the applicant for this pension, and that she is the

person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 29 day of Oct 1920

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

Sworn under my hand and official seal of office this 29 day of Oct 1920
(SEAL) Thos H Jeffries Ordinary.
Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary of the county of residence.
4. Only widows who married prior to first January, 1901, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Widows of Disabled Pensioners must use the Blue Application Blank and state and prove full term of husband's service because he made no proof of service and was not required to do so.

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910—As Amended by Act of 1912.

County Fulton
Name Mrs Lucy Voss
Widow of W. A. Voss
Company E
Regiment Artillery
Approved

J. W. LINDSEY

Commissioner of Pensions

Bent Printing Co. State Printer, Atlanta.

10-30-1920

Voss, Lucy (Mrs.)

For Fulton County

1924

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expense of last illness and funeral)

Thos H Jeffries Ordinary
For Lucy Voss

Date of Death March 1924

Amount \$

Approved and ordered paid

APR 29 1924

W. A. Lindsey Commissioner

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

Pd
Entered

WIDOW'S AFFIDAVIT

STATE OF GEORGIA,

Fulton COUNTY

Personally before me comes Mrs Lucy Voss of said County, who, after being duly sworn, says that she is the widow of W. A. Voss to whom, in the County of Fulton State of Ga she was married on the 6 day of Oct 18 24 and that she remained his wife, and resided with him to the date of his death in Sept 19 26 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in said State of Georgia, and he was on the Pension Roll of the State and paid a pension of \$100.00 in Fulton County for 1926 per annum, on account of being a soldier in Company E Regiment Colbbs Legion (Volunteers or State Militia).

That she is now a bona fide resident citizen of said County of Fulton and she has continuously resided since June 19 18, and in Ga 28 has life Sworn to and subscribed before me, this the 19 day of Oct 19 20 Arthur R. Mearns Ordinary Mrs Lucy Voss maid of Fulton County. (SEAL)

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

STATE OF GEORGIA,

Fulton COUNTY

Personally before me comes G. P. Bentley known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Lucy Voss who made the foregoing affidavit, is the lawful widow of W. A. Voss who died in Sept 19 26 County in said State of Ga on day of Sept 19 20 and that she has not since remarried. That she became the wife of W. A. Voss on day of Oct 18 24, and that she and he had resided together as man and wife continuously since day of Oct 18 24 and that the he was the same man who was on the pension roll of said State Ga from Fulton County when he died.

Sworn to and subscribed before me, this the 19 day of Oct 19 20 Arthur R. Mearns Ordinary of Fulton County. (SEAL)

Application for Pension Due to a Deceased Pensioner.

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

GEORGIA Fulton County.

Personally before me, the Ordinary of said County, comes Foster L. Hunter of Hunter, Blanchard, Garfield of said County, who, after being sworn, on oath says that he knows Mrs Lucy Voss of said County, and that said Pensioner was on the Pension Roll of Fulton County at the time of death, which occurred in Fulton County, in this State, on the 1st day of March 1924, and that a Pension of One Hundred (\$100.00) Dollars was due pensioner and unpaid at the time of pensioner's death, and that pensioner left no widow dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me this 16 day of Apr 1924 Arthur R. Mearns Ordinary Fulton County (Seal of Ordinary) Foster L. Hunter

CERTIFICATE OF ORDINARY

GEORGIA Fulton County.

I, Foster L. Hunter Ordinary of said County, do certify that I personally know Foster L. Hunter who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also know Mrs Lucy Voss while in life and that this was the same person whose name appears on the Pension Roll of Fulton County, and was paid a Pension of One Hundred (\$100.00) Dollars in said County for 1923, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto. Given under my hand and official seal, this 16 day of Apr 1924 Arthur R. Mearns Ordinary (Seal of Ordinary) Fulton County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st, but not been out of State longer than twelve months, and died without leaving sufficient property to pay such expenses. THE WIDOW, IF A SOLICITOR, IF SHE IS LIVING, HAS PRIOR CLAIM OVER ALL OTHERS, AND MUST MAKE APPLICATION ON YELLOW SLIP.
- 2nd. Pensioners claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and send same.
- 3rd. Burial expenses must be paid only those connected with the last illness, just before death when pensioner grew worse to death.
- 4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: Just, true, etc. in proof.) "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of who died without leaving sufficient property to pay this bill."
- 5th. The Ordinary must see to it that each bill is properly itemized in every respect, and properly sworn to, and all attached thereto in this book after the bill has been properly itemized, be sent to the Pension Department for approval and no money must be paid out until it is returned to you in your authority to make the same.
- 6th. The Ordinary may call on Ordinaries for the pensioner and then disburse the money himself and take receipts.
- 7th. The Ordinary has no liability for paying until you receive the Pension Department's check, for which you must have great care. Pensioners' accounts, and attached bills, with your final certification, in the Pension Department.
- 8th. Before the application, and attached bills, with your final certification, in the Pension Department.
- 9th. Ordinary should see that the back of this book, when ruled, is filled up.

responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. Lula Voss, who made the foregoing affidavit, is the lawful widow of W. A. Voss who died in DeKalb County in said State of Ga. on Sept day of 1920 and that she has not since remarried. That she became the wife of he on the 16 day of 19, and that she and he had resided together as man and wife continuously since day of 19 and that the he was the same man who was on the pension roll of said State Ga. from Fulton County when he died.

Sworn to and subscribed before me, this 29 day of Oct 1920
Arthur R. Mearns Ordinary
 of Fulton County.
 (SEAL)

STATE OF GEORGIA.
 COUNTY OF FULTON.

Personally before the undersigned authority now comes MRS. M. F. BENTLEY, who makes oath that she knew Mr. W. A. Voss, deceased, and knows Mrs. Lula Voss; that she knows of her own personal knowledge that the said W. A. Voss and Mrs. Lula Voss lived together continuously as husband and wife from the year 1860 to the date of the death of the said W. A. Voss, who died in DeKalb County, Ga. in September 1920. That the said Mrs. Lula Voss has not remarried since the death of her husband and is now his lawful widow.

Sworn to and subscribed before me
 this Oct. 29, 1920.

Arthur R. Mearns CCO

M. F. Bentley

was the same person whose name appears on the County, and was paid a Pension Roll of Fulton County, and was paid a Pension of One hundred (\$100.00) Dollars in said County for 1920, 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 26 day of April, 1924
Arthur R. Mearns Ordinary
 (Seal of Ordinary) Fulton County

INSTRUCTIONS:
 1st. For use in all cases where pensioner died after January 1st, but not more than twelve months, and died without leaving sufficient property to pay such expenses. THE WIDOW OF A SOLDIER, IF SHE IS LIVING, HAS PRIOR CLAIM OVER THESE EXPENSES, AND MUST MAKE APPLICATION ON YELLOW BLANK.
 2nd. Receive these claimants expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
 3rd. Submit accounts against be sworn to before the Ordinary, and to the following form: (Do not use the terms: Jack, Tom, Sam, etc., but "my")
 "The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without leaving sufficient property to pay this bill."
 4th. The Ordinary must see to it that each bill is properly itemized in every respect, and properly sworn to, and all attached thereto to this blank, when this blank has been properly completed or indicated.
 5th. The Ordinary must send this blank and the bill attached to the Pension Department for approval and no money need be paid out until it is returned to you as your authority to make the payment.
 6th. The bill must be returned to you with the Pension Department, whether the circumstances be very great death. From the Pension Department, the money will be paid to you within the Pension Department, and the money will be paid to you within the Pension Department, and the money will be paid to you within the Pension Department.
 7th. Before the pensioner, and attached bills, with your final statement to the Pension Department.
 8th. Ordinaries should see that the back of the blank, when filled, is filed up.

ATLANTA GA. April 26, 1924

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M. Mr. Howard Bentley for funeral Mrs. Lucy Voss,

1150 DeKalb Ave.

to Hunter, Blanchard, Cartrell Co. DR.

FUNERAL DIRECTORS

AMBULANCE SERVICE

PHONES IVY 0858-0859

235 IVY STREET

Casket	\$90.00
Embalming	10.00
Hearse	10.00
Robe	9.00
Funeral Notices	4.86
	\$ 123.86

GEORGIA,
 FULTON COUNTY.

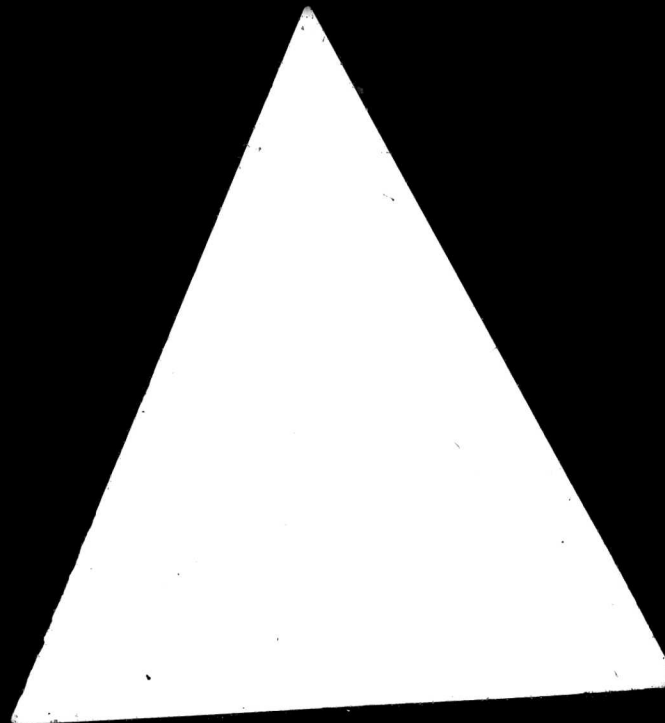
Personally appeared before the undersigned, roster Hunter, who on oath says that the above bill is due and unpaid, and was for funeral expenses of Lula Voss
 Sworn to and subscribed before me,
 This April 26, 1924.

Arthur R. Mearns
 C.O. Ordinary.

Arthur R. Mearns

who on oath says that the above is true
I make at the expense of duty Oath
sworn to and subscribed before me,
This April 25, 1934.
Arthur R. Mearns
C.O. Ordinary.

Forster L. Hamster



Confederate

Soldier's Application.

UNDER ACT 1910.

County, _____

News

Common

Abstract

Approv

J. W. LINDEN

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

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

1. What is your name and where do you reside? (Give County and Post-office).
John Marshall, 106 Williams St., Atlanta, Ga.

2. How long and since when have you been a continuous resident citizen of this State? *15 years*

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? *Yes*

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service). *Company 3rd Regt.*

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge). *March 1868*

6. When and where was your Company and Regiment surrendered or discharged from the Service? *Sumter, S.C. April 9, 1868*

7. Were you actually present with your Command when it was surrendered or discharged? *Yes*

8. If you were not actually present, state specifically and clearly where you were.

9. Where was your Command when you left it? *Fort Fisher, N.C. April 9, 1868*

10. When did you leave the Command? *April 9, 1868*

11. For what cause did you leave? *Wounded*

12. By whose authority did you leave? *Surgeon General*

13. For how long was your leave granted? In what way? *Until discharged*

14. Why did you not return to your Command after leave expired? *None*

15. In what way were you prevented? *None*

16. What effort did you make to return? *None*

17. Were you captured during the war? *No*

18. If so, when, and where? In what prison were you held and when were you released?

19. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4, Nov, 1908? (Make list by items and value). *Small cottage on lot 40 x 91, 106 Williams St., Atlanta, Ga. Value about \$500.*

20. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov, 1908. To whom and for what price? *None*

21. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). *None except as stated in answer to question 9.*

22. What annual or monthly income or earnings of yourself and wife and the source derived have you? *My wife is a dressmaker. I am disabled. I have no other source of income.*

23. Are you drawing a pension of any amount from this State or the United States? *No*

24. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? *No*

25. Swear to and subscribe before me, this the 16th day of April, 1910, that the foregoing is true and correct.

John Marshall

John Marshall

Confederate

Soldier's Application

UNDER ACT 1910.

County

John Marshall

Company

Regiment

Approved

J. W. LINDSEY

CHIEF OF BUREAU, STATE PRINTING ALBANY.

Fulton County

as a witness in support of the application of John L. Gentry 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:

- AFFIDAVIT OF TWO FREEHOLDERS.**
- STATE OF GEORGIA.
- Muller* County *1st Dist*
- Personally before me came *Wm Muller* an
- says that they are free holders residing in said County and we have known them as such for many years. I
- the applicant for pardon and we know that property that is now in the hands of the said Muller and wife and of his
- and wife and of the said value to wit: *One lot of land and some*
- ONE acre and 10 rods of land*
- Box 912*
- Wm Muller*
1. What property, if any, has been sold or given away by the applicant of the above named

STATE OF GEORGIA

[illegible]

ORDINARY'S CERTIFICATE.

_____ County

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

2. Additional affidavits may be attached if bank papers are insufficient.

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

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

affidavit of R. B. Smith, attached.
Certificate of Capt. D. L. Russell attached
as far as members of C. V. are being & more in line to my knowledge.
R. B. Smith

Halter

Personally before me, Robert A. Smith a Justice of the Peace in and for the County of San Diego, State of California, says that they are free holders residing in said County and are the legal owners of the premises described in the foregoing plat, and that they are the applicant for patents and we know the property that is in the above mentioned plat is some of his said plat and with and of its cash value to wit: One acre and 1/2 of land in the County of San Diego, State of California, more or less, as shown on a plat of land
Box 9124
San Diego, California

1. What property, if any, has been lost or given away by the applicant, J. M. Williams & Son?

NAME	Waddell, John Montgomery	YEAR	1911	COUNTY	Fulton
------	--------------------------	------	------	--------	--------

AND WHERE BORN? Resident of Georgia since January 1998 (15 years).

WHEN AND WHERE? Does not state date of first enlistment.
1943, was transferred.

4th Battalion Georgia Infantry-1st enlistment.
Transferred to--Co. C, 56th North Carolina Cavalry, Regiment.
Detach service--To serve Genl. Hixson, as a A.A. Genls. Clerk,
Served until transferred to serve with Genl. Magooed until
surrender at Greensboro.

RE: J. P. HARRIS AND COLONEL?

Most of Co. C, 56th North Carolina Regiment was captured at Fort Fisher. Applicant was on Detach Service, to serve General Hibert, as A. A. General's Clerk; afterwards transferred to serve with General Hagood until surrendered at Greensboro, with General Joe E. Johnson.

11. WHERE AND WHEN SURRENDERED? Applicant was on Detach Duty, afterwards transferred to serve with General Hagedorn, and surrendered at Greensboro, North Carolina, with General Lee E. Johnson. Does not state date.

DEAD, WHEN AND WHERE?

LURIED,

TELLSSES. Raphael Greenberg - Knew applicant while he was clerk for Genl. Louis Hobert.

No data.

AND WHERE SURROUNDED
transferred to serve with General Hagood,
and surrendered at Greensboro, North Carolina,
with General Lee E. Johnson. Does not state date.
IF NOT PRESENT AT BEGINNING, WHERE WERE YOU?

DATE, WHEN AND WHERE?

WHERE?

WITNESSES. Raphael Greenberg - Knew applicant while
he was clerk for Genl. Louis Hobert.

No data.

Frederick C.
1890.
Wardell, J. C.

No. *579*
APPLICATION FOR ALLOWANCE.
FOR TRAIL RETURN NUMBER 10, 1890.
Dis'd by Free room
 Applicant, *J. C. Wardell*
 County, *Frederick*
 Amount, *Fifty dollars*
 Date of warrant, *July 27*
 Entered on record
July 28 1890
W. H. N.
CLERK OF SUPERIOR COURT

WARRANT HANDED TO
W. H. N.

STATE OF GEORGIA,
Frederick County.
 I, *John O. Maddell* Ordinary of said county,
 do certify that I am well acquainted with *John O. Maddell* the
 applicant in the foregoing affidavit, and I am well satisfied that the statements made by him
 in his said affidavit are true, and that *he is indebted to the extent he claims*, and I know
 to be the individual he represents himself to be, and that he resides in this county.
 I further certify that
 the foregoing affidavits were made and power of attorney was signed, is a
 true and correct copy of said county, and the said affidavits and
 signatures thereto are genuine.
 Given under my official signature and seal this *6* day of *July* 1890
John O. Maddell
 Ordinary
Frederick County

STATE OF GEORGIA,

Fulton County.

I, *W. L. Leachman* Ordinary of said county,
do certify that I am well acquainted with *John O. Maddrell* the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and that he is disabled, to the extent he claims, and I know
he is the individual he represents himself to be, and that he resides in this county.

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

Given under my official signature and seal, this *6th* day of *Feb* 189*0*

W. L. Leachman

Ordinary

Fulton County.

1890.

Waddell, J. C.

No. 579

APPLICATION FOR ALLOWANCE.

FOR THE YEAR ENDING MARCH 31, 1890.

This by three men

Applicant, J. O. Waddell

County, *Fulton*

Amount, *Fifty dollars*

Date of warrant, *Feb 8*

Entered on record

Feb 8

W. L. N.

WARRANT HANDLED TO

RECEIVED DEPUTY SHERIFF

W. L. N.

STATE OF GEORGIA,

Fulton County.

I, *W. L. Leachman* Ordinary of said County,
do certify that I am well acquainted with *John O. Maddrell* the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is
the individual he represents himself to be, and that he resides in this County.

I further certify that _____ before
whom the foregoing affidavits were made and power of attorney was signed, is a
_____ of said County, and the said affidavits and
signatures thereto are genuine.

Given under my official signature and seal, this *4th* day of *Feb* 1891.

W. L. Leachman

Ordinary

Fulton County.

No. 80

Application for Allowance

FOR THE YEAR ENDING MARCH 31, 1891.

BY

Dr. W. L. N. (not record)

Applicant, *John O. Maddrell*

County, *Fulton*

Amount, *Twenty \$50*

Date of Warrant, *Feb*

Entered on record

Feb 14 1891

W. L. N.

RECEIVED DEPUTY SHERIFF

WARRANT HANDLED TO

W. L. N.

W. L. N.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Carlton's Battery, Heavy Artillery and Adjutant, 20th Regt. G. S.

PERSONALLY appears *J. O. Waddell* of *Fulton* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the *30* day of *December* 1841; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in *Company* *47* of *the* *1st* *Regiment* of *Georgia* *Volunteers* *Cobb's* *Brigade*; that whilst engaged in such military service, at the battle of *Crampton Gap* in the State of *Md*, on the *14th* day of *Sept* 1862, he was wounded as follows:

Fracture (permanent) of lower maxillary rendering him practically unfit for the usual avocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of *Eight* dollars.

Sworn to and subscribed before me, this the *17th* day of *Feb* 1890 *J. O. Waddell*

A. L. Leachman
Notary State fully authorized to administer oaths, which causes the disability, and explain particularly the point of the disability.

POWER OF ATTORNEY.

STATE OF GEORGIA,

KNOW ALL MEN BY THESE PRESENTS, That I,

county, in said State, do hereby appoint

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *180* day of *1890*

Executed in the presence of us:

Send money to me as follows, by

to

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears *John O. Waddell* 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 *30* day of *Decr* 1841; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in *Company* *47* of *the* *1st* *Regiment* of *Georgia* *Volunteers* *Cobb's* *Brigade*; that whilst engaged in such military service at the battle of *Crampton Gap* in the State of *Md*, on the *14th* day of *Sept* 1862, he was wounded as follows:

gun shot wound - ball entering the angle of lower maxillary (permanently disabling it) and passing through the throat and chest, coming out under the right ear.

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

Sworn to and subscribed before me, this, the *17th* day of *Feb* 1891 *John O. Waddell*

A. L. Leachman
Notary State fully authorized to administer oaths, which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

of *my* true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of 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 *1891* day of *1891*

Executed in the presence of us:

Send money to me as follows, by

to

County, Georgia.

STATE OF GEORGIA.

Miller County.

I, *Mr. L. C. Allen*, Ordinary of said county, do certify that I am well acquainted with *John C. Hadwell*, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this *1st* day of *March*, 1892.

Mr. L. C. Allen
Ordinary. *Miller* County.

POWER OF ATTORNEY.
STATE OF GEORGIA.

Miller County.

Know all Men by these Presents, That I, _____, of _____ County, State of Georgia, do hereby appoint

of _____ my true and lawful attorney in fact, for me and my heirs, executors and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit, hereby authorizing my said attorney to receive and receipt for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____, 1892.

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by _____ to _____ County, Georgia.

P. O.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name *John C. Hadwell*
County *Miller*
Disability *Dr. Allen's No.*
Amount \$ *50*
Entered on record *June 1* 1892.
W. H. HARRISON,
Secretary of Soldiers' Department.
AGENT.
Applicant

Office of Secretary of Soldiers' Department, Atlanta, Ga.

Wadley, John W.
Hullten Co.

1893.

Application for Allowance

No. *1273*

John C. Hadwell
Applicant.
County *Miller*
Disability *Dr. Allen's No.*
Date of Warrent *3/16*
Entered on record *7/14* 1893.
WARRANT MADE TO
Applicant

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Personally appears John O. Maddell of Fuller County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the third day of December 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company and Coy. of the 30th Regiment of Georgia Volunteers Brumby's Brigade, that whilst engaged in such military service at the battle of Crabapple Gap in the State of Maryland, on the 14th day of September 1862, he was wounded as follows: He was shot in face and neck, destroying the left lower maxillary rendering him unable to perform the ordinary avocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of

Eighty dollars for each 3 years.

Sworn to and subscribed before me this the 13th day of March 1893.

M. L. B. in chm. Ordinary.

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Know all Men by these Presents. That I,

County, in said State, do hereby appoint

my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this

day of March 1893.

Executed in the presence of us

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

STATE OF GEORGIA.
For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Personally appears John O. Maddell of Fuller County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the third day of December 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company of the 2d Regiment of Georgia Volunteers Brumby's Brigade; that whilst engaged in such military service at the battle of Crabapple Gap in the State of Maryland, on the 14th day of September 1862, he was wounded as follows: He was shot in face and neck, destroying the left lower maxillary rendering him unable to perform the ordinary avocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of

Eighty dollars, for each 3 years.

Sworn to and subscribed before me, this the 13th day of March 1893.

M. L. B. in chm. Ordinary.

Note.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA.

I, M. L. B. in chm. Ordinary of said County,

do certify that I am well acquainted with John O. Maddell 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 affidavit was made and power of attorney was signed, is a Justice of the Peace of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 13th day of March 1893.

M. L. B. in chm. Ordinary Fuller County.

STATE OF GEORGIA.
POWER OF ATTORNEY

POWER OF ATTORNEY. STATE OF GEORGIA.

COUNTY. }
Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States out of this State, as stated in the foregoing affidavit, hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of _____ 1894.

Executed in the presence of us

DIRECTIONS

Send money to me as follows, to

County, Georgia.

T. Waddell, John, Co.
For Those Already Enrolled.
No. 1405
Soldier's Pension.
1894.

Name John O. Waddell

County

Disability (Giv. 50% of 100%, 100% & 100%)

Amount, \$ 30.

3/2

W. H. HARRISON

Secretary Executive Department

WARRANT HANDLED TO

Waddell, John, Co.

(For Those Already Enrolled)

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

KNOW ALL MEN BY THESE PRESENTS, That I,

County, State of Georgia, do hereby appoint

my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of _____ 1895.

Executed in presence of us

DIRECTIONS

Send money to me as follows, by

County, Georgia.

Waddell, John, Co.
(For Those Already Enrolled)
No. 160
SOLDIER'S PENSION.
1895.

Name John Waddell

County Fulton

Disability (Giv. 100% of 100%, 100% & 100%)

Amount, \$

3/4

1895.

RICHARD JOHNSON.

Secretary Executive Department

WARRANT HANDLED TO

Waddell, John, Co.

(For Those Already Enrolled)

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County. }

PERSONALLY appears John O. Waddell 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 14th day of December 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company of 20th Regiment of Georgia Volunteers, Pennington's Brigade; that whilst engaged in such military service at the battle of Champion's Gap in the State of Maryland, on the 14th day of September 1862, he was wounded as follows: Gun shot wound in face and neck, destroying the lower maxillary rendering him unable to perform the ordinary vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1894. I have heretofore been allowed a pension of Fifty dollars, for the year 1893.

Sworn to and subscribed before me, this, the 12th day of March 1894. John O. Waddell
W. L. Calhoun Ordinary

Note.—State fully the nature of wound or character of disease which caused the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }
Fulton County. }

I, W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with John O. Waddell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 12th day of March 1894.



W. L. Calhoun

Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County. }

PERSONALLY appears John O. Waddell 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 14th day of December 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Sergeant in Company of 20th Regiment of Georgia Volunteers, Pennington's Brigade; that whilst engaged in such military service at the battle of Champion's Gap in the State of Maryland, on the 14th day of September 1862, he was wounded as follows: Gun shot wound in face and neck, destroying the left lower maxillary rendering him unable to perform the ordinary vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of Fifty dollars, for the year 1894.

Sworn to and subscribed before me, this, the 12th day of March 1895. John O. Waddell
W. L. Calhoun Ordinary

Note.—State fully the nature of wound or character of disease which caused the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }
Fulton County. }

I, W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with John O. Waddell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 12th day of March 1895.



W. L. Calhoun

Ordinary Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1896. [L. S.]

Executed in presence of us _____

Waddell, John G.
Fulton Co.
ACT OF MARCH, 1887.
(For Those Already Enrolled.)

No. *364*

SOLDIER'S PENSION.
1896.

Name *John G. Waddell*
County *Fulton*
Disability *due to combat 1894 & 1896*
Amount, \$ *21.29* 1896
Secretary Executive Department
RICHARD JOHNSON,
Robert

WARRANT HANDLED TO

No debt

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1897. [L. S.]

Executed in presence of _____

Waddell, John G.
Fulton Co.
ACT OF MARCH, 1887.
(For Those Already Enrolled.)

No. *131*

INVALID
SOLDIER'S PENSION.
1897.

Name *John G. Waddell*
County *Fulton*
Disability *Grounds - permanent*
Amount, \$ *50.00* 1897
21.9

RICHARD JOHNSON,

Secretary Executive Department

WARRANT HANDLED TO

Robert
131

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.

Personally appears John O. Waddell 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 *third* day of *December* 18*41*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Sergeant Troup* in Company *H*, of *20th* Regiment of *Georgia* Volunteers, *Penning*'s Brigade; that whilst engaged in such military service in the State of *Virginia*, on the *14th* day of *January* 1862, he was wounded, injured or diseased as follows: *shot in the back, destroying the left lower extremity rendering him unable to perform the ordinary vocations of life*

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore under said law as a resident of *Fulton* county been allowed a pension of *fifty* dollars, for the year 189*6*.

Sworn to and subscribed before me, this, *John O. Waddell*
26th day of *February*, 1896.

M. L. Walhoun
Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,
Fulton County.

I, *M. L. Walhoun* Ordinary of said County, do certify that I am well acquainted with *John O. Waddell* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *26th*
day of *February*, 1896.



M. L. Walhoun
Ordinary *Fulton* County.

*Co. 1st's Battery Troup Artillery
and Adjutant 20th Regt Georgia*

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.

Personally appears *John O. Waddell* 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 *third* day of *December* 1841; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Sergeant Troup* in Company *H*, of *20th* Regiment of *Georgia* Volunteers, *Penning*'s Brigade; that whilst engaged in such military service in the State of *Maryland*, on the *14th* day of *January* 1862, he was wounded, injured or diseased as follows:

Shot in face & neck, destroying the left lower extremity rendering him unable to perform the ordinary vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of *Fulton* county been allowed an invalid pension of *fifty* Dollars, for the year 1896.

Sworn to and subscribed before me, this, *John O. Waddell*
day of *Feb*, 1897. POST OFFICE *Atlanta Ga*

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,
Fulton County.

I, *M. L. Walhoun* Ordinary of said County, do certify that I am well acquainted with *John O. Waddell* 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 *Feb*, 1897.



M. L. Walhoun
Ordinary *Fulton* County.

Carlton's Battery, 1st Regt. Arty.
and adjutant, 20th Regt. Arty.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appeared John C. Maddell 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 3rd day of Dec. 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 20th Regiment of Georgia Volunteers, Bennings's Brigade; that whilst engaged in such military service in the State of Georgia, on the 14th day of Sept. 1862, he was wounded, injured or diseased as follows:

Was shot through in face
and neck, destroying his lower left
jaw, rendering him unfit
for 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 pension to which he is entitled for the year ending October 24th, 1898. I have heretofore under said law as a resident of Fulton county been allowed an invalid pension of 75 Dollars, for the year 1898.

Sworn to and subscribed before me, this, 17 day of July, 1898. John C. Maddell
POST-OFFICE

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, M. A. H. H. H. H. H. Ordinary of said County, do certify that I am well acquainted with John C. Maddell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 17 day of July, 1898.



Ordinary Fulton County.

Carlton's Battery, 1st Regt. Arty.
and adjutant, 20th Regt. Arty.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appeared John C. Maddell 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 3rd day of Dec. 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 20th Regiment of Georgia Volunteers, Bennings's Brigade; that whilst engaged in such military service in the State of Georgia, on the 14th day of Sept. 1862, he was wounded, injured or diseased as follows:

Wounded in face and neck.

Deponent makes application for the pension to which he is entitled for the year ending October 24th, 1898. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of 75 Dollars, for the year 1898.

Sworn to and subscribed before me, this, 15 day of July, 1898. John C. Maddell
POST-OFFICE

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, M. A. H. H. H. H. Ordinary of said County, do certify that I am well acquainted with John C. Maddell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 15 day of July, 1898.



Ordinary Fulton County.

POWER OF ATTORNEY

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 1900.

[L. S.]

Executed in presence of _____

CODE SECTION 126
(For Those Already Enrolled.)

No. 1268

**INVALID
SOLDIER'S PENSION.
1900.**

Name James C. Madril

County Fulton

Disability _____

Amount, \$ 50

Warrant issued July 9 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

44

See W. Lindsey, State Printer, Atlanta.

116 Cash

*Madril John C.
Fulton County*

(If previously enrolled, for those already enrolled.)

No. 49

**DISABLED
SOLDIER'S PENSION.
1901.**

Name John C. Madril

County Fulton

Disability (enrolled) James Madril

Amount, \$ 50.00

for 12 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

44

See W. Lindsey, State Printer, Atlanta.

116 Cash

POWER OF ATTORNEY

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of _____

to receive and receipt for the pension paid hereon and request that he remit same to

by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 1901.

[L. S.]

Executed in presence of _____

GEORGIA

GEORGIA

For Pensions Herebefore Enrolled Pensions

*Carlton's Battery Troop Artillery
and Adjutant 20th Regt
1st Div*

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Geo. O. Madrell of Fulton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the day of Dec. 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company M, of 20th Regiment of Inf. Volunteers, 1st Brigade; that whilst engaged in such military service in the State of Georgia, on the 14th day of Sept. 1862, he was wounded, injured or diseased as follows:

Wounded in face & neck

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1900. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of \$ 50.00 Dollars, for the year 1899.

Sworn to and subscribed before me, this, the John O. Madrell 7th day of March 1900. POST OFFICE Atlanta Ga

NOTE.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, W. H. Talley Ordinary of said County, do certify that I am well acquainted with Geo. O. Madrell the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 7 day of March 1900.

Ordinary Fulton County.



*Carlton's Battery Troop Artillery
and Adj. 20th Regt 1st Div.*

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Geo. O. Madrell 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 Dec. 1841; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company M, of 20th Regiment of Inf. Volunteers, 1st Brigade; that whilst engaged in such military service in the State of Georgia, on the 14th day of Sept. 1862, he was wounded, injured or diseased as follows:

*Wounded in face and neck
during the inferior military.*

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of \$ 50.00 Dollars, for the year 1900.

Sworn to and subscribed before me, this, the John O. Madrell 14th day of January 1901. Postoffice Atlanta Ga

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with John O. Madrell 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 14 day of January 1901.

Ordinary Fulton County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____

day of _____ 1902.

[L. S.]

Executed in presence of _____

Maddell, John C.
Fulton Co.

COIN ACTING AS
(FOR THOSE ALREADY ENROLLED.)

No. *140*

**DISABLED
SOLDIER'S PENSION
1902.**

Name *J. C. Maddell*
County *Fulton*
Co. *2nd Regt*
Disability *lost right arm*
Amount \$ *50.00*

140 1902

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO *AM*

No date

Maimed Soldiers.

Voucher No *579*

Amount \$ *50*

Paid to *Jno. C. Maddell*
Disabled by
loss of right
arm
July 8 1902

Included in warrant No _____
issued to Treasurer

WARRANT CLERK

Applicant

1891.

Maimed Soldiers.

Voucher No *80*

Amount \$ *50*

Paid to *Jno. C. Maddell*
for D. & by face
of check
Sept. 11 1902

Included in warrant No _____
issued to Treasurer

WARRANT CLERK

Applicant

FOR ABOLISHING REBELS AND PENSIONERS

*Carlton's Battery Troop
Artillery and Adj. 20th Regt. Ga.*
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton County.

Personally appears *J. O. Waddell* 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 *whole* day of *Dec* 18*44*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *H*, of *20*th Regiment of *Volunteers*, *Brigade*'s Brigade; that whilst engaged in such military service in the State of *GA*, on the *14* day of *Sept* 18*62*, he was wounded, injured or diseased as follows:

Wounded in face & neck

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1902. I have heretofore, under said law, as a resident of **Fulton** County, been allowed an invalid pension of *Five* Dollars, for the year 1901.

Sworn to and subscribed before me, this the *J. O. Waddell* day of *JAN 13* 1902, 1902. Post office *Tragon Ga*

W. R. Wilkinson
Notary Public for the State of Georgia, duly sworn to and qualified by the Court of Fulton County, Georgia, on the *14* day of *Jan* 1902.

STATE OF GEORGIA,
Fulton County.

I, *John R. Wilkinson* Ordinary of said County, do certify that I am well acquainted with *J. O. Waddell* 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 *J. O. Waddell* day of *JAN 13* 1902, 1902.



John R. Wilkinson Ordinary **Fulton** County.
Notary Public for the State of Georgia, duly sworn to and qualified by the Court of Fulton County, Georgia, on the *14* day of *Jan* 1902.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1902.



GIVEN UNDER MY HAND AND SEAL OF OFFICE
JAN 13 1902 1902.

John D. Waddell
day of *Feb* 1890
Ordinary

Fulton County.

Note.—Fill all blank of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1902.

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. *579*
Atlanta Ga. Feb 8 90

Mr. *John O. Waddell* of the County
of *Fulton* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act

approved Dec. 24, 1888, and the same having been examined and allowed for
Disabled by Yaws & neck wound
He is entitled to receive the sum of *Fifty + 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890

The Treasurer will pay the same and hold his receipt on this voucher, and return same
to Executive Department for warrant.

By the Governor,
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

\$ 50⁰⁰

RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

Fifty + 00/100 Dollars,
per above voucher, this *8* of *Feb* 1890.
John O. Waddell

1891.

No. *50*

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta Ga Feb 4 1891.

Mr. *John O. Waddell* of the County
of *Fulton* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts

approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Disabled by Yaws & neck wound
He is entitled to receive the sum of *Fifty + 00/100* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

The Treasurer will pay the same and hold his receipt on this voucher and return same to
Executive Department for warrant.

By the Governor,
W. H. Harrison
SECY EXECUTIVE DEPARTMENT.

\$ 50⁰⁰

RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

Fifty + 00/100 Dollars,
per above voucher, this *11* of *Feb* 1891.
John O. Waddell

CHIEF CLERK
CLERK EXECUTIVE DEPARTMENT.

\$ 50⁰⁰

RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

Fifty + 00/100
per above voucher, this

8 of July
John O. Waddell

Dollars,
1890.

CHIEF CLERK
CLERK EXECUTIVE DEPARTMENT.

\$ 50⁰⁰

RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

Fifty + 00/100
per above voucher, this

11 of July
John O. Waddell

Dollars,
1891.

Fulton County

0 No. *✓*

Widow's Pension

UNDER ACT 1910.

✓
County *✓ Fulton*

Name *Virginia T. Maxwell*

Widow of *John M. Maxwell*

to recd.

J. W. LINDSEY
Commissioner of Pensions

Chas. E. Ford, State Printer

11/18-1922

Application for Pension by a Widow Under Act of 1910.--Questions for Applicant.

STATE OF GEORGIA,

Fulton County.

Personally before me, Mrs. Virginia J. Waddell of said State and County, Feb. 1 day of March 1912, she says that she desires to apply for a pension allowed under the Act of 1910, and submit testimony to make out the same, true answer makes to the following questions to wit:

1. What is your name, and where do you reside? Virginia J. Waddell, Atlanta, Ga.
2. How long and since when have you been a continuing resident in the State of Georgia? Since year 1867 January
3. When, where and to whom were you married? 1867, Marlboro County, S.C., John W. Waddell
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service) Regiment 1st S.C., 4th Dist. S.C. Infantry
was transferred under his former State to Regt. 1st S.C. Infantry, 1st Div. S.C. Infantry, 1st S.C. Infantry
5. When and where did the Command of your husband surrender or discharge from the army? 1869
Regt. 1st S.C. Infantry, 1st Div. S.C. Infantry, 1st S.C. Infantry
6. Was your husband personally present at the time of the surrender or discharge of this Command? Yes
7. If he was not present state clearly where he was? He was present at the surrender.
8. Where was his Command when he left?
- a. For what cause did he leave his command?
- b. By whose authority did he leave his Command?
- c. For how long was he granted leave of absence?
- d. What was his physical condition when he left his Command?
- e. What effort did he make to return to his command?
- f. In what way was he prevented from going back to Command?
- g. Was he captured by the enemy at any time? No
- h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- i. When and where did your husband die? February 3, 1912, Atlanta, Ga.
- k. Were you residing together when he died? Yes
- l. 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.) None
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None
11. What property of any description of any value have you now? None
- Give list and cash value?
12. What are your annual earnings or income and their value? Nothing
13. Have you heretofore been paid a pension by the State? No
- If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the 28 day of March 1912, Mrs. V. J. Waddell
John R. Waddell Secretary,
of Fulton County.

Widow's Pension

UNDER ACT 1910.

County Fulton

Name Virginia J. Waddell

Widow John W. Waddell

to her

J. W. LINDSEY,

Commissioner of Pensions.

State of Georgia

Questions for the Witnesses as to Service of Husband and Marriage.

STATE OF GEORGIA,

County.

Personally before me comes Ralph Greenberg who after being duly sworn true answers to make, to the following questions, answers as follows:

1. What is your name and where do you reside? Ralph Greenberg 18 Capital Ave
2. How long and since when have you known 40 Years applicant?
3. How long and since when has she continuously resided in this State? (Give date.) About 18 Years
4. When and to whom was she married? John R. Waddell How do you know her?
5. How long and since when did you know John R. Waddell her husband? Since 1858
6. When and where did John R. Waddell the husband of Applicant die? Atlanta Ga Feb 23 1908
7. Where the Applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? Never
9. Were they divorced? No
10. When, where and in what Company and Regiment did John R. Waddell enlist? August 1861 - 4th Battalion 2nd Infantry
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? 4 Years
12. When, and where did his Command surrender, and was discharged? Near Greensboro N.C.
13. Were you personally present when it was surrendered? Yes If not where were you and how came you there?

14. Was the husband of applicant personally present at surrender? Yes If not where was he? when, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all this?

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command?
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the 28th day of March 1912 Ralph Greenberg
John R. Waddell Ordinary,
of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes J. M. Armistead who on oath says that they are freeholders of said County and that they know Mrs. T. J. Waddell of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows:

Personal property	<u>None</u>	\$
Notes and accounts due	<u>None</u>	\$
Total	<u>None</u>	\$

Schedule (B).

We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:

Personal property	\$
Money, Notes and accounts	\$

Schedule (C).

We also know what property she has now in her possession, use and control to wit:

Acres of land...worth	\$
Horses and Mules	\$
Cows and Hogs	\$
Other property	\$
Income and earnings	\$
Total Value of all property and effects	\$

Sworn, and subscribed before me this the 28th day of March 1912 J. M. Armistead
John R. Waddell Ordinary,
of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I John R. Waddell Ordinary of said County do certify that I know Mrs. T. J. Waddell the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov., 1908.

That I also know Ralph Greenberg the witness who swears to the service of husband, and John R. Waddell who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Mrs. T. J. Waddell Returned for Tax is for 1908 \$ None for 1910 \$ None
Sworn under my hand and official seal of office this 28th day of March 1912

101 John R. Waddell Ordinary,
SEAL Fulton County

(SEAL)

- NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who married prior to first January 1870, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

14. Was the husband of applicant personally present at surrender? yes If not
where was he? when, where and for what
cause did he leave Command? (Give date.) By whose
authority did he leave his Command? and how
long was he granted leave? How do you know all this?

15. For what cause, if you know of your own knowledge was he prevented from returning to his
Command?

16. What effort did he make to return to his Command and how do you know this? Of your
own knowledge or how?

Sworn to and subscribed before me this the

25th day of March 1912

Ralph Greenberg
John R. Wexler Ordinary,
of Faulcon County.

1. Mr. J. S. Wasall the applicant for pension. She
that, I know the applicant for pension. She
is the person she represents herself to be and she is a bona fide continuing resident citizen of said
County and was in the 4th Nov. 1908.

That I also know Ralph Greenberg the witness who swears
to the service of husband, and who are
freeholders. That all of them are now residents of said County and were duly sworn by me before signing
the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to
full faith and credit.

That the Tax Returns Mr. J. S. Wasall Returned for Tax is for
1908 \$ None for 1910 \$ None

Sworn under my hand and official seal of office this 1st day of April

1912
SEAL. John R. Wexler Ordinary,
Faulcon County

(SEAL)

NOTES 1: Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only witnesses who married prior to first January 1870, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by gen-
eral reputation.

Wade, F. M.
Fulton Co
O.K. No. 1902

**INDIGENT PENSION,
1900.**

Name F. M. Wade
County Fulton
O. K. 38-74
Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Prison, Atlanta
45-1907-410-1902

Pension office, Savannah.
This is not an aged man, and
no infirmity is shown to be pec-
uniary or incurable so as to pre-
vent him in some way at some
kind of labor or earning cash
a support for himself, not for
all of an afflicted family, State
can not pay for that.
J. W. Lindsey
Com. of Pensions.

STATE OF GEORGIA.

County. }

Power of Attorney.

to receive and accept for the pension allowed, and request that he remit same to _____

Witness my hand and seal, this _____ day of _____ 1900.
[L. S.]

Executed in presence of _____

hereby authorize

Power of Attorney.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____ to receive and accept for the pension allowed, and request that he remit same to _____ at _____ day of _____ 1900.

Witness my hand and seal, this _____ day of _____ 1900. [L. 8.]

Executed in presence of _____

Pension Office - 2-23-1901.
This is not an aged man, and no infirmity is shown to be permanent or incurable so as to prevent him in some way at some kind of labor or to limit earn a support for himself, not for himself and an aged family, state can not pay for that.
J. W. Lindsey,
Com. of Pensions,
L.

Wade, F. M.
Fulton Co.

C.K. No. 1902

INDIGENT PENSION,

1900.

F. M. Wade

Fulton

Co. K. 20th

Approved

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT BLANKED TO

F. M. Wade

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

County.

I, F. M. Wade, of said State and County, having been presented as a witness in support of the application of F. M. Wade for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? F. M. Wade

2. Are you acquainted with F. M. Wade, the applicant; if so, how long have you known him? Since 1863

3. Where does he reside, and how long and since when has he been a resident of this State? In 1863

4. When, where and in what company and regiment did he enlist, and how do you know? In Fulton Co. Co. 20th Regt. I first knew him

5. Were you a member of the same company and regiment? Yes

6. How long did he perform regular military duty? Until the 1st of July 1864

7. When and where was his command surrendered? At Appomattox C.H.

8. Were you present when it surrendered? I was indeed

9. Was applicant present? No

10. If he was not present, where was he? At Appomattox C.H. (with Lee's army)

When did he leave his command? April 1864 For what cause? Sickness

By what authority he left? Regt. Surgeon ordered it How do you know all of this? Being officer of Co. K. (to which applicant belonged) I was Regt. Surgeon of such orders, changes and services

11. What property, effects or income has the applicant? (Give your means of knowledge.) None

12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? None

13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? No - had none to convey

14. What is the applicant's occupation and physical condition? Physically infirm has chronic rheumatism and is crippled. Occupation is peddling candy groceries occasionally to the city

15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes, practically so, because of age, weakness, and physical infirmities

16. How was he supported during the years 1898 and 1899? He lives with married son and does "handy" about the place

17. What portion of his support for these two years was derived from his own labor or income? Nothing I suppose. He may have picked peas from yard

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He is crippled. He has rheumatism. He is physically weak, is nervous. - This is all I know for this case

19. What interest have you in the recovery of a pension by this applicant? None of course

Sworn to and subscribed before me, this 31st day of August 1900

the 31st day of August 1900

John W. Lindsey Ordinary.

F. M. Wade Witness.

Wade, J. J. *Indigent*
No. *19*
P.H.
INDIGENT
19
J.M.
J.C.
J.H.
J.W.
J.V.
J.A.
J.B.
J.C.
J.D.
J.E.
J.F.
J.G.
J.H.
J.I.
J.J.
J.K.
J.L.
J.M.
J.N.
J.O.
J.P.
J.Q.
J.R.
J.S.
J.T.
J.U.
J.V.
J.W.
J.X.
J.Y.
J.Z.

AFFIDAVIT OF PHYSICIANS.
STATE OF GEORGIA.

Fulton COUNTY. }
Personally came before me *O. H. Sinden M.D.* and *C. R. Hiles M.D.*, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully *J. M. Wade*, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Chronic rheumatism, with nervous weakness and exhaustion, causing occasional attacks of vertigo especially when undergoing physical fatigue or exposure to sun or heat. He suffers also with chronic headache and is unable to perform his usual duties of labor.
They further swear 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 *20th* day of *September*, 190*9*,
John R. Wilkinson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.
Fulton COUNTY. }

I, *John R. Wilkinson* Ordinary in and for said County, hereby certify that the applicant *J. M. Wade* resides in said County, and has been a bona fide resident of this State since the day of *1894* and that the witnesses, viz: *J. L. Jennings*

are of trustworthy character, and that their statements are entitled to full faith and credit. I further certify that before answering the foregoing questions the applicant and each witness took the oath herein prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed. I further certify that the tax digests of _____ County show that applicant returned for taxation in his name in 1898 _____ Dollars of property, and in 1899 _____ Dollars of property.

In my opinion the foregoing claim is _____ made in good faith.
Witness my hand and seal of office, this *20th* day of *September*, 190*9*.
John R. Wilkinson Ordinary,
of *Fulton* County.

NOTE.

- Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answer make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
- In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

Questions for Applicant.

STATE OF GEORGIA.

Fulton County. }

J. M. Wade of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

- What is your name and where do you reside? (give State, County and post office). *J. M. Wade, Cross Keys, Fulton Co. Ga.*
- How long and since when have you been a resident of this State? *Since 1874*
- When and where were you born? *In Dublin Co. Va. Oct 16, 44*
- When and where and in what company and regiment did you enlist or serve? *In Atlanta, Ga. Forland Reg. Co. No. 35th in Reg't*
- How long did you remain in such company and regiment? *Until close of war 1865*

6. When and where was your company and regiment surrendered and discharged? *At Appomattox Co. April 9, 65*

7. Were you present with your company and regiment when it was surrendered? *No*

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? *Was in Augusta Ga. Left command Oct 10, 64. Caused by discharge by authority of John M. Williams*

9. How much can you earn (gross) per annum by your own exertions of labor? *Nothing*

10. What has been your occupation since 1865? *Farmer*

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"? *Second*

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? *In war and continuously since. General chronic rheumatism, and physical weakness.*

13. What property, real or personal, or income, do you possess, and its gross value? *None*

14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? *None*

15. In what County did you reside during those years, and what property did you then return for taxation? *Fulton County*

16. How were you supported during the years 1898 and 1899? *Occasionally paid for by family*

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *About twenty-five dollars*

18. What was your employment during 1898 and 1899? What pay did you receive in each year? *Dischargee, paid for by family*

19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? *I am aged, invalid wife and one child, afflicted, in firm daughter. The latter living with me.*

20. Are you receiving any pension? If so, what amount and for what disability? *No*

21. Have you ever made an application for pension before? *Yes*

22. How many applications have you ever made and under what class? *One same class*

Sworn to and subscribed before me this *20th* day of *September*, 190*9*,
John R. Wilkinson Ordinary,
of *Fulton* County.

Every Question MUST be Answered.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I,

hereby authorize

of

to receive and receipt for the pension allowed and request that he remit same to

at

by

Witness my hand and seal, this

day of

1883.

[L. S.]

Executed in presence of

Wade, F.M.
Fulton County

CODE SECTION 154
(FOR THOSE ALREADY ENROLLED)

No. 138

INDIGENT

SOLDIER'S PENSION
1903.

Name F.M. Wade

County Fulton

Co. K Regiment 38th

WARRANT ISSUED

130 1883

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

no data

no data

Wade, F.M.
Fulton County

CODE SECTION 154
(FOR THOSE ALREADY ENROLLED)

No. 161

INDIGENT

SOLDIER'S PENSION
1904.

Name F.M. Wade

County Fulton

Co. K 38th Regiment

WARRANT ISSUED

130 1904

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

no data

no data

day of September 1904.
John R. Wilkinson, Ordinary,
of Fulton County.

Applicant.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I,

hereby authorize

of

to receive and receipt for the pension allowed, and request that he remit same to

at

by

Witness my hand and seal, this

day of

1904.

[L. S.]

Executed in the presence of

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton County.

Personally appears J M Wade of said
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of Oct 1844; that he is born 1844 years old and
by occupation a Farmer that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of 2 years in Company A, of 38th Regiment
of 1st Inf; that his physical condition is as
follows: Good

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,
1904, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1903. I have ~~heretofore~~ as a resident of said
county been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 21st day of Jan, 1903.

STATE OF GEORGIA,
Fulton County.

I, J M Wade Ordinary of said County,
do certify that I am well acquainted with J M Wade
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 1903.



Note.—The blank space must be filled.
Note.—Affidavits should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears J M Wade

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 Oct 1844; that he is born 1844 years old and
by occupation a Farmer that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of 2 yrs in Company A, of 38th Regiment
of 1st Inf; that his physical condition is as
follows: Infirm

that his property consists of the following items:

of the value of _____ Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1904. I have heretofore as a resident of _____
County been allowed a pension for the year 1 _____

Sworn to and subscribed before me, this the _____ day of _____, 1904.

STATE OF GEORGIA,
Fulton County.

I, J M Wade Ordinary of said County,
do certify that I am well acquainted with J M Wade
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.

Given under my official signature and seal, this _____ day of _____, 1904.



Note.—The blank space must be filled.
Note.—Affidavits should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of _____
to receive and receipt for the pension allowed, and request that he remit same to
at _____

by _____
Witness my hand and seal, this _____ day of _____, 1905.

Executed in the presence of _____

Wade S. M.
W. S. M.
CO. SECTION 104
(FOR THOSE ALREADY ENROLLED.)

No. 144

INDIGENT
SOLDIER'S PENSION
1905.

Name *W. S. M.*
County *Fulton*
Co. *D* Regiment *24th Reg.*

WARRANT ISSUED
1/15 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

C. H. H.
no date

Wade S. M.
Fulton County

INDIGENT
SOLDIER'S PENSION
1906.

Name *W. S. M.*
County *D*
Co. *26* Regiment *24th Reg.*

WARRANT ISSUED
1/17 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
C. H. H.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of _____
to receive and receipt for the pension allowed, and request that he remit same to
at _____

by _____
Witness my hand and seal, this _____ day of _____, 1906.

Executed in the presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears F. M. Wade of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____, 18____; that he is 68 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 yrs in Company No. of 88th Regiment of La.; that his physical condition is as follows: infirmary and poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning, _____ 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, 1905. F. M. Wade Ordinary.

STATE OF GEORGIA.

County.

I, _____ 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 _____ day of _____, 1905.

Ordinary

County.



NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

County.

Personally appears F. M. Wade of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____, 18____; that he is 68 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 yrs in Company No. of 88th Regiment of La.; that his physical condition is as follows: infirmary and poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning _____ 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 JAN, 1906. F. M. Wade Ordinary.

State of Georgia,

County.

I, _____ 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 _____ day of _____, 1906.

Ordinary

County.



NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1906.

here
Note.—The blank spaces must be filled.
Note.—A fiduciary should not be attested before January 1st, 1906.

Note.—The blank spaces must be filled.
Note.—A fiduciary should not be attested before January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize
_____ of _____
to receive and receipt for the pension allowed, and request that he remit same to
_____ at _____
by _____

WITNESS my hand and seal, this _____ day of _____ 1907.

[L. S.]

Executed in presence of _____

*Wade & Mc
Fulton Co.*

Commissioner of the
State of Georgia

No. 202

INDIGENT
SOLDIER'S PENSION
1907.

Name *J. M. Wade*
County *Fulton*
C. *Mc* Regiment *3rd Reg*

WARRANT ISSUED

11/24/1907

JOHN W. LINDSEY,
Commissioner of Georgia

WARRANT HANDED TO

11/24/1907

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County,

Personally appears F. M. Wade of

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1841; that he is 65 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 2 yrs in Company 4th of 11th Regiment of Inf; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 16th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the _____ day of _____ 1907.

John R. Williams Ordinary.

State of Georgia,

Fulton County,

I, John R. Williams Ordinary of said County,

do certify that I am well acquainted with F. M. Wade the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal this _____ day of JAN 2 1907.

Ordinary Fulton County.



Notes.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1907.

Georgia Fuller County
 Personally came before me J. T. Langan
 who on oath says he resided in
 said County and is ~~eighty~~ ^{seventy} seven years
 old. has known J. M. Mack 50 years
 was in same Co with him in the
 1862 Co H 38th Va Regt. was with
 him until he left on sick leave to go
 to Hospital in fall of 1864. That said
 Mack was never able to return to
 his command before the surrender.
 Witness saw him soon after the war
 ended. he was still sick. remained
 in almost helpless condition for
 over two years after the war.

He was badly ruptured in the army
 lifting timbers, building breastworks
 and hard fighting. He also contracted
 Rheumatism which has remained
 with him ever since. He is nearly
 60 years old. feeble, weak and unable
 to earn a support at any kind of labor.
 has no property or income. I know the
 above facts of my own knowledge.

I have read the affidavit of J. T. Langan
 on this Application and believe that the same
 is true & I know it of my own personal
 knowledge to be true.

Subscribed to & sworn before me } J. Thomas Langan
 April 12th 1902 John R. Williams }
 Ordinary

I certify that above named witness
 lives in said County and is really
 of said County. This 13th of April 1902
 John R. Williams
 Ordinary

Rheumatism which has remained
with him ever since. He is nearly
60 years old - feeble, weak and unable
to earn a support at any kind of labor
has no property or income - I know the
above facts of my own knowledge.

I have read the affidavit of J. B. Morgan
on this application and believe that the same
is true - I know it of my own personal
knowledge to be true.

Subscribed to & subscribed before me } Thomas Morgan
April 12th 1902 John R. Wilkinson }
Ordinary

I certify that above named witness
resides in said County and is legally
qualified. This 12th day of April 1902
John R. Wilkinson
Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I, _____

of _____

herely authorize

to receive and receipt for the pension allowed, and request that he remit same to

at _____

by _____ day of _____ 1904.

Witness my hand and seal, this _____

[L.S.]

Executed in the presence of _____

Wade Perry
Fulton County
1894
FOR THIS ALREADY ENROLLED.
Wade Perry

No. *165*

INDIGENT
SOLDIER'S PENSION
1904.

Name *Perry Wade*
County *Fulton* *Frank*
Co. *6* Regiment *64*

WARRANT ISSUED

1/20 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Use W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears Perry Wade of Cobb 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 _____ 1861; that he is 62 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company 6, of 64th Regiment of Infantry Ga. Vols; that his physical condition is as follows: at 2

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 Cobb County been allowed a pension for the year 1904

Sworn to and subscribed before me, this the _____ day of JAN 20 1904.

STATE OF GEORGIA,
Fulton County.

I, John R. Wilkinson, Ordinary of said County,

do certify that I am well acquainted with Perry Wade the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this JAN 20 1904 day of _____ 1904.



John R. Wilkinson Ordinary
Fulton County.

Note.—The blank spaces must be filled.
Note.—A Affidavit should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize
 _____ of _____
 to receive and receipt for the pension allowed, and request that he remit same to
 _____ at _____
 by _____

WITNESS my hand and seal, this _____ day of _____, 1906.
 [L. S.]

Executed in the presence of _____

Wade Perry
Fulton County
 COM. SECTION 124.
 (FOR THOSE ALREADY ENROLLED.)

C-64 No. 831

INDIGENT
 SOLDIER'S PENSION
 1905.

Name *Wade Perry*
 County *Fulton*
 Co. *1st* Regiment *4th* Div.

WARRANT ISSUED
 7/6 1905.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO
W

THIS WARRANT REMAINS VALID UNTIL THE 1ST OF JANUARY, 1907.

no date

Wade Perry
Fulton County

COM. SECTION 124.
 (FOR THOSE ALREADY ENROLLED.)

C-64 No. 332

INDIGENT
 SOLDIER'S PENSION
 1906.

Name *Wade Perry*
 County *Fulton*
 Co. *1st* Regiment *4th* Div.

WARRANT ISSUED
 7/7 1906.

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO
W

THIS WARRANT REMAINS VALID UNTIL THE 1ST OF JANUARY, 1907.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize
 _____ of _____
 to receive and receipt for the pension allowed, and request that he remit same to
 _____ at _____
 by _____

WITNESS my hand and seal, this _____ day of _____, 1906.
 [L. S.]

Executed in the presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears Perry Stade 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 1842 day of 1842; that he is 62 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company 6 of 44 th Regiment of Geo. Inf; that his physical condition is as follows: infirmity and poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning, by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Fulton County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this 1st day of Jan, 1905.

Ordinary.

STATE OF GEORGIA,

Fulton County.

I, Perry Stade Ordinary of said County, do certify that I am well acquainted with Perry Stade 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 1st day of Jan, 1905.

Ordinary.

County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears Perry Stade 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 1842 day of 1842; that he is 64 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company 6 of 44 th Regiment of Geo. Inf; that his physical condition is as follows: infirmity and poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion 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 1905.

Sworn to and subscribed before me, this 1st day of Jan, 1905.

Ordinary.

State of Georgia,

Fulton County.

I, Perry Stade Ordinary of said County, do certify that I am well acquainted with Perry Stade 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 1st day of Jan, 1905.

Ordinary.

County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, William Perry hereby authorize
of 2
 to receive and receipt for the pension allowed, and request that he remit same to
 at
 by

WITNESS my hand and seal, this 14 day of April, 1907

[L. S.]

Executed in presence of

Wm. Perry
William Perry

C-64

Office Recorder 1884.
 (FOR THOSE ALREADY ENROLLED)

No. 423

INDIGENT
 SOLDIER'S PENSION
 1907.

Name

Wm. Perry

County

Wm. Perry

Regiment

WARRANT ISSUED

1907

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Wm. Perry

Done at Savannah, S.C., this 14th day of April, 1907.

no data

**FOR APPLICANTS HERETOFORE ALLOWED PENSIONS-
State of Georgia,**

Fulton County.

Personally appears Perry Wade 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 _____ 1842; that he is 64 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 years in Company D, of 64th Regiment of Col. Gols; that his physical condition is as follows: infirmity & poverty

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 labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the _____ day of _____ 1907.

John B. Mc Ordinary.

State of Georgia,

Fulton County.

I, John B. Mc Ordinary of said County,

do certify that I am well acquainted with Perry Wade 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 1907.

John B. Mc Ordinary _____ County.



NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1907.

1894, and the Acts amendatory thereto, is entitled for the year 1907. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1906.
Sworn to and subscribed before me, this the _____ day of _____ 1907.
John R. Mc... Ordinary

State of Georgia,

Wilton County.

I, John R. Mc... Ordinary of said County,

do certify that I am well acquainted with Perry Wade 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 1907.

John R. Mc... Ordinary Wilton County



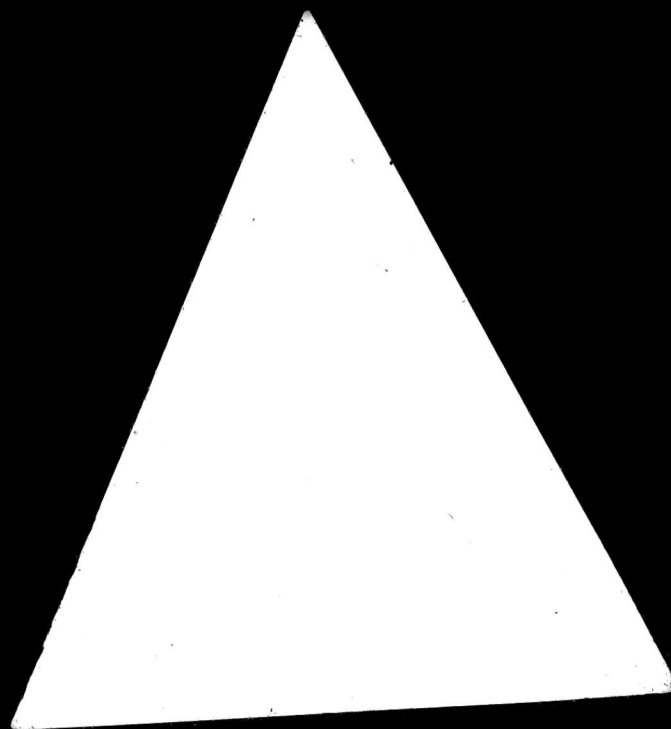
NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1907.

No. 146 Cobb County.
Poste & Davise Co., Printers, Atlanta.

I, the undersigned do certify that Perry Wade now of the County Fulton is the same person who as Diligent pensioner was on the pension rolls of this county, and drew a pension of \$6.00 dollars for 1903, and the bearer is same, Person

Given under my hand and official seal of office John R. Mc... [L. S.]

[SEAL]



Widow's Application
No. *1417*

Widow's Application

To Be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910.

County *Fulton*

Name *Mrs. Rhoda E. Mable*

Widow of *F. M. Mable*

Company *K-382 D.F.*

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAR. F. BYRD, State Printer, Atlanta.

10/29-1918

o Grove

STATE OF GEORGIA,
Hilton County

At the death of Jim Wade he was in the use and possession of the following property: None

3/4	Acres land	2 Room Shack	8
	Horses and Mules		8
	Hogs, Cows, etc		8

Total Cash value of all property \$25

That she is now a bona fide resident citizen of said County of Fuller and she has continuously resided since Both day of 10

Sworn to and subscribed before me, this 10th day of Aug. 1911, at the County of ... State of ...
Handwritten signature Clerk of Court.
 of ... County.

STATE OF GEORGIA,
Paul Turner County.

Personally before me come W. B. Maddox known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say that of their own personal knowledge Mrs. Abigail C. Maddox who made the foregoing affidavit, is the lawful widow of J. M. Maddox who died in Butler County in said State of Kan on 22 day of March and that she has no living remaining. That she became the wife of J. M. Maddox on the 12 day of Dec 1869 and that she and he had resided together as man and wife continuously since 12 day of Dec 1869 and that the he was the same man who was on the pension roll of said State from Butler County Kansas when he died.

Sworn to and subscribed before me, this the 25 day of Sept 8, 1918, *W. J. Maddox*
Arthur R. McCarty Ordinary,
 of *Fullen* County.

To Be Put on Roll in Her Own Right When
Husband Was on the Indigent Roll or
Put on Under Act of July 11, 1910.

County _____
 Section _____
 Township _____
 Range _____
 North _____
 West _____
 Width of _____
 Containing _____
 Approved _____
 X-38 1/2 AFS

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, ALBUQUERQUE

10/29-1918

William R. M... Ordinary,
of Fulcon County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulcon County.

Personally before me come G. J. Goffland and W. G. M... Williams who after being sworn on oath says, that they are freeholders of said County, and that they know Rhoda Wade of said County and knew her said husband J. M. Wade at his death on the 27 day of Feb 1918 that she and he were in the use, possession and control of the following property at his death to wit: 3 1/2 acres of land & a barn of the value of \$ 500. That she is now in the use, possession and control of the following property to wit: same as above of the value of \$ 500.

Sworn to and subscribed before me, this 26 day of Aug 1918 G. J. Goffland W. G. M... Williams Ordinary of Fulcon County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulcon County.

William R. M... Williams Ordinary of said County, do certify, that, I know Mrs. Rhoda Wade the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the Aug 26 1918. That I also know G. J. Goffland and W. G. M... Williams who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Fulcon County shows that the returned property to the amount of \$ 140 for 1908 \$ 140 for 1909 \$ 140 for 1910 \$ 190 for 1911 \$ 190 for 1912 \$ 190 for 1913 \$ 190 for 1914 \$ 190 for 1915 \$ 190 for 1916

Sworn under my hand and official seal of office this 19 day of Oct 1918 William R. M... Williams Ordinary of Fulcon County.

1917-1918
1918-1919

- NOTES 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the following words "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who married prior to first January 1870, are entitled.
5. Attach certified copies of marriage licenses if obtainable. If not, prove marriage, by some present, or by general reputation.

that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Fulton County shows that the returned property to the amount of \$ 140 for 1908 \$ 140 for 1909 \$ 140 for 1910 \$ 170 for 1911 \$ 190 for 1912 \$ NA for 1913 \$ NA for 1914 \$ 190 for 1915 \$ 190 for 1916

Sworn under my hand and official seal of office this 19 day of Oct 1918
Arthur R. M. [Signature] Ordinary.
Fulton County.

- NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will give answers true to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who married prior to first January 1870, are entitled.
5. Attach certified copies of marriage licenses if obtainable. If not, prove marriage, by some present, or by general reputation.

*Wages, full &
Fullon County*

CODR SECTION 184

(For Those Already Enrolled)
*From November 1900
To December 1901*

**INDIGENT
SOLDIER'S PENSION.
1901.**

Name *J. D. Wages*
County *Fullon formly
Gwinnett*

WARRANT ISSUED

July 16 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

no date

Geo. W. Hurdock, State Printer, Atlanta

STATE OF GEORGIA.

POWER OF ATTORNEY.

County: }

I,

of

hereby authorize

to receive and receipt for the pension allowed and request that he remit same to

at

by

Witness my hand and seal, this

day of

1901.

[L. S.]

Executed in presence of

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bulleton County.

Personally appears J D Wagner of Bulleton ^{family of} Quinnitt County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 16 day of Dec 1838, that he is 62 years old and by occupation a carver that he enlisted in the military service of the Confederate States (or of the State of Geo) during the war between the States and served for the term of 4 years in Company F, of 38 th Regiment of Geo; that his physical condition is as follows:

General debility

that his property consists of the following items _____

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Quinnitt county been allowed a pension for the year 1900.

Sworn to and subscribed before me, this the 7th day of Jan 1901.

John R Wilkinson Ordinary.

STATE OF GEORGIA,

Bulleton County.

I, John R Wilkinson Ordinary of said County, do certify that I am well acquainted with J D Wagner the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 7th

day of Jan 1901.
John R Wilkinson
Ordinary Bulleton County.



Note — The blank spaces must be filled.
Note — Affidavit should not be attested before January 1st, 1901.

county been moved a person
Sworn to and subscribed before me, this the 7th day of June 1901. J. D. Wages
John R. Wilkinson Ordinary
STATE OF GEORGIA,
Fulton County.
I, John R. Wilkinson Ordinary of said County,
do certify that I am well acquainted with J. D. Wages the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.

Given under my official signature and seal, this 7th
day of June 1901.



John R. Wilkinson
Ordinary Fulton County

Note - The blank spaces must be filled
Note - Affidavit should not be attested before January 1st, 1901.

Georgia, Spwinnett County.

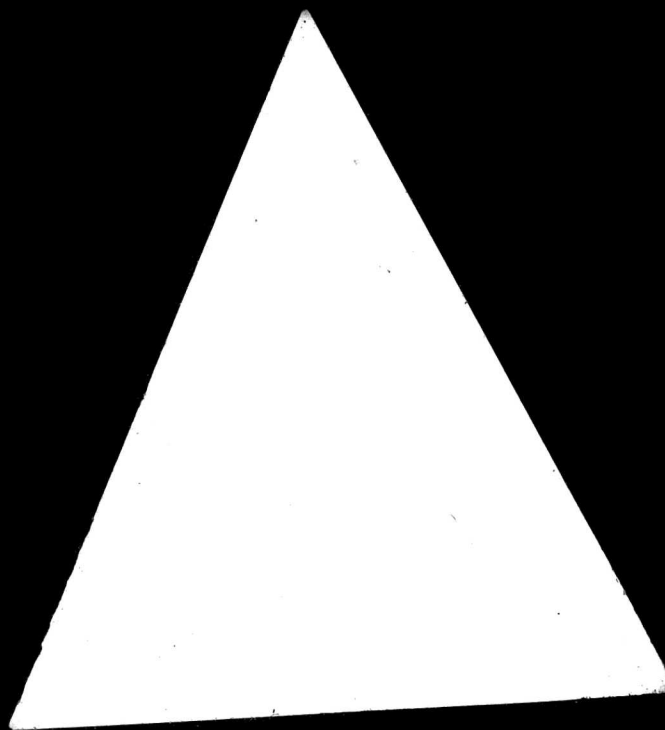
I the undersigned do certify that J. J. Mages now of the
County Fulton is the same person who as Indigent
pensioner was on the pension rolls of this county, and drew a pension of \$60.00 dollars
for 1900, and the bearer is same man.

Given under my hand and official seal of office June 5 1901.

John J. Webb [Clerk] [L. S.]

SEAL

SEAL



Form No. 2

POWER OF ATTORNEY.
STATE OF GEORGIA.

(County)

Know all Men by these Presents, That I, _____ of _____

County, in said State, do hereby appoint _____ my true and lawful attorney in fact, for _____ of _____ my true and lawful attorney in fact, for _____ me and in my name to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit, hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1891.

[L.S.]

Executed in the presence of us:

WITNESSES.

If allowed, send amount by _____ to _____ and oblige _____ me at _____



Rebecca C. Hagan
Hulton County (Mo)

1891.

No. 3408

Widows' Pension

PAID TO

Rebecca C. Hagan
of
Hulton COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY. STATE OF GEORGIA.

Form No. 5.

County, in said State, do hereby appoint _____ of _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit, hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 189____.

Executed in the presence of us:

[L. S.]

DIRECTIONS.

If allowed, send amount by _____ me at _____

and oblige.



THE STATE OF GEORGIA, WASHINGTON, D.C.

AND HANDED TO

Warrant Issued

\$100.00.

Widows' Pension
PAID TO
Mrs. Rebecca Hages
of
Fulton
County

210. 3408

1891.

Widow, Rebecca Hages
Fulton County

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA

In person came before me, the undersigned Ordinary _____ County of Fulton in and for the County of Fulton, who being sworn according to law, says under oath that she is the widow of Isaac Hages, who was a soldier in the service of the Confederate States, and served as a member of Company E of the 16th Battalion of Georgia Cavalry; that he enlisted in said service on or about the _____ day of April, 1862, and was in the Confederate Army up to October, 1862. That while in the Army, he was on the 15th day of Sept, 1862, (See Note No. 1) taken sick with Typhoid Pneumonia from exposure in the military service of the Army of the Confederate States, and died with said disease in hospital at Knoxville, Tenn on the sixth (6th) day of Oct, 1862.

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the _____ day of July, 1857, and that she has resided in Georgia continuously since the _____ day of July, 1857, that Georgia is her home, and was such on the 31st day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1892, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, _____ day of July, 1891.
W. B. Hages
Ordinary.

NOTE: State in blank above the date of the death of the husband, and how, and when, and where he died. And in case his death resulted from disease, state how the disease is fact positively to have resulted from the service of the soldier in the Army and not from any other cause.

1891
D TO
issued
200
CREDIT
Extension
108

Affidavit for Three Witnesses. Form No. 2.

STATE OF GEORGIA,
County of Jackson
In person came before me, the undersigned Ordinary
in and for said County, witnesses
Robert Shields J. M. Lyle
and A. J. Wager (each known to said Attesting Officer as truthful,
reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge,
Mrs. Rebecca L. Wager of the County of Fuller
State of Georgia, is the widow of John S. Wager who was a soldier in
Company E of the 16th Regiment of Georgia Volunteers.
That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
about the 2nd day of April 1862 That while in said service, or by
reason of said service in the Army, he lost his life as follows:
He died from sickness in Hospital at New Orleans
Term, about the Sixth day of Oct 1862. while
in the Service of the Confederate States

*Witnesses. Opportunity for knowing death of applicant's
husband. Were that they were members of the same
Company. Now, he was reported to the Company as having
died as above stated - and knew that he was so
reported in the pay roll and that he has never
been heard from since - one of the witnesses to that effect
Wager was present, waited upon and saw John S.
Wager the deceased husband of applicant die at the
place & time stated in Applicant's Petition*

We further swear that Mrs. Rebecca L. Wager was the wife of said
soldier during the service, and that she has not intermarried since his death, and that she resides in
Fuller Co County of the State of Georgia
Subscribed before me, this, the
24th day of June 1891
H. W. Deere Ordinary
J. R. Shields
J. M. Lyle
A. J. Wager
Jackson Co Ga

Certificate of Ordinary of the County of Applicant's Residence. Form No. 3.

STATE OF GEORGIA,
County of Fuller
I, W. B. Leachman Ordinary
in and for said County of Fuller
State of Georgia, hereby certify that I am acquainted with Mrs. Rebecca L. Wager
the applicant for a pension in this case, and know, from my own knowledge, or from positive proof
presented to me by reputable witnesses, that she resides in this County, and that she resided in the
State of Georgia on December 23d, 1890, and has not lived out of the State since that date. ~~I also~~
~~certify that the witnesses whose testimony she presents to sustain her claim are known to me to be~~
~~trustworthy, and 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 assigned
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
2nd day of July 1891.
W. B. Leachman
Ordinary.

NOTES.

- The pension is only payable to certain classes of widows.
- Those whose husbands were killed in service.
- Those whose husbands died in the army of wounds or disease contracted in the service.
- Those whose husbands went to the army and have never been heard from since the war.
- Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.
- Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.
- No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.
- The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.
- The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.
- Widows who have married since the service of their husbands in the army are not entitled.
- There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.
- If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary and testify. The attestation of a Justice of the Peace or Notary will not answer.
- Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and receive the money, to receipt for same.
- Fill out the "subscriptions" below Power of Attorney, so that your Agent will know where and how to send the money.
- By order of the Governor.

W. H. HARRISON,
Sec. Ex. Department.

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2.

STATE OF GEORGIA, County of Fulton
 I, L. J. Gairner Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Rebecca G. Kagle the applicant for a pension in this case, and
 know, from my own knowledge, (or from positive proof presented to me by reputable witnesses),
 that she resides in this County, and that she resided in the State of Georgia on December 23,
 1890, and has not lived out of the State since that date. That she is the widow of
John S. Kagle deceased, and as such has heretofore been allowed a
 pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
20th day of January 1891.



M. L. Gairner Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I,
 of

County, in said State, do hereby appoint

of my true and lawful attorney in fact, for
 me and in my name, to receive and receipt for whatever amount of money I may be entitled to
 from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affi-
 davit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be
 issued by the Governor, or for any sum of money which may be coming to me for the reason
 aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this
 day of 189.

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by _____ to _____
 me at _____, and oblige

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2.

STATE OF GEORGIA, County of Fulton
 I, W. L. Gairner Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Rebecca G. Kagle the applicant for a pension in this case, and
 know, from my own knowledge (or from positive proof presented to me by reputable wit-
 nesses), that she resides in this County, and that she resided in the State of Georgia on
 December 23, 1890, and has not lived out of the State since that date. That she is the
 widow of John S. Kagle deceased, and as such has heretofore
 been allowed a pension for the year ending February 15th, 1891.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
 this, the 1st day of February 1891.

W. L. Gairner Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I,
 of

County in said State, do hereby appoint

of my true and lawful attorney in fact, for
 me, and in my name, to receive and receipt for whatever amount of money I may be en-
 titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the
 foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any
 Warrant that may be issued by the Governor, or for any sum of money which may be
 coming to me for the reason aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this
 day of 1894.

[L. S.]

Executed in the presence of us:

DIRECTIONS.

Send amount by _____ to _____
 me at _____, and oblige

Widows' Pension,

for year ending February 15th, 1893.

PAID TO

Rebecca G. Kagle

OF

Fulton County.

Warrant Issued

1893

AND HANDED TO

Rebecca G. Kagle

W. L. Gairner, State Printer, Atlanta.

WIDOWS' PENSION,

for year ending February 15th, 1894.

PAID TO

Rebecca G. Kagle

OF

Fulton County.

WARRANT ISSUED

1894.

AND HANDED TO

Rebecca G. Kagle

W. L. Gairner, State Printer, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA.

County of *Fulton*.

Personally comes Mrs.

Rebecca G. Wages

who being sworn, says on oath, that she is a bona fide resident of said County of

Fulton

State of Georgia, and that she has resided in said State

continuously ever since *her birth*

1830. That she is the Widow of

John S. Wages

who was a Soldier in Company

C of the *16th* Battalion *Regiment of Georgia Cavalry*

Volunteers, that he enlisted in said Regiment on or about the month of *April* 1862

1862 and served in the Army up to *October 1st* 1862. That he lost his

life on the *1st* day of *October* 1862. (State here

full particulars of the husband's death, when, where and from what cause.)

This man said he contracted Typhoid Pneumonia from exposure and died with said disease in Hospital at Knoxville Tenn on the 6th day of October 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, that she became his wife in the year 1850; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

30th day of *January* 1893.

M. S. Bachman Ordinary.

Post-office

Atlanta Ga

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of *Fulton*.

Personally comes Mrs.

Rebecca G. Wages

who being sworn, says on oath, that she is a bona fide resident of said County of

Fulton

State of Georgia, and that she has resided in said State

continuously ever since

her birth

1850

That she is the Widow of

John S. Wages

who was a Soldier in Company

C of the *16th* Battalion *Regiment of Georgia Cavalry*

Volunteers, that he enlisted in said Regiment on or about the month of *April* 2nd

1862 and served in the Army up to

October 5th

1862

That he lost his

life on the

5th

day of

October

1862

(State here

full particulars of the husband's death, when, where and from what cause.)

While in service he contracted Typhoid Pneumonia from exposure

and died with said disease in Hospital at Knoxville, Tenn, on the

6th day of *October* 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, that she became his wife in the year 1850; 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, 1894.

Sworn to and subscribed before me, this

1st day of *February* 1894.

M. S. Bachman Ordinary.

Post-office

R. G. Wages

day of *January* 1895.
M. L. Calhoun Ordinary. Post-office *Atlanta Ga*

Certificate of Ordinary of the County of Applicant's Residence.

STATE OF GEORGIA, County of *Fulton*
I, *M. L. Calhoun* Ordinary in and for said County of *Fulton* State of Georgia, hereby certify that I am acquainted with Mrs. *Rebecca C. Hayes* the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of *John S. Hayes* deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the *15th* day of *Feb'y* 1895. *M. L. Calhoun* Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of *Fulton*
KNOW ALL MEN BY THESE PRESENTS, That I, *M. L. Calhoun* County in said State, do hereby appoint *M. L. Calhoun* my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *15th* day of *Feb'y* 1895. [L.S.]

Executed in the presence of:

[Signature]

DIRECTIONS.

Send amount by *check* to *John S. Hayes* and oblige me at *Atlanta Ga*

Widow's Pension, 1895.
No. 646
WIDOW'S PENSION, 1895.
PAID TO — *John S. Hayes*
for year ending February 15th, 1895.
Fulton County.
WARRANT ISSUED
AND HANDED TO *John S. Hayes*
Feb. 1 1895.
John S. Hayes, State Pensioner.

Certificate of Ordinary of the County of Applicant's Residence.

STATE OF GEORGIA, County of *Fulton*
I, *M. L. Calhoun* Ordinary in and for said County of *Fulton* State of Georgia, hereby certify that I am acquainted with Mrs. *Rebecca C. Hayes* the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses), that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of *John S. Hayes* deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the *15th* day of *Feb'y* 1895. *M. L. Calhoun* Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of *Fulton*
I, *M. L. Calhoun* hereby authorize *John S. Hayes* to receive and receipt for the pension paid hereon and request that he remit same to *John S. Hayes* at *Atlanta Ga*
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *15th* day of *Feb'y* 1895. [L.S.]

Executed in the presence of:

Widow's Pension, 1896.
No. 387
WIDOW'S PENSION, 1896.
PAID TO — *John S. Hayes*
for year ending February 15th, 1896.
Fulton County.
WARRANT ISSUED
AND HANDED TO *John S. Hayes*
Feb. 1 1896.
John S. Hayes, State Pensioner.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.
Rebecca C. Wages

who being sworn, says on oath, that she is a bona fide resident of said county of Fulton State of Georgia, and that she has resided in said State continuously ever since her birth 18 50 That she is the Widow of John S. Wages who was a Soldier in Company 1 of the 15th Battalion Regiment of Georgia Cavalry Volunteers, that he enlisted in said Regiment on or about the month of April and 1862 and served in the Army up to October 8th 1862 That he lost his life on the 8th day of October 1862 (State here full particulars of the husband's death, when, where and from what cause.)

While in service he contracted Typhoid Pneumonia from exposure and died with said disease in Hospital at Knoxville Tenn. on the 8th day of October 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, that she became his wife in the year 18 50, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this 1st day of Feb 1895.

W. L. Leachman Ordinary.

Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.
Rebecca C. Wages

who being sworn, says on oath, that she is a bona fide resident of said county of Fulton State of Georgia, and that she has resided in said State continuously ever since her birth 18 50 That she is the Widow of John S. Wages who was a Soldier in Company 1 of the 15th Battalion Regiment of Georgia Cavalry Volunteers, that he enlisted in said regiment on or about the month of April and 1862 and served in the Army up to October 8th 1862 That he lost his life on the 8th day of October 1862 (State here full particulars of the husband's death, when, where and from what cause.)

While in service he contracted Typhoid Pneumonia from exposure and died with said disease in Hospital at Knoxville Tenn. on the 8th day of October 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, that she became his wife in the year 18 50, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this 5th day of Feb 1896.

W. L. Leachman Ordinary.

Post-office

Certificate of Ordinary of the County of Applicant's Residence.

Form No. 2

STATE OF GEORGIA, County of Bullock
 Ordinary in and for said County of
M. H. Bullock
 State of Georgia, hereby certify that I am acquainted with Mrs.
Rebecca C. Wages
 the applicant for a pension in this case, and
 know from my own knowledge, 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 John S. Wages
 deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1896.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this 11th
 day of February 1897.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of _____
 I, _____ hereby authorize
 _____ to receive and receipt for the pension paid hereon and request
 that he remit same to _____ at _____
 In Witness Whereof, I have hereunto set my hand and seal, this _____
 day of _____ 1897.

Executed in the presence of _____

POWER OF ATTORNEY.

State of Georgia, County of _____
 I, _____ hereby authorize
 _____ to receive and receipt for the pension paid hereon and request that he remit same to
 _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
 day of _____ 1898.

[L. S.]

Executed in presence of _____

Wages, Rebecca C.
Bullock County
 For 1896 heretofore paid.

1898.

No. 2228

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Rebecca C. Wages

OF

Bullock County

Widow of John S. Wages

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

3/8

ANY REMITTANCE TO

1898.

J. C. Wages
 GEO. W. LAMSON, STATE PRINTER, ATLANTA.

1897.

No. 1154

WIDOW'S PENSION,

For year ending February 15th, 1897.

PAID TO

Rebecca C. Wages

OF

Bullock County.

Widow of John S. Wages

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

AND REMITTED TO

1897.

GEO. W. LAMSON, STATE PRINTER, ATLANTA.

ISSUED
1897
O'HANSON,
Commissioner of Penitentiaries
CHAPMAN
County
PENSION,
any 15th, 1897.

2.
THE N.B.
County
col. C.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Fulton* Personally Comes Mrs. *Rebecca C. Hager*

who being sworn, says on oath, that she is a bona fide resident of said county of
Fulton State of Georgia, and that she has resided in said State
continuously ever since *her birth* 1850 That she is the Widow of
John S. Hager who was a Soldier in Company
of the *10th* Battalion Regiment of *Georgia Cavalry*
Volunteers, that he enlisted in said regiment on or about the month of *April* 1862
1862 and served in the Army up to *October 6th* 1862 That he lost his
life on the *6th* day of *October* 1862 (State here
full particulars of the husband's death, when, where and from what cause.)

*While in service he contracted
Typhoid Pneumonia from exposure
and died with said disease in Hospital
at Knoxville Tenn. on the 6th day
of October 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 1850, that Georgia is her
home and she resided in this State 2nd day of December, 1890, and has not lived in any other State or county
since that date. I have been allowed a pension as a resident of *Fulton* County
for the year ending February 15th, 1893, and now apply for the pension provided by law for the year ending
February 15th, 1897.

Sworn to and subscribed before me, this
day of *July* 1897,
R. C. Hager Ordinary Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Fulton* Personally Comes Mrs. *Rebecca C. Hager*

who, being sworn, says on oath, that she is a bona fide resident of said county of
Fulton State of Georgia, and that she has resided in said State
continuously ever since *birth* 1850 That she is the Widow of
John S. Hager who was a Soldier in Company
of the *10th* Battalion Regiment of *Georgia Cavalry*
Volunteers, that he enlisted in said regiment on or about the month of *April* 1862
1862 and served in the Army up to *October 6th* 1862 That he lost his
life on the *6th* day of *October* 1862 (State here
full particulars of the husband's death, when, where and from what cause.)

*Contracted Typhoid pneumonia
while in service with the
Army from which he died*

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, and that she became his wife in the year 1850
I have been allowed a pension as a resident of *Fulton* County for the year ending
February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.

Sworn to and subscribed before me, this
day of *March* 1898,
M. H. Hager Ordinary Post-office
Garland for R. C. Hager
State of Georgia,
Fulton County. Ordinary of said County, certify that I am well acquainted
with Mrs. *Rebecca C. Hager* who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the *23rd* day of *July* 1898
Given under my official signature and seal this the
M. H. Hager
Official Seal. Ordinary of *Fulton* County.

POWER OF ATTORNEY.

State of Georgia.

County.

I, _____ hereby authorize
of _____
to receive and receipt for the pension paid hereon and request that he remit same to
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 1899.

[L. S.]

Executed in presence of _____

*Wages, Rebecca E.
Fulton Co*

For Those Herebefore Paid.

1899.

NO. 709

WIDOW'S PENSION,

For year ending February 1st, 1899

Mrs. R. L. Wages

of

Fulton

County

Widow of *John S.*

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT ISSUED

213

AND HANDLED TO

R. L. Wages

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize
of _____
to receive and receipt for the pension paid hereon and request that he remit same to
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 1900.

[L. S.]

Executed in presence of _____

*Wages, R. C. Mrs.
Fulton County*

1900.

NO. 1914

WIDOW'S PENSION,

For year ending February 1st, 1900.

PAID TO

Mrs. R. L. Wages

of

Fulton

County.

Widow of

JNO. W. LINLSEY,

Commissioner of Pensions.

WARRANT ISSUED

Phy 14

AND HANDLED TO

1

Geo. W. Harrison, State Printer, Atlanta.

The undersigned the Clerk of the Court
do hereby certify that the above is a true and correct
copy of the original as the same appears in the
Court records. 1891

POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

I, _____ hereby authorize
of _____
to receive and receipt for the pension paid hereon and request that he remit same to
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 1901. [L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County,

I, _____ hereby authorize
of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____ 1902. [L. S.]

Executed in presence of _____

*Wagon, Belcher & Co.
Fulton County*

To Those Herebefore Paid.

1901.

No. 813

WIDOW'S PENSION,

For year ending February 1st, 1901.

Mr. R. L. Wagner

Fulton County

Widow of John S. Wagner

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1901.

Jan 17

AND HANDED TO

Wagon, Belcher & Co.

Clerk of the Court, State of Georgia.

*Wagon, Belcher & Co.
Fulton Co.*

To Those Herebefore Paid.

1902.

No. 138

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mr. R. L. Wagner

OF

Fulton County

Widow of John S. Wagner

Co. _____

Regiment _____

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDED TO

Wagon, Belcher & Co.

Clerk of the Court, State of Georgia.

ALLOWED PENSION

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

R. C. Wagner

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since Birth. That she is the Widow of John P. Wagner who was a soldier in Company E of the 18th Bat Regiment of Volunteers, that he enlisted in said regiment on or about the month of April 2nd 1862 and served in the Army up to Oct 6th 1862. That he lost his life on the 6th day of Oct 1862. (State here particulars of the husband's death, when, where and from what cause) Died from pneumonia contracted in the army

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1862. I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1901, and now apply for the pension provided by law for the year ending February 15th, 1902.

Sworn to and subscribed before me, this 16 day of Jan 1902. John P. Wilkinson Ordinary.

John P. Wilkinson Post Office John P. Wagner's Guardiam

State of Georgia,

County of Fulton

Ordinary of said County, certify that I am well acquainted

with Mrs. R. C. Wagner who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 23rd day of Dec 1890.

Given under my official signature and seal, this the 16 day of Jan 1902.

Official Seal.

Ordinary of Fulton County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

PERSONALLY COMES MRS.

R. C. Wagner

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since Birth. That she is the Widow of J. S. Wagner who was a soldier in Company E of the 18th Bat Regiment of Volunteers, that he enlisted in said regiment on or about the month of April 2nd 1862 and served in the Army up to Oct 6th 1862. That he lost his life on the 6th day of Oct 1862. (State here particulars of the husband's death, when, where and from what cause) Died of pneumonia contracted in the army

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

Fulton County for the

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1901, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me, this 13 day of Jan 1902.

John P. Wilkinson Ordinary. Mrs R. C. Wagner Post Office John P. Wagner's Guardiam

State of Georgia,

County of Fulton

Ordinary of said County, certify that I am well acquainted with Mrs. R. C. Wagner who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 23rd day of Dec 1890.

Given under my official signature and seal, this the 13 day of Jan 1902.

Official Seal.

Ordinary of Fulton County.

NOTE.—All blank spaces must be filled. Voucher and affidavit must bear date after January 1st, 1902.

POWER OF ATTORNEY: 1903

STATE OF GEORGIA.

COUNTY.

I, _____, hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this
_____ day of _____, 1903.

Executed in presence of _____

[L. 8]

State of Georgia) I hereby certify that Rebecca the within
Fulton County) named guardian of R. C. Wages in Decree of Court
is the legally appointed & duly qualified and
acting guardian of the person & property of said R. C.
Wages under appointment of this Court
given under my hand & seal of said Court
the 26th day of December, 1901.
John W. Lindsey
Ordinary

WIDOW'S PENSION

1904.

No. 433

YEAR ENDING DECEMBER 31, 1901.

PAID TO

Widow of _____ County,

Co. _____ Regiment _____

JOHN W. LINDSEY,
Ordinary of Georgia.

WARRANT ISSUED

AND HANDED TO _____

1904

1903.

No. 366

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. R. C. Wages

Widow of _____ County,

Co. _____ Regiment _____

JOHN W. LINDSEY,
Ordinary of Georgia.

WARRANT ISSUED

AND HANDED TO _____

1903

POWER OF ATTORNEY

STATE OF GEORGIA.

COUNTY.

I, _____, hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this
_____ day of _____, 1904.

Executed in presence of _____

[L. 8]

WIDOWS HERETOFORE PAID

Wages, Rebecca C.
Fulton County
To Those Heretofore Paid

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COME MRS.

R. C. Wagner (deceased)
J. C. Wagner Guardian

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State continuously ever since Birth. That she is the Widow of J. S. Wagner who was a soldier in Company E of the 16th Bat Regiment of Inf Volunteers, that he enlisted in said regiment on or about the month of Apr 1862, and served in the Army up to Oct 6th 1862. That he lost his life on the 6th day of Oct 1863. (State here particulars of the husband's death, when, where and from what cause.)

Died of Pneumonia contracted in the army

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1850.

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1902, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this day of JAN 22 1903 1903.

Mrs R. C. Wagner deponent

J. C. Wagner Guardian Ordinary.

State of Georgia,

County,

I, John R. Williamson

Ordinary of said County, certify that I am well acquainted with Mrs. R. C. Wagner (deceased) J. C. Wagner Guardian, 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 Birth day of Birth 1850.

Given under my official signature and seal, this day of JAN 22 1903 1903.

Official Seal.

NOTE—All blank spaces must be filled. Voucher and Affidavit must bear date after January 1st, 1903.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COME MRS.

R. C. Wagner (deceased)
J. C. Wagner Guardian

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton, State of Georgia, and that she has resided in said State continuously ever since Birth. That she is the Widow of J. S. Wagner who was a soldier in Company E of the 16th Bat Regiment of Inf Volunteers, that he enlisted in said regiment on or about the month of Apr 1862, and served in the Army up to Oct 6th 1862. That he lost his life on the 6th day of Oct 1863. (State here particulars of the husband's death, when, where and from what cause.)

Died of Pneumonia contracted in the army

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1850.

I have been paid a pension as a resident of Fulton County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me,

this day of JAN 22 1904 1904.

J. C. Wagner Guardian

Post Office Fulton Ordinary.

State of Georgia,

County,

I, John R. Williamson

Ordinary of said County, certify that I am well acquainted with Mrs. R. C. Wagner (deceased) J. C. Wagner Guardian, 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 Birth day of Birth 1850.

Given under my official signature and seal, this day of JAN 22 1904 1904.

Official Seal.

Ordinary of Fulton County.

NOTE—All blank spaces must be filled. Voucher and Affidavit must bear date after January 1st, 1904.

Official Seal.

Ordinary of _____ County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY.

I, _____, hereby authorize _____ of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____ day of _____, 1905.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY.

I, John L. Payne of Fulton County, Georgia, do hereby authorize John L. Payne of Fulton County, Georgia, to receive and receipt for the pension paid hereon, and request that he remit same to _____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____ day of 4/10, 1906.

[L. S.]

Executed in presence of _____

Wayne, Rebecca C.
Fulton County
To Those Heretofore Paid.

1905.

No. 625

WIDOW'S PENSION,
For year ending Dec. 31, 1905.

PAID TO Mrs. Rebecca C. Wayne

OF Fulton County,

Widow of John L. Payne
Co. 1st Regiment 4th Division

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
AND HANDLED TO
4/27/1906
J. C. Wayne

Wayne, Rebecca C.
Fulton County
To Those Heretofore Paid.

1906.

No. 2419

WIDOW'S PENSION
For year ending Dec. 31, 1906.

PAID TO Mrs. Rebecca C. Wayne

OF Fulton County,

Widow of John L. Payne
Co. 1st Regiment 4th Division

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
AND HANDLED TO
4/2 1906.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of **Fulton**.

PERSONALLY COMES MRS.

Rebecca C. Hages

Fulton.

who, being sworn, says on oath, that she is a bona fide resident of said County of
State of Georgia, and that she has resided in said State
continuously ever since *all per life*. That she is the Widow of
John S. Hages who was a soldier in Company
of the *16th* Regiment of *Georgia*
Volunteers, that he enlisted in said regiment on or about the month of *Apr*
1862, and served in the Army up to *Oct* 1862. That he lost his
life on the *6* day of *Oct* 1862. (State here
particulars of the husband's death, when, where and from what cause.)

Died Hospital Oct. 6 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 *1849*.

I have been paid a pension as a resident of *Fulton* County, for the
year ending December 31, 1904, and now apply for the pension provided by law for the year ending
December 31, 1905.

Sworn to and subscribed before me
this *JAN 2* day of *1905*
Ordinary

J. H. Hages
Post Office *Self*

State of Georgia,
Fulton.

County of *Fulton*. Ordinary of said County, certify that I am well
acquainted with Mrs. *Rebecca C. Hages*, 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 *Jan* 18.

Given under my official signature and seal, this the *JAN 2* day of *1905*.

Official
SealOrdinary of *Fulton* County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of **Fulton**.

PERSONALLY COMES MRS.

Rebecca C. Hages

Fulton.

who, being sworn, says on oath that she is a bona fide resident of said County of
State of Georgia, and that she has resided in said State
continuously ever since *all per life*. That she is the Widow of
John S. Hages who was a soldier in Company
of the *16th* Regiment of *Ga.*
Volunteers, that he enlisted in said regiment on or about the month of *April*
1862, and served in the Army up to *Oct* 1862. That he lost his
life on the *6* day of *Oct* 1862. (State here
particulars of the husband's death, when, where and from what cause.)

Died Hospital Oct. 6 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 *1849*.

I have been paid a pension as a resident of *Fulton* County, for the
year ending December 31, 1905, and now apply for the pension provided by law for the year ending
December 31, 1906.

Sworn to and subscribed before me
this *JAN 1* day of *1906*
Ordinary

J. H. Hages
Post Office *Self*

State of Georgia,
Fulton.

County of *Fulton*. Ordinary of said County, certify that I am well
acquainted with Mrs. *Rebecca C. Hages*, who made the above affidavit, and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
herself to be, and that she has continuously resided in this State since the *all per life*
day of *18*.

Given under my official signature and seal, this the *JAN 1* day of *1906*.

Official
SealOrdinary of *Fulton* County

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

State of Georgia,
Fulton.

County, Ordinary of said County, certify that I am well acquainted with Mrs. *Rebecca C. Wages*. 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 *January* 18*21*.

Given under my official signature and seal, this day of JAN 2 1905 1905.

Official
Seal

Ordinary of *Fulton* County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

State of Georgia,
Fulton.

County, Ordinary of said County, certify that I am well acquainted with Mrs. *Rebecca C. Wages*, 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 *January* 18*21*.

Given under my official signature and seal, this day of JAN 1 1906 1906.

Official
Seal

Ordinary of *Fulton* County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavits must bear date after January 1st, 1906.

LETTERS GUARDIANSHIP

—OF—

PERSON AND PROPERTY OF

Rebecca C. Wages
Insane Person.

John C. Wages
GUARDIAN

Recorded in Book *2* Page *107*

March 7th 18*98*

W. H. Mearns
Ordinary.



LETTERS GUARDIANSHIP OF PERSON AND PROPERTY.

GEORGIA,

Fulton County.

BY THE COURT OF ORDINARY FOR SAID COUNTY.

To *John C. Wages* Greeting:

Whereas *Rebecca C. Wages* an insane person and incapable of managing her estate, has no Guardian

~~Minor and Orphan of~~ ~~deceased~~
~~no Guardian~~ and ~~etc.~~ possessed, in *her* own right, of considerable Estate, by means whereof the power of granting the Guardianship of the person and property of the said *Rebecca C. Wages*

to me is manifestly known to belong, and for the better care of the person, and securing the Estate of the said ~~Minor~~ *Insane Person* and from the integrity and confidence reposed in you,

John C. Wages
and in pursuance of an order lawfully appointing you, and your compliance therewith, I do hereby commit the Guardianship of the person and property of the said

Rebecca C. Wages

to you the said *John C. Wages*
you assenting thereto by your acceptance of these Letters:

Herein Charging You, That you enquire into and take charge of *her* Estate, ~~both real and personal, maintain and educate said orphan~~ in such a manner as shall be suitable to ~~interest and circumstances~~, protect *her* person, and all other things do, which by law you ought to do, for said Ward; of all which a true and perfect account you shall render to the Court of Ordinary for said County, according to law, in every year during your continuance in office.

Witness my hand as Ordinary, and seal of the said Court, this *7th*
day of *March* Eighteen Hundred and *Ninety Eight*

M. M. M. M. Ordinary.

to you the said Johanna Wages
you assenting thereto by your acceptance of these Letters:

Herein Charging You. That you enquire into and take charge of her
Estate, ~~both real and personal, maintain and educate said orphan in such a manner as shall~~
~~be suitable to~~ interest and circumstances, protect her person, and
all other things do, which by law you ought to do, for said Ward; of all which a true and
perfect account you shall render to the Court of Ordinary for said County, according to law,
in every year during your continuance in office.

Witness my hand as Ordinary, and seal of the said Court, this 27th
day of March Eighteen Hundred and Ninety Eight

M. M. M. M. M. Ordinary.

Wagner, Samuel C.
Oct 10 1905

No. _____

INDIGENT PENSION.
1905

Name *J. C. Wagner*
County *Fulton*
Prigun Battery Regt.
Priguns
Approved _____ 190_

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

Ordinary will write name of Applicant, Company
and Regiment on back as indicated above.

Geo. W. Harrington State Printer, Atlanta, Ga.

7/21/05
E. R. O.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, _____

I, _____, hereby authorize

to receive and accept for the pension allowed said request that he remit same to _____

Witness my hand and seal, this _____ day of _____, 190_

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize _____ of _____

to receive and receipt for the pension allowed and request that he remit same to _____

at _____ by _____ day of _____ 1905.

Witness my hand and seal, this _____ day of _____ 1905.

Executed in presence of _____

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

John W. Lindsey of said State and County, desiring to avail himself of the Pension Act (Section 1204, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State County and post-office).
Jeremiah C. Wagner Atlanta Ga Fulton County

2. How long and since when have you been a resident of this State? Since my birth in 1848

3. When and where were you born? Putnam County Georgia

4. When and where and in what company and regiment did you enlist or serve? 1st Bull Run Battery at Millidgeville Ga 1864 - July - 20th

5. How long did you remain in such company and regiment? Until the Surrender May - 5th 1865

6. When and where was your company and regiment surrendered and discharged? May 5th 1865 at Millidgeville Ga

7. Were you present with your company and regiment when it was surrendered? No
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was with my command when it surrendered

9. How much can you earn (gross) per annum by your own exertions or labor? Nothing

10. What has been your occupation since 1865?

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty,"

second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity and Poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? Since 1900 On account of ulcerated toes on right leg and Rheumatism

13. What property, real and personal, or income, do you possess, and its gross value? None

14. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868, 1869, 1870, 1871 and 1872, and what disposition if any, by sale or gift, have you made of same? None at all for I had nothing

15. In what County did you reside during those years, and what property did you then return for taxation? In Jasper and Fulton Counties. Improbable property only

16. How were you supported during the years 1869, 1870, 1871 and 1872? By my children

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Nothing

18. What was your employment during 1868, 1869, 1870 and 1871? What pay did you receive in each year? That with I did work in Fulton Mills

19. Have you a family? If so, who composed such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Yes and 3 children. One in Fulton Mills. No homestead or property. My wife 20 years 75 May 8. In Fulton Mills wife Dr. Shugart

20. Are you receiving any pension? If so, what amount and for what disability? None at all

21. Have you ever made an application for pension before? I have not

22. How many applications have you ever made and under what class? None at all

Sworn to and subscribed before me this the _____ day of _____ 1905.

John W. Lindsey Applicant.

of Fulton County.

Every Question MUST Be Answered.

INDIGENT PENSION

1905

Name John W. Lindsey

County Fulton

Ref. John W. Lindsey

Amount 190

JOHN W. LINDSEY, Commissioner of Pensions

WARRANT HANDLED TO

Indigent will write name of Applicant, County and Amount in blank or indicated above.

EX. O.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

County.

Do Wm Dillard of said State and County, having been presented as a witness in support of the application of Jennrich C. Wagner for pension under section 1254, Code, and after being duly sworn true answers to the following questions, depose and answers as follows:

1. What is your name and where do you reside? Wm Dillard
2. Are you acquainted with Jennrich C. Wagner, the applicant; if so, how long have you known him? About his life & well since 1864
3. Where does he reside, and how long and since when has he been a resident of this State? Resides in Atlanta Ga & resided in State Ga all his life
4. When, where and in what company and regiment did he enlist, and how do you know? Enlisted at Milledgeville in 1864. Regiment - 4th Cavalry
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? From July 1864 to close of war
7. When and where was his command surrendered? At Milledgeville, May 1865
8. Were you present when it surrendered? I was
9. Was applicant present? Yes
10. If he was not present, where was he? Was absent
- When did he leave his command? May 1865 after surrender For what cause? End of war
- By what authority he left? None other than surrender How do you know all of this? Was present & surrendered with same command
11. What property, effects or income has the applicant? (Give your means of knowledge.) None personal
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? Nothing but as a tenant he owns no estate at all
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? None have products of his labor
14. What is the applicant's occupation and physical condition? He was a farmer & laborer fields & infirm from Rheumatism & Rheumatism from his
15. Is the applicant unable to support himself by labor of any sort; if so, why? Not able to do physical duty or manual work
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? By his labor aided by his children
17. What portion of his support for these four years was derived from his own labor or income? About 1/4 of his support came from labor of his family
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Rheumatism & infirmity from Rheumatism & Rheumatism from his
19. Who composes family? What property have they? Children's age and their earning capacity? None - one child 8 years daughter married
20. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this 14th day of January, 1903.

Wm D. Dillard Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

County.

Personally came before me Wm D. Dillard and Wm D. Dillard, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Jennrich C. Wagner, applicant for pension under Section 1254, Code, and after

such personal examination say that his precise physical condition is as follows: His right leg is shorter from child & knee inflamed and dislocated. He had to keep it bandaged all the time he had Rheumatism all over him. He also had Organic heart disease. Irregular circulation & shortness of breath all of which makes him unable to

Sworn to and subscribed before me, this, the 14th day of January, 1903. Wm D. Dillard & Wm D. Dillard Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

I, John R. Williamson Ordinary, in and for said County, hereby certify that the applicant Jennrich C. Wagner resides in said County, and has been a bona fide resident of this State since the day of 1898, and that the witnesses, viz:

are of trustworthy character, and that their statements are entitled to full faith and credit. I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed. I further certify that the tax digest of County shows that applicant returned for taxation in his name in 1899 Dollars of property; in 1900 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 14th day of Sept 1902. John R. Williamson Ordinary, of Dillard County.

NOTE. 1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall first answer me to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." 2. Additional affidavits may be attached if blank spaces are insufficient. 3. In every case the Ordinary must certify to the character of the witnesses, and as to the execution of the proof as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize
 _____ of _____
 to receive and receipt for the pension allowed, and request that he remit same to
 _____ at _____
 by _____

Witness my hand and seal, this _____ day of _____, 1906.
 [L. S.]

Executed in the presence of _____

*Wagner, Jeremiah C.
 Fulton County*

(FOR THOSE ALREADY ENROLLED.)

No. 87

INDIGENT

**SOLDIER'S PENSION
 1906.**

Jeremiah C. Wagner

Name

County

Co. *Fulton*

Regiment

Commissioner of Pensions

WARRANT ISSUED

1906.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

W. S.

The Pension of Pensions

no date

*Wagner, Jeremiah C.
 Fulton Co.*

(FOR THOSE ALREADY ENROLLED.)

No. 13

INDIGENT

**SOLDIER'S PENSION
 1907.**

Jeremiah C. Wagner

Name

County

Co. *Fulton*

Regiment

WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

W. S.

The Pension of Pensions

1907.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize
 _____ of _____
 to receive and receipt for the pension allowed, and request that he remit same to
 _____ at _____
 by _____

Witness my hand and seal, this _____ day of _____, 1907.
 [L. S.]

Executed in presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears Jeremiah C. Wagner of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 1st day of July 1868; that he is 58 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 12 months in Company of 1st Regiment of Fulton Battery; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: no property

of the value of _____ Dollars. I am now earning by my labor _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1864, 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 JAN 1906.

Ordinary.

State of Georgia,

County.

I, John P. Williamson Ordinary of said County, do certify that I am well acquainted with Jeremiah C. Wagner 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 _____ signature and seal, this _____ 1906 day of _____ 1906.

Ordinary.

County.



Note.—The blank spaces must be filled.
Note.—A Affidavit should not be attested before January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears Jeremiah C. Wagner of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1868; that he is 58 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 12 months in Company of 1st Regiment of Fulton Battery; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: _____

of the value of _____ Dollars. I am now earning by my labor _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion 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 is entitled for the year 1907. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the _____ day of _____ 1907.

Ordinary.

State of Georgia,

Fulton County.

I, John P. Williamson Ordinary of said County, do certify that I am well acquainted with Jeremiah C. Wagner 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 1907.

John P. Williamson

Ordinary.

County.



Note.—The blank spaces must be filled.
Note.—A Affidavit should not be attested before January 1st, 1907.

AMs
post
mark
here

Ordinary _____ County.

Norm.—The blank spaces must be filled.
Norm.—Affidavit should not be attested before January 1st, 1906.

Norm.—Affidavit should not be attested before January 1st, 1906.

GEORGIA, Gulton County.
I, Mr. Robinson do do, Ordinary of said county, do certify
that I personally know Louisa S. Wagner, the applicant, and that she
is the lawful widow of Frederick Wagner, and was on
the Indigent Pension Roll of said Gulton county, and was paid
a Pension from County county for 1914, and at the time
of his death on the 28 day of February, 1915, there was due to
him and unpaid his Pension of Twenty Dollars from the State
of Georgia, and I know Mrs. R. P. Mc Cleune the within
witness, and he is of a truthful and trustworthy character and entitled to full credit.
Given under my hand and seal this 5 day of May, 1915.
Mr. Robinson do do Ordinary.
Gulton County.

Wagner, John
Gulton Co.

No. _____ 1915

Application for Pension Due
Deceased Soldier
UNDER ACT 1861

To be paid the Widow or Dependent Children
BY
Mrs. Louisa S. Wagner
Widow of Frederick Wagner
of Gulton County
Vol. _____
Co. _____ Regt. _____

Approved and paid _____ 1915.
J. W. LINDSEY,
Commissioner of Pensions.
Chas. P. Scott, State Printer, Atlanta.

Indigent

GEORGIA, _____ County.
I hereby authorize and constitute _____ of said county, my
lawful attorney to collect and receipt for me in my name the Pension due me for 1915, through my
deceased husband, _____ who was on
Pension Roll and paid from _____ for 1915.
Witness my hand this _____ day of _____, 1915.
Attested before me:

Application for Pension Due Deceased Soldier

To be paid to his widow or dependent children.

UNDER ACT APPROVED OCTOBER 3, 1891.

STATE OF GEORGIA, Fulton County.

Personally before me comes Mrs. Louisa F. Wagner of said county, after being duly sworn, on oath says that she is the widow of Jeremiah C. Wagner who was duly enrolled as a Volunteer Pensioner from the county of Fulton and was paid a Pension of \$10.00 Dollars from Fulton county for 1904, and that the said Jeremiah C. Wagner died in Fulton county on the 7 day of Dec, 1914, and at the time of his death a Pension of \$100.00 was due him from Fulton county and unpaid for 1915. Applicant further swears that she married the said Jeremiah C. Wagner on the 18 day of Feb, 1904, in Fulton county and State of Georgia and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 10 day of Jan, 1915.

John R. Wilkinson Ordinary, Mrs. Louisa F. Wagner (L.S.)
Fulton County.

AFFIDAVIT OF WITNESS.

GEORGIA, Fulton County.

Personally before me comes Mrs. D. R. McBurne who on oath says that she knew Jeremiah C. Wagner while in life and that she knows Mrs. Louisa F. Wagner the above applicant; that she knows that the said Jeremiah C. Wagner and Louisa F. Wagner were in due form of law married in the county of Fulton in the State of Georgia on the 18 day of Feb, 1904, and that they resided together as husband and wife from date of marriage to the day of his death on the 7 day of Dec, 1914, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 10 day of Jan, 1915.

John R. Wilkinson Ordinary, Mrs. D. R. McBurne
Fulton County.

GEORGIA, Fulton County.

Personally before me comes Mrs. D. R. McBurne, who
 on oath says that she knew Jeremiah C. Wagner while in life
 and that she knows Mrs. Louisa F. Wagner
 the above applicant; that she knows that the said Jeremiah C. Wagner
 and Louisa F. Wagner were in due form of law married in the county
 of Fulton in the State of Georgia on
 the 17 day of Feb 1904 and that they resided together
 as husband and wife from date of marriage to the day of his death on the 7 day
 of Dec 1914, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 20 day of Jan, 1915.

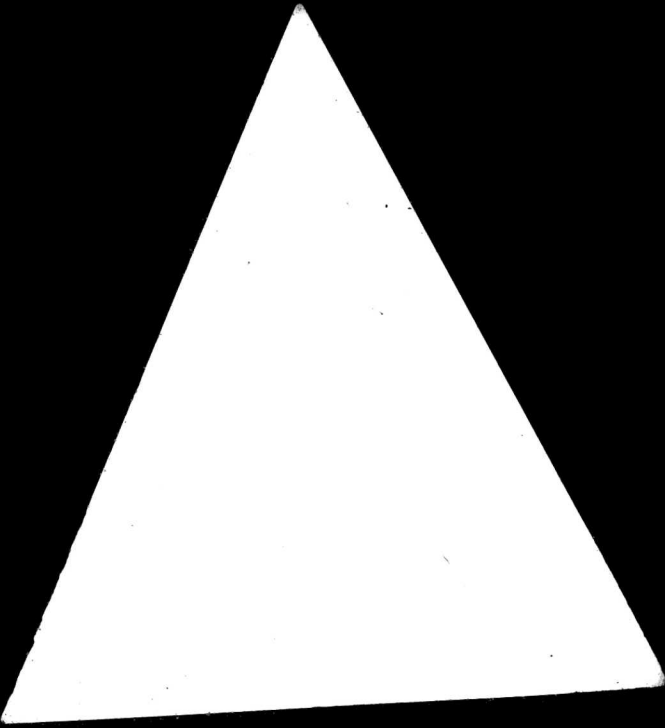
John W. Wilkerson Ordinary. Mrs. D. R. McBurne
Fulton County.

Note 1st—This form may be used by justices or other officers where there is no widow.
 2d—Ordinary must read in by some certified copy of marriage license attached.

Georgia - Fulton County
J. W. Wilkerson, Ordinary of
Fulton County, do hereby certify that I
 am personally acquainted with John
Wilkerson, Esq., & the subscribing witnesses and
 know him to be an honorable, truthful
 man and that his testimony is trustworthy
 and entitled to full faith and credit.

Witness my hand & seal of office
 this 14th day of January 1915.
John W. Wilkerson,
 Ordinary
Fulton County

Yusef K...



Presented in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I, _____ hereby authorize

to receive and receipt for the pension allowed and request that he remit same to _____

Witness my hand and seal, this _____ day of _____ 190 _____

Executed in presence of _____

INDIGENT PENSION.

1905

James M. Wicks

County of Wilkes

Co. 38th

Approved _____

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA.

COUNTY.

I, James M. Wicks of said State and County, desiring to avail himself of the Pension Act (Section 1284, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and post-office).
James M. Wicks, College Park, Ga.

2. How long and since when have you been a resident of this State? 64 years.

3. When and where were you born? 1835 - Campbell County, Ga.
When and where and in what company and regiment did you enlist or serve? 1861 - Co. 38th - Camp Hind Delmont Company, Ga.

4. How long did you remain in such company and regiment? I remained in this company three months & then I went with all the Company to the front in the Thompson's Artillery attached to the 38th.

5. When and where was your company and regiment surrendered and discharged? At Smithfield, Va. in 1865 - was lost in battle.

6. Were you present with your company and regiment when it was surrendered? Yes.

7. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was sick & in the Hospital at Danville, Va. I was discharged there about three weeks before we were surrendered.

8. How much can you earn (gross) per annum by your own exertions or labor? about \$100.

9. What has been your occupation since 1865? farmer.

10. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? infirmity & poverty.

11. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I had a bad attack of rheumatism at the close of the war & have since been unable to get it - since I have had pain & trouble & suffer from heart failure, prostate & bladder trouble.

12. What property, real and personal, or income, do you possess, and its gross value? none any one.

13. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868, 1869, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? none any one.

14. In what County did you reside during those years, and what property did you then return for taxation? In Wilkes County, Va. some of the land & some of the timber.

15. How were you supported during the years 1869, 1900, 1901 and 1902? By the aid of my children.

16. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? about \$100. I contribute about \$20.

17. What was your employment during 1868, 1869, 1901 and 1902? What pay did you receive in each year? I was a farmer.

18. Have you a family? If so, who compose such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Yes - wife & four children. They have no property or homestead.

19. Are you receiving any pension? If so, what amount and for what disability? Yes.

20. Have you ever made an application for pension before? Yes.

21. How many applications have you ever made and under what class? one.

Subscribed to and subscribed before me this _____ day of _____ 190 _____
James M. Wicks Applicant.
of _____ County.

20. What interest have you in the recovery of a pension
Sworn to and subscribed before me, this the 100th day of
June 1905. Ordinary.

John H. Loesh
Witness.

as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize
_____ of _____
to receive and receipt for the pension allowed, and request that he remit same to
at _____
by _____

WITNESS my hand and seal, this _____ day of _____, 1905.

[L. S.]

Executed in the presence of _____

Master James M.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

No. 240

INDIGENT
SOLDIER'S PENSION
1905.

Name Jas M. Waite
County Fulton
Co. 3rd Regt. 35th La.

WARRANT ISSUED

1/18

1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

app

THE QUALITY PRINTING AND PUBLISHING CO., ATLANTA, GA.

6/14/07

no date

Master James M.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

No. 436

INDIGENT
SOLDIER'S PENSION
1906.

Name Jas. M. Waite
County Fulton
Co. 3rd Regt. 35th La.

WARRANT ISSUED

1/17

1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

app

THE QUALITY PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize
_____ of _____
to receive and receipt for the pension allowed, and request that he remit same to
at _____
by _____

WITNESS my hand and seal, this _____ day of _____, 1906.

[L. S.]

Executed in the presence of _____

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears Joe M. Harte of
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 1838 that he is 68 years old and
by occupation a None that he enlisted in the military service of the Con-
federate States (or of the State of Georgia) during the war between the
States, and served for the term of 4 yrs in Company 40, of 38th Regiment
of Cal, that his physical condition is as
follows: Infirmary and poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning,
by my labor, _____ Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1905. I have heretofore as a resident of Fulton
County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this 10 day of Jan, 1905.

Ordinary.

STATE OF GEORGIA,

County.

I, _____ Ordinary of said County.
do certify that I am well acquainted with Joe M. Harte
the applicant in the foregoing affidavit and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.

Given under my official signature and seal, this _____ day of _____, 1905.

Ordinary Fulton County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavits should not be attested before January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears Joe M. Harte of
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of all his life; that he is 67 years old and
by occupation a Farmer, that he enlisted in the military service of the Con-
federate States (or of the State of Georgia) during the war between the
States, and served for the term of 4 yrs in Company 40, of 38th Regiment
of Cal, that his physical condition is as
follows: Infirmary and poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning
by my labor, _____ Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 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 1905.

Sworn to and subscribed before me, this _____ day of _____, 1905.

Ordinary.

State of Georgia,

County.

I, John R. Weir Ordinary of said County,
do certify that I am well acquainted with Joe M. Harte
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.

Given under my official signature and seal, this 10 day of Jan, 1905.

day of _____, 1905.
Ordinary Fulton County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavits should not be attested before January 1st, 1906.

Attest
your
hand
here

Ordinary

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1908.

Attest
your
hand
here

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1908.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____, hereby authorize
_____ of _____
to receive and receipt for the pension allowed, and request that he remit same to
_____ at _____
by _____

WITNESS my hand and seal, this _____ day of _____ 1907.

[L. S.]

Executed in presence of _____

Walter James Mc-
Fulton Co.

Once Renewed 1894.
(FOR THOSE ALREADY ENROLLED)

No. *482*

INDIGENT
SOLDIER'S PENSION
1907.

Name *Geo. W. Sparks*
County *Fulton*
Co. *16* Regiment *21st*

WARRANT ISSUED

1907.

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO

Sparks
Once W. Renewed 21st Feb. 1908, P. W. S.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

County, Fulton.
Personally appears James M. Harris 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 14th day of June 1867; that he is 67 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States and served for the term of 4 years in Company No. 33 in Regiment of Col. Infantry & Cavalry; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items: No property

of the value of _____ Dollars. I am now earning _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the _____ day of _____ 1907. John R. Williamson Ordinary. James M. Harris

State of Georgia,

Fulton County.

I, John R. Williamson Ordinary of said County, do certify that I am well acquainted with James M. Harris the applicant 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.

Given under my official signature and seal this _____ day of JAN 2 1907.

John R. Williamson Ordinary Fulton County.



Note.—This blank space must be filled.
Note.—Affidavit should not be attested before January 1st, 1907.

day of _____ 1907. }
John R. Williamson Ordinary.

State of Georgia,

Fulton. County. }

I, *John R. Williamson* Ordinary of said County,

do certify that I am well acquainted with *James M. Harris*
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.

Given under my official signature and seal this _____
day of _____ JAN 2 _____ 1907.

John R. Williamson
Ordinary Fulton County.



NOTE.—This blank space must be filled.
NOTE.—Affidavits should not be attested before January 1st, 1907.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____ of _____ County, to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 1901

Executed in presence of _____

Ordinary,

County

SEAL

Mrs. Mary Frances Waits
Widow of Andrew M. Waits
Fulton County, Ga.

No.

WIDOW'S

Indigent Pension.

1901.

Name *Mary Frances Waits*

County *Fulton*

Widow of *Andrew M. Waits*

Approved *4/22* 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

1901.

Geo. W. Harrison, State Printer, Atlanta, Ga.

Questions for Applicant.

STATE OF GEORGIA,

Fulton County.

Mrs. Mary Frances Waits of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *(Give State, County and Post Office)*
36 Ormond Street, Atlanta, Fulton County, Georgia

2. How long and since when have you been a resident of this State?
Eighty four years

3. When and where were you born?
In Newton County, Georgia May 10th 1817

4. When and where was your husband born—state his full name, and when were you and he married?
In January 1839 in Fulton Co. Ga. married April 1st 1843

5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? *Enlisted in Co. D, 1st Georgia in Capt. Alexander's Regiment*

6. How long did your husband serve in said Company and Regiment? *2 years or more*

7. When and where did your husband's Company and Regiment surrender and was discharged?
at North Carolina in April 1865

8. Was your husband present at the time and place when his Company and Regiment surrendered?
Yes

9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority?

10. When and where did your husband die? *In Atlanta Ga. Jan'y 24th 1893.*

11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmary and Poverty, or Third—Blindness and Poverty?
Age and poverty and also infirmity.

12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight? *In the last two years I have been physically unable to earn a support from my age and affliction with Rheumatism and have been supported by my children*

13. What has been your occupation since your husband's death? *Keeping house for myself and children with the assistance of my children*

14. How much can you earn gross, by your own exertion or labor? *Nothing*

15. What property, real or personal, or income do you have or possess, and its gross value?
None

16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1869-1900, and what disposition, if any, by sale or gift, have you made of the same? *My husband left a store house etc. which was sold under mortgage he has given upon it.*

17. In what counties did you reside in 1869 and 1900, and what property did you return for taxation?
In Fulton County, Georgia returned no property for taxation

18. How have you been supported since death of husband, and especially for 1869 and 1900?
By the labor and earnings of my children

19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? *Cost about \$1000 years, and I contributed nothing.*

20. What was your employment during 1869 and 1900—how much did you receive for each year?
I did light work in the house as a member of the family and received nothing except food and clothing

21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? *4 children. They work for a living. They have no property.*

22. Have you ever made an application for pension before? *No*

23. How many applications have you made for a Pension, and under what class? *None*

Sworn to and subscribed before me this *11* day of *March* 1901.
John R. Wilkinson Ordinary,
Fulton County.

Questions for Witnesses.

STATE OF GEORGIA,

Fulton County.

James A. Deaton of said State and County, having been presented as a witness in support of the Application of Mrs. Mary Frances Waite for a Pension under the Act of 1900, and after having been duly sworn, true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? James A. Deaton, Reside in Atlanta Ga. at No. 41 Maple Street.

2. Are you acquainted with the applicant, Mrs. Mary F. Waite. If so, how long have you known her? Yes - about 35 years.

3. Where does she reside, and how long and since when has she been a resident of this State? All her life in Georgia, now lives at 36 Cornhill St. Atlanta.

4. When and where was she born? In Savannah Ga. State of Georgia.

5. Were you ever acquainted with her husband? Yes.

6. Where did he reside in 1861? In Fulton County, Georgia.

7. When and to whom was he married? Mary Frances Waite, 1863.

8. When and where was he born? In Fulton County, Ga. date 3rd March 1837.

9. How long have you known him? forty years.

10. When and where did Andrew W. Waite enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this? He enlisted in the 1st Georgia Cavalry Company in 1862.

11. Were you a member of the same Company and Regiment? Yes.

12. How long did he perform regular military duty? 3 years or more.

13. When and where was his Company and Regiment surrendered and discharged from service? In April 1865 in North Carolina.

14. Were you with the command when it surrendered? Yes, I was with the day before.

15. Was Andrew W. Waite the husband of applicant present? Yes.

16. If not present, where was he?

17. When and where did he leave his Command?

For what cause? By whose authority he left?

How do you know all this? (State fully and clearly) He was present the day before the surrender because he had been there before.

18. When and where did Andrew W. Waite die? In Atlanta Ga. January 10th 1893.

19. Where did he reside at his death and how long had he been a resident of Georgia at his death? He resided at 197 Cedar St. Atlanta. Ga. in Georgia all his life.

20. Do you of your own knowledge know that applicant is the lawful widow of Andrew W. Waite. Yes.

21. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes.

22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? None that I know of.

23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? She had none.

24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? None that I know of.

25. What is applicant's physical condition and her chances and ability to earn a support? Bad.

Sworn to and subscribed before me this 10th day of March 1901.
John R. Wilkinson Ordinary,
of Fulton County.

26. Is applicant able to earn a support at labor of any sort, if not why? No. Because of old age and rheumatism.
27. How was she supported for 1899 and 1900? By her children.
28. How much did applicant contribute to her support for last two years? Nothing.
29. Give a full and complete statement of applicant's physical condition? She is old and has rheumatism.
30. What interest have you in the recovery of this pension by the applicant? None whatever.

Sworn to and subscribed before me this 11th day of March 1901.
John R. Wilkinson Ordinary,
of Fulton County.
Witnesses: J. A. Deaton

Affidavits of Physicians.

STATE OF GEORGIA,

Fulton County.

Personally before me comes George A. Vison and H. M. Young both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. Mary Frances Waite applicant for Pension under Act of 1900, and after such personal examination say that her physical condition is this: She is of constant suffering from Rheumatism, she is feeble and unable to do any work of any kind. She is broken down in health and can not earn a living at any work or calling.

Sworn to and subscribed before me this 11th day of March 1901.
John R. Wilkinson Ordinary,
of Fulton County.
Witnesses: George A. Vison, H. M. Young

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary in and for said county, hereby certify that the applicant, Mrs. Mary Frances Waite resides in said county, and has been a bona fide resident of this State since May day of 10th 1847, and that the witnesses, Mr. J. A. Deaton are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same were signed and subscribed.

I further certify that the tax digest of Fulton county shows that applicant returned for taxation in her own name in 1899 dollars worth of property, and in 1900 dollars worth of property.

Witness my hand and official seal, this 11th day of March 1901.
John R. Wilkinson Ordinary,
of Fulton County.

SEAL
Notes—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 24th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.

whom? and
25. What is applicant's physical condition and her chances and ability to earn a support?

and the evidence you shall give will be the evidence in the case.
2. Additional affidavits may be attached. If blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
5. Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County. }

I,

hereby authorize

of

to receive and receipt for the pension paid hereon, and request that he remit same to

at

In Witness Whereof, I have hereunto set my hand and seal, this

day of 1902.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA.

County. }

I,

hereby authorize

of

to receive and receipt for the pension paid hereon, and request that he remit same to

at

In Witness Whereof, I have hereunto set my hand and seal, this

day of 1903.

[L. S.]

Executed in the presence of

Mary F. White
Fulton Co.
To Those Herebefore Paid.

1902.

No. 5

INDIGENT WIDOW'S PENSION,
For year ending Dec. 31, 1902.

Mrs. Mary F. White
Widow of Andrew M. White
Fulton County,
Co. 1 Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/10 1902

AND HANDLED TO
1/10

Mary F. White
Fulton Co.
To Those Herebefore Paid.

1903.

No. 94

INDIGENT WIDOW'S PENSION,
For year ending Dec. 31, 1903.

Mrs. Mary F. White
Widow of Andrew M. White
Fulton County,
Co. 1 Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/10 1903

AND HANDLED TO
1/10

STATE OF GEORGIA

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS

Form No. 1.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

County of

Fulton.

PERSONALLY COMES MRS.

Mary F. Waits

who, being sworn, says on oath, that she is a bona fide resident of said County of

Fulton.

State of Georgia, and that she has resided in said State

continuously ever since *1848* That she is the Widow of

Andrew M. Waits
Capt. Haverstick Artillery

who was a soldier in Company

Regiment of *4th*

Volunteers, that he enlisted in said regiment on or about the month of

186 *3 years or more* 186 That he died

on the *24th* day of *Jan* 18 *93*

Age infirmity & poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 *63*

Fulton.

I have been allowed an Indigent pension as a resident of

County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the year ending December 31, 1902

Sworn to and subscribed before me, this *13* day of *January* 1902

John R. Wilkinson Post Office

State of Georgia

Fulton.

County.

Ordinary of said County, certify that I am well acquainted with Mrs. *Mary F. Waits* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 *48*

Given under my official signature and seal, this the *13* day of *January* 1902.

Official Seal. *John R. Wilkinson* Ordinary of **Fulton.** County.

NOTE.—All blanks must be filled. Vouchers and affidavits must bear date after January 1st, 1903.

Form No. 1.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

County of

Fulton.

PERSONALLY COMES MRS.

Mary F. Waits

who, being sworn, says on oath, that she is a bona fide resident of said County of

State of Georgia, and that she has resided in said State

continuously ever since *1848* That she is the Widow of

Andrew M. Waits

who was a soldier in Company

of the *Artillery* Regiment of *4th*

Volunteers, that he enlisted in said regiment on or about the month of

186 *3 years or more* 186 That he died

on the *24th* day of *Jan* 18 *93*

A. F. P.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 *63*

I have been allowed an Indigent pension as a resident of **Fulton.**

County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me, this *22* day of *JAN* 1902.

Mary F. Waits Ordinary. Post Office

State of Georgia.

Fulton.

County.

Ordinary of said County, certify that I am well acquainted with Mrs. *Mary F. Waits* who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18 *48*

Given under my official signature and seal, this the *22* day of *Jan* 1902.

Official Seal. *John R. Wilkinson* Ordinary of **Fulton.** County.

NOTE.—All blanks must be filled. Vouchers and affidavits must bear date after January 1st, 1903.

NOTE: All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____
In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____, 1904.

(L. S.)

Executed in presence of _____

Walter Mary F.
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. _____

INDIGENT
WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

Widow of Andrew Smith
Co. 4th Ga. Inf.

Fulton. County.

John W. Lindsey,
Commissioner of Pensions.

WARRANT ISSUED

AND RETURNED TO

432 1904.
off

Geo. W. Smith, State Printer, Atlanta.

Walter Mary F.
Fulton County
TO THOSE HERETOFORE PAID.

1905.

No. *49*

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905.

Widow of Andrew Smith
Co. 4th Ga. Inf.

Fulton. County.

John W. Lindsey,
Commissioner of Pensions.

WARRANT ISSUED

AND RETURNED TO

430 1905.
off

Geo. W. Smith, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize
_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____
In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____, 1905.

(L. S.)

Executed in presence of _____

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

Fulton.

who, being sworn, says on oath that she is a bona fide resident of said County of
State of Georgia, and that she has resided in said State
continuously ever since 1848. That she is the Widow of
Andrew M. Waite who was a soldier in Company
of the Artillery Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of
1861, and served in the Army up to 3 yrs or more. That he died
on the 14th day of Jan 1893

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1863.

I have been allowed an Indigent pension as a resident of Fulton
County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the
year ending December 31, 1904.

Sworn to and subscribed before me,
day of JAN 22 1904.

State of Georgia,

County of Fulton. Ordinary of said County, certify that I am well
acquainted with Mrs. Mary J. Waite 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 1848.

Given under my official signature and seal, this the 22 day of JAN 1904.



NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES MRS.

Fulton.

who, being sworn, says on oath, that she is a bona fide resident of said County of
State of Georgia, and that she has resided in said State
continuously ever since 1860. That she is the Widow of
Andrew Waite who was a soldier in Company
of the Hamilton Artillery
Volunteers, that he enlisted in said regiment on or about the month of
1861, and served in the Army up to 3 years. That he died on
the 14th day of Jan 1893.

Indigent and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1863.

I have been allowed an Indigent pension as a resident of Fulton
County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the
year ending December 31, 1905.

Sworn to and subscribed before me,
day of JAN 2 1905.

State of Georgia,

County of Fulton.

Ordinary of said County, certify that I am well
acquainted with Mrs. Mary J. Waite 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 1860.

Given under my official signature and seal, this the 22 day of JAN 1905.

Official
Seal.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____, hereby authorize

of _____

to receive and receipt for the pension paid hereon, and request that he remit same to

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1906.

[L. S.]

Executed in presence of _____

Wanda Mary F.
Fulton County
To Those Herebefore Paid

1906.

No. 624

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO
Mr. Mary F. Wanda

of

Fulton

County,

Widow of Andrew Wanda

Co. 1st Regt. Cavalry

Confederate Army

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

4/9 1906.

AND HANDLED TO

C. F. H.

See Statute Relating to Affidavits, Sec. 17, Art. 1, Sec. 1.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____, hereby authorize

of _____

to receive and receipt for the pension paid hereon, and request that he remit same to

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1907.

[L. S.]

Executed in presence of _____

Wanda Mary F.
Fulton County

To Those Herebefore Paid.

1907.

No. 110

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

Mr. Mary F. Wanda

of

Fulton

County,

Widow of Andrew Wanda

Co. 1st Regt. Cavalry

Confederate Army

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

4/11 1907.

AND HANDLED TO

C. F. H.

See Statute Relating to Affidavits, Sec. 17, Art. 1, Sec. 1.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES Mrs.
County of Fulton } Mary F. Waits

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since 1853. That she is the Widow of Andrew Waits who was a soldier in Company of the 1st Regiment of Artillery Volunteers, that he enlisted in said regiment on or about the month of 1861, and served in the Army up to 1865. That he died on the 24th day of January, 1865.

Infirmity and poverty.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1863.

I have been allowed an indigent pension as a resident of Fulton County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this JAN 1 day of JAN, 1907.
John R. Wilkinson Ordinary. Post Office Atlanta.

State of Georgia, }
Fulton County, }
I, John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. Mary F. Waits, 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 1853.

Given under my official signature and seal, this 1st day of JAN, 1907.

Official Seal

NOTE—All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1907.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, } PERSONALLY COMES Mrs.
County of Fulton } Mary F. Waits

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has RESIDED in said State continuously ever since 1853. That she is the Widow of Andrew Waits who was a soldier in Company of the 1st Regiment of Artillery Volunteers, that he enlisted in said regiment on or about the month of 1861, and served in the Army up to 1865. That he died on the 24th day of January, 1865.

Infirmity and poverty.

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1863.

I have been allowed an indigent pension as a resident of Fulton County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this JAN 2 day of JAN, 1907.
John R. Wilkinson Ordinary. Post Office 25 Spruce St.

State of Georgia, }
Fulton County, }
I, John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. Mary F. Waits, 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 1853.

Given under my official signature and seal, this 2nd day of JAN, 1907.

Official Seal

NOTE—All blanks must be filled. Vouchers and Affidavits must bear date after January 1st, 1907.

County, under Act 1800, for the year 1906, and how apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me
this JAN 1 day of JAN 1906.
John R. Wilkinson Ordinary.
Post Office Atlanta.

I, John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. Mary F. Warts 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 1893.

Given under my official signature and seal, this 1 day of JAN 1906.

Official Seal

NOTE—All affidavits must be filed.
Vouchers and Affidavits must bear date after January 1st, 1907.

Sworn to and subscribed before me
this JAN 2 day of JAN 1907.
John R. Wilkinson Ordinary.

Mrs. Mary F. Warts
Post Office 25 Spring St.

State of Georgia,
Fulton County.

I, John R. Wilkinson Ordinary of said County, certify that I am well acquainted with Mrs. Mary F. Warts who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18.

Given under my official signature and seal, this the 2 day of JAN 1907.

Official Seal

John R. Wilkinson
Ordinary of Fulton County.

NOTE—All affidavits must be filed.
Vouchers and Affidavits must bear date after January 1st, 1907.

Nails, Edmund
Fulton Co

No. *781*

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCTOBER 31, 1889

PAGE

Left leg & crutch
Applicant *John R. Nails*

County *Fulton*

Amount *50*

Date of Warrant *July 21*

Entered on record *July 21 1889*

781 A

ROBERTSON EXECUTIVE DEPARTMENT

Applicant

Waiter Thomas
Hulton Co.

No. 781
APPLICATION FOR ALLOWANCE
FOR YEAR ENDING OCTOBER 31, 1889
Applicant
Waiter Thomas
County
Fulton
Amount
50
Date of Warrant
July 21
Entry on record
July 21, 1889
RECEIVED EXECUTIVE DEPARTMENT.

officer

STATE OF GEORGIA,

County, }
PERSONALLY appears Thomas H. Waits of Fulton county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the 24th day of October 1882; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company I, of 42nd Regiment of Volunteers, Stovall's Brigade; that whilst engaged in such military service, at the battle of Gaithers Creek in the State of Miss on the 16th day of May 1863, he was wounded as follows: by pieces of shell or shrapnel missiles from the internal Musketballs of left leg above the ankle, and as a result of said injury there is a constant discharge of matter, there is considerable swelling, and pain in said limb, rendering it substantially or essentially useless, also in the past will have, of the State of Georgia, in the same service on Dec 14, 1864, being wounded in the left arm by a piece of shell rendering it substantially or essentially useless. Dependent desires to participate in the benefits of the Act, approved October 24, 1887, and the Act amendatory thereof, approved December 24, 1888, and makes application for the allowance to which he is entitled for the year ending October 26, 1889.

Sworn to and subscribed before me, this the 21st day of February 1889
W. B. McCallum
NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

STATE OF GEORGIA,

County, }
PERSONALLY comes before me W. B. McCallum Ordinary of said county, Dr. H. C. Divine and J. M. Duncan both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined Thomas H. Waits and after such examination say that the applicant has been injured as follows: The left arm and by a fracture of radius near the wrist joint, and involving said joint, rendering the said limb substantially or essentially useless, also left leg just above internal Musketballs there is an injury producing by puncture, laceration and ulceration attended by a constant discharge, rendering the said limb substantially or essentially useless. Sworn to and subscribed before me, this the 21st day of February 1889
W. B. McCallum
ORDINARY.
J. M. Duncan M.D.
H. C. Divine M.D.

READ NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

STATE OF GEORGIA,

Fulton County.

I, *W. L. Leachman* Ordinary of said county, do certify that I am well acquainted with *Thomas R. Travis* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit: *J. M. Duncan and R. L. Divine*

are persons of respectability, and that their statements are worthy of full credit and belief

I further certify that *_____* before whom the foregoing affidavits were made and power of attorney was signed, is a *_____* of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *21st* day of *February*, 188*9*

W. L. Leachman
(Ordinary *Fulton* County.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County

Know all Men by these Presents, That I, _____ of _____

county, in said State, do hereby appoint _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this _____

day of _____

188 _____

(L. S.)

Executed in the presence of us: _____

DIRECTION:

Send money to me as follows, by _____

to _____

P. O. _____

County, Georgia.

NOTES.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.
3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
4. If the applicant is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.
6. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made under oath before an officer, and the proofs must show that the amendments have been duly sworn to.
7. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

STATE OF GEORGIA

Fulton County.

I, W. L. Leathrum Ordinary of said county, do certify that I am well acquainted with Thomas R. Maule the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, as a of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 9 day of February 1890

Ordinary

Fulton County.

STATE OF GEORGIA,

Fulton County.

I, W. L. Leathrum Ordinary of said County, do certify that I am well acquainted with Thomas R. Maule the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 9 day of Feb 1890

Ordinary

Fulton County.

Waiter, Thomas R.
Fulton Co.

1890.

Maule, Thomas R.

APPLICATION FOR ALLOWANCE.

Applicant, Thomas R. Maule

County, Fulton

Amount, 50

Date of warrant, Feb 9

Signed on record Feb 9

W. L. Leathrum

Ordinary

Applicant

Waiter, Thomas R.
Fulton Co.

1891.

Waiter, J. B.

PAID 1891, 40

Application for Allowance

Applicant, Thomas R. Maule

County, Fulton

Date of Warrant, Feb 9

Amount, 50

Signed on record Feb 9

W. L. Leathrum

Ordinary

Applicant

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.
PERSONALLY appears *Thomas H. Marts* of *Fulton* county, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such continually since the *first* day of *18*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *F*, of *42*th Regiment of *Georgia* Volunteers *Henderson*'s Brigade; that whilst engaged in such military service, at the battle of *Bakers Creek* in the State of *Georgia*, on the *14*th day of *December*, 1864, he was wounded as follows: *at Bakers Creek in the left ankle and at Bakers Creek in the left arm by a shot that removed the bone and wound reaching his left arm essentially and substantially maimed & the leg broken by a musket ball passing the arm of the arm*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of *2.40* dollars.

Sworn to and subscribed before me, this *1*th day of *February*, 1890.

W. L. Gathright
NOTE. State fully nature of wound or disease which causes the disability; and explain particularly the extent of the disability.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.
KNOW ALL MEN BY THESE PRESENTS, That I,

of *Fulton* county, in said State, do hereby appoint

my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *1*th day of *February*, 1890.

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

Fulton County, Georgia.

[L. S.]

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears *Thomas H. Marts* 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 *first* day of *18*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *F*, of *42*th Regiment of *Georgia* Volunteers *Henderson*'s Brigade; that whilst engaged in such military service at the battle of *Bakers Creek* in the State of *Georgia*, on the *14*th day of *December*, 1864, he was wounded as follows: *at Bakers Creek in the left ankle and at Bakers Creek in the left arm by a shot that removed the bone and wound reaching his left arm essentially and substantially maimed & the leg broken by a musket ball passing the arm of the arm*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of *2.40* dollars, for *any and all years*.

Sworn to and subscribed before me, this *1*th day of *February*, 1891.

W. L. Gathright
NOTE. State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

Know all Men by these Presents, That I,

of *Fulton* County, State of Georgia, do hereby appoint

my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit, hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *1*th day of *February*, 1891.

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

Fulton County, Georgia.

P. O.

Send money to me as follows, by

P. O.

County, Georgia.

STATE OF GEORGIA.

Fulton County.

I, *W. L. Latham*, Ordinary of said county, do certify that I am well acquainted with *Thomas J. Waits* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this *4th* day of *March* 1892.

W. L. Latham
Ordinary *Fulton* County.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name *Thos J Waits*
County *Fulton*
Disability *Dis' Arm*
Amount \$ *50*
Entered on record *Mar 14* 1892.

W. H. HARRISON,
Surgeon General, Department

AGENT

applicant

One W. Harrison, State Printer, Albany, Ga.

POWER OF ATTORNEY.
STATE OF GEORGIA.

Fulton County.

Know all Men by these Presents, That I, *Thomas J. Waits*, of *Fulton* County, State of Georgia, do hereby appoint

W. L. Latham my true and lawful attorney in fact, for the purpose of receiving 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 execute 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 *4th* day of *March* 1892.

Executed in the presence of us:

W. L. Latham

Send money to me as follows, by

Fulton County, Georgia.

Waits J. H.
Fulton Co
1893

Application for Advancement
No. *127*
Disability *Dis' Arm*
Amount *50*
Entered on record *Mar 14* 1892.
W. H. HARRISON, Surgeon General, Department

STATE OF GEORGIA.
FOR APPLICANTS HEREFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

on the State of Illinois 1863, he was wounded as follows: Phill
December 1864, he was wounded as follows: Phill
 Wounded by Left arm at Oratom the
Left hand reaching his Left arm
Voluntarily and essentially useful
War, also Wounded in Left hand and
his finger on the 13th May 1863

Sworn to and subscribed before me this 12th day of July 1891

8. L. to all known Ordinary

POWER OF ATTORNEY.

County

County, in said State, do hereby appoint

IN WITNESS WHEREOF, I have hereunto set my hand and seal this

DIRECTION.

19

County, Georgia.

Fuller County.

Deponent desired to participate in the benefits of the Act, approved October 3rd, 1887, and the acts amendatory thereof, and making application for the allowance to which he is entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of,

14 day of March 1893.

NOTE—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

2 AUG 1964

the foregoing affidavits were made and power of attorney was signed, is a

Given under my official signature and seal, this 29 day of April, 1964.

STATE OF GEORGIA
 COMMISSIONER OF AGRICULTURE

Send money to me as follows, by

to

P. O.

County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA
COUNTY, }
Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of 1894.

Executed in the presence of us

DIRECTIONS

Send money to me as follows, by

to
County, Georgia.

(For These Already Enrolled.)

Soldier's Pension.
1894.

Name Thomas K. Telle
County Fulton
Disability Disabled
Amount, \$ 50.
3/2

1894.
W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDLED TO

affidavit

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

KNOW ALL MEN BY THESE PRESENTS, That I, of

County, State of Georgia, do hereby appoint

of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of 1895.

Executed in presence of us

DIRECTIONS

Send money to me as follows, by

to
County, Georgia.

P. O.

(For These Already Enrolled.)

SOLDIER'S PENSION.
1895.

Name Thomas K. Telle
County Fulton
Disability Disabled
Amount, \$ 50.
3/4

1895.
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDLED TO

affidavit

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County, }

PERSONALLY appears Thomas K. Waits 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 October 18 33; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company I, of 42nd Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service at the battle of Nashville in the State of Tenn, on the 15th day of December 1864, he was wounded as follows: Small wound of left arm at elbow the left wrist rendering his left arm substantially and essentially useless, and
also wounded in left leg just above his ankle on the 15th May
1863

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the act amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of fifty dollars, for the year 1893.

Sworn to and subscribed before me, this 11th day of March 1894.

W. L. Calhoun Ordinary

Note—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }
Fulton County, }

I, W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with Thomas K. Waits the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 11th day of March 1894.



W. L. Calhoun

Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Fulton County, }

PERSONALLY appears Thomas K. Waits 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 October 18 32; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company I, of 42nd Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service at the battle of Nashville in the State of Tenn, on the 15th day of December 1864, he was wounded as follows: Small wound of left arm at elbow the left wrist rendering his left arm substantially and essentially useless, and
wounded in left leg just above his ankle on the 15th May 1863

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the act amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of fifty dollars, for the year 1894.

Sworn to and subscribed before me, this 11th day of March 1895.

W. L. Calhoun Ordinary

Note—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, }
Fulton County, }

I, W. L. Calhoun Ordinary of said County, do certify that I am well acquainted with Thomas K. Waits the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 11th day of March 1895.



W. L. Calhoun

Ordinary Fulton County.

Mr. L. C. Johnson
Ordinary _____ County.

Ordinary _____ Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, _____

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1896. [L. S.]

Executed in presence of us _____

Walter H. H.
Fulton Co.
NOTARY PUBLIC, N.C.
(For Those Already Enrolled.)

No. 365

SOLDIER'S PENSION.
1896.

Name _____
County _____
Disability _____
Amount, \$ _____
1896
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDS TO

W. H. H.
W. H. H.

W. H. H.
W. H. H.
(For Those Already Enrolled.)

No. 782

INVALID
SOLDIER'S PENSION.
1897.

Name *W. H. H.*
County *Fulton*
Disability *Secretary Executive Department*
Amount, \$ *57.00*
1897.

3/12

RICHARD JOHNSON,

WARRANT HANDS TO

W. H. H.

NOTARY PUBLIC, N.C.

NOTARY PUBLIC, N.C.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.

Personally appears Thomas F. Waits 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 24th day of October 1870; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company T, of 2nd Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Tennessee, on the 15th day of December 1864, he was wounded, injured or diseased as follows: Small round of lead hit at or above the left wrist rendering his left arm completely livid and essentially useless, was also, wounded in left leg just above his ankle on the 15th day 1865

Dependent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 20th, 1896. I have heretofore as a resident of Fulton county been allowed a pension of Fifty dollars, for the year 1895.

Sworn to and subscribed before me, this, the 26th day of February, 1896.

M. L. Calhoun Ord.
Note—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,
Fulton County.

I, M. L. Calhoun Ordinary of said County, do certify that I am well acquainted with Thomas F. Waits the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 26th day of February, 1896.



M. L. Calhoun
Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.

Personally appears Thomas F. Waits 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 24th day of Oct 1870; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company T, of 2nd Regiment of Georgia Volunteers, Stovall's Brigade; that whilst engaged in such military service in the State of Penn, on the 16th day of Dec 1864, he was wounded, injured or diseased as follows:

Small round of lead hit at or above the left wrist rendering his left arm completely livid and essentially useless, was also, wounded in left leg

Dependent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 20th, 1897. I have heretofore under said law as a resident of Fulton county been allowed an invalid pension of Fifty Dollars, for the year 1896 of Thomas F. Waits

Sworn to and subscribed before me, this, the 26th day of February, 1897.

Note—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,
Fulton County.

I, M. L. Calhoun Ordinary of said County, do certify that I am well acquainted with Thomas F. Waits the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 26th day of February, 1897.



M. L. Calhoun
Ordinary Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of _____

to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____, 1898.

[L. S.]

Executed in presence of _____

NOTARY PUBLIC

(For Those Already Enrolled.)

No. 2310

INVALID

SOLDIER'S PENSION.

1898.

Name E. C. Hart

County Fulton

Disability relieved by

Amount, \$ 224 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

appt

No Date

Hart E. C.
County Fulton

(FINE SECTION 124)

(For Those Already Enrolled.)

No. 1932

INVALID

SOLDIER'S PENSION.

1898.

Name J. H. Harris

County Fulton

Disability relieved by

Amount, \$ 24.5 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDLED TO

appt

(FINE SECTION 124)

No Date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____, 1898.

[L. S.]

Executed in presence of _____

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *J. K. Waite* 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 *24* day of *Oct* 18*72*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *C*, of the *11th* Regiment of *Georgia* Volunteers, *Stogall's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *16* day of *Dec* 18*64*, he was wounded, injured or diseased as follows:

*Shell wound on left arm
under arm, under
also wounded in left leg.*

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 29th, 1898. I have heretofore under said law as a resident of *Fulton* County been allowed an invalid pension of *4* Dollars, for the year 18*97*.

Sworn to and subscribed before me, this, *J. K. Waite* day of *Feb* 1898. POST-OFFICE.

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, *M. A. Hucutt*, Ordinary of said County, do certify that I am well acquainted with *J. K. Waite* 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 *24* day of *Feb* 1898.



Ordinary *Fulton* County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears *J. K. Waite* 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 *24* day of *Oct* 18*72*; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *C*, of the *11th* Regiment of *Georgia* Volunteers, *Stogall's* Brigade; that whilst engaged in such military service in the State of *Georgia*, on the *16* day of *Dec* 18*64*, he was wounded, injured or diseased as follows:

Wounded on left arm & leg.

Deponent makes application for the pension to which he is entitled for the year ending October 29th, 1898. I have heretofore under said law as a resident of *Fulton* County been allowed an invalid pension of *4* Dollars, for the year 18*97*.

Sworn to and subscribed before me, this, *J. K. Waite* day of *Feb* 1898. POST-OFFICE.

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, *M. A. Hucutt*, Ordinary of said County, do certify that I am well acquainted with *J. K. Waite* 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 *24* day of *Feb* 1898.



Ordinary *Fulton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County }

I, _____ hereby authorize _____
of _____
to receive and receipt for the pension paid hereon and request that he remit same to
by _____
at _____
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of _____ 1900. [L. S.]

Executed in presence of _____

COUS. SECTION 12A.
(For Those Already Enrolled.)

No. 537

**INVALID
SOLDIER'S PENSION.
1900.**

Name J. K. Maile
County Fulton
Disability _____
Amount, \$ 50.00
Warrant issued July 8 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO

1900
JOHN W. LINDSEY, Commissioner of Pensions.

Warrant etc.
With S. G. - Fulton County
Fulton 1900
COUS. SECTION 12A.
(For Those Already Enrolled.)

No. 239

**DISABLED
SOLDIER'S PENSION.
1901.**

Name J. A. Waite
County FULTON
Disability Remanded in case and by
Amount, \$ 50.00

July 18 1901.
JOHN W. LINDSEY
Commissioner of Pensions.

WARRANT HANDLED TO

1901
JOHN W. LINDSEY, Commissioner of Pensions.

maile

OF CERTAIN

for applicants heretofore allowed pensions

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears J. H. Wailes of Fulton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the 4 day of Oct 1836, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 3, of 42th Regiment of Volunteers, Stonewall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 16 day of Dec, 1864, he was wounded, injured or diseased as follows:

Wounded left arm & leg

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1900. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of \$ 50.00 Dollars, for the year 1899.

Sworn to, and subscribed before me, this, 18 day of Jan, 1900. POST OFFICE

M. H. Halcup

Note.—State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, M. H. Halcup Ordinary of said County, do certify that I am well acquainted with J. H. Wailes the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 18 day of Jan, 1900.



Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears J. H. Wailes 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 24 day of Dec 1836, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 3, of 42th Regiment of Volunteers, Stonewall's Brigade; that whilst engaged in such military service in the State of Georgia, on the 6 day of Dec, 1864, he was wounded, injured or diseased as follows:

Wounded left arm & leg

Deponent makes application for the pension to which he is entitled for year ending October 28th, 1901. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of \$ 50.00 Dollars, for the year 1899.

Sworn to and subscribed before me, this the 18 day of Jan, 1901. Postoffice

Note.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, John R. Williamson Ordinary of said County, do certify that I am well acquainted with J. H. Wailes the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 18 day of Jan, 1901.



Ordinary FULTON County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

to receive and receipt for the pension paid hereon and request that he remit same to _____ by _____

at _____
IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____ day of _____ 1902.

[L. S.]

Executed in presence of _____

Waits, J. H.
*Fulton Co*COOK ACTING CLERK
(FOR THOSE ALREADY ENROLLED.)No. *164*DISABLED
SOLDIER'S PENSION
1902.Name *J. H. Waits*
County *Fulton*Co. _____ Regiment *4th*

Disability caused by _____

Amount, \$ *50.00*

1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO _____

J. H.
JOHN W. LINDSEY, STATE PRINTER, ATLANTA.*No Data**Waits, J. H.*
*Fulton County*COOK ACTING CLERK
(FOR THOSE ALREADY ENROLLED.)No. *164*DISABLED
SOLDIER'S PENSION
1903.Name *J. H. Waits*
County *Fulton*Co. _____ Regiment *4th*

Disability caused by _____

Amount, \$ *50.00*

1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO _____

J. H.
JOHN W. LINDSEY, STATE PRINTER, ATLANTA.*No Data*

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears J. K. Waite 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 24 day of Oct 1832; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a private in Company D of 42nd Regiment of Ga Volunteers, Stovall's Brigade, that whilst engaged in such military service in the State of Ga on the 6 day of Dec 1864, he was wounded, injured or diseased as follows:

Wounded in left arm & leg

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1902. Fulton. County, been allowed an invalid pension of

Eighty Dollars, for the year 1901

Sworn to and subscribed before me, this the 13th day of JAN 1902, at Stark Post-office

Note.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,
Fulton. County.

I, John R. Wellman, Ordinary of said County,

do certify that I am well acquainted with J. K. Waite the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this day of JAN 1902, 1902.



John R. Wellman

Fulton. County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

I, County.

Personally appears, J. K. Waite 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 24 day of Oct 1832; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a private in Company D of 42nd Regiment of Ga Volunteers, Stovall's Brigade, that whilst engaged in such military service in the State of Ga on the 6 day of Dec 1864, he was wounded, injured or diseased as follows:

Wounded in left arm & leg

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of 50 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 13th day of JAN 1903.

Post-office Stark

Note.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,
County.

I, County. Ordinary of said County,

do certify that I am well acquainted with J. K. Waite the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this day of JAN 1903.



County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County. }

hereby authorize

I,

of

to receive and receipt for the pension paid hereon, and request that he remit same to

by

at

In WITNESS WHEREOF, I have hereunto set my hand and seal, this

day of

1904

[L. S.]

Executed in the presence of

Walter J. R.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

COPIES RETURNED 1200

No. 40

DISABLED

SOLDIER'S PENSION

1904.

Name T. H. White

County Fulton

Co. I

Disability 100%

Amount, \$ 40.00

1904

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. HARTMAN, State Printer, Atlanta

no date

Walter J. R.
Fulton County

(FOR THOSE ALREADY ENROLLED.)

COPIES RETURNED 1200

No. 419

DISABLED

SOLDIER'S PENSION

1905.

Name T. H. White

County Fulton

Co. I

Disability 100%

Amount, \$ 50.00

1905

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H. FULTON

no date

POWER OF ATTORNEY.

STATE OF GEORGIA.

County. }

hereby authorize

I, D. H. White

of Fulton

to receive and receipt for the pension paid hereon, and request that he remit same to

by

at

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 20

day of January

1905.

[L. S.]

Executed in the presence of

J. P. Kimbrell, J. P.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears T. K. Waits 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 24 day of Oct 1832 that he enlisted in the military service of the Confederate States (or of the State of Geo) during the war between the States, and served as a Private in Company 3 of 42th Regiment of Geo Volunteers Straw's Brigade; that whilst engaged in such military service in the State of Geo, on the 6 day of Dec 1864, he was wounded, injured or diseased as follows:

Wound in left arm & leg

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 Fifty Fulton County, been allowed an invalid pension of Fifty Dollars, for the year 1903.

Sworn to and subscribed before me, this the

day of Jan 1904.

John R. Williamson Notary State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton. County.

I, John R. Williamson, Ordinary of said County, do certify that I am well acquainted with T. K. Waits the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 11 day of Jan 1904.



NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. COUNTY.

Personally appears T. K. Waits 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 24 day of Oct 1832 that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company 3 of 42nd Regiment of Geo Volunteers Straw's Brigade; that whilst engaged in such military service in the State of Geo, on the 6 day of May 1864, he was wounded, injured or diseased as follows:

Leg disabled. Baker Creek, Miss.

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 Fifty Fulton County, been allowed an invalid pension of Fifty Dollars, for the year 1904.

Sworn to and subscribed before me, this the

day of Jan 1904.

T. K. Waits Post-office

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton. COUNTY.

I, T. K. Waits, Ordinary of said County, do certify that I am well acquainted with T. K. Waits the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 11 day of Jan 1904.



Ordinary Fulton County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of _____

to receive and receipt for the pension allowed and request that he remit same to _____

at _____

by _____

Witness my hand and seal, this _____ day of _____, 190 _____

[L. 8.]

Executed in presence of _____

*Do the owners of
 the property of
 the State of Georgia
 the State of Georgia
 the State of Georgia*

INDIGENT PENSION.

1905

Name *Thos. M. Waits*

Rank *Fuller*

Company *42nd*

Regt. *190*

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDED TO _____

Fuller will write name of Applicant, Company and Regiment on back as indicated above.

W. H. Lindsey, Jan. 1, 1904

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

County.

Fuller of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *Thos. M. Waits - Atlanta Ga. 12th St. N. E. Fulton*
2. How long and since when have you been a resident of this State? *all my life*
3. When and where were you born? *in Decatur Co. Oct 24-1832*
4. When and where and in what company and regiment did you enlist or serve? *Rich 1862 (1862) in Fulton Co. Company 42nd Ga. Regt*
5. How long did you remain in such company and regiment? *Four years or about that time*
6. When and where was your company and regiment surrendered and discharged? *In or about April 1865 - near Greensboro N. C.*
7. Were you present with your company and regiment when it was surrendered? *No*
8. If not present, state specifically and clearly where you were when you left your command, for what cause and by whose authority? *In Fulton Co. Ga. wounded by heavy command near Nashville Tenn. by order of Surgeon*
9. How much can you earn (gross) per annum by your own exertions or labor? *nothing*
10. What has been your occupation since 1865? *Farming*
11. Upon which of the following grounds do you base your application for pension, viz., first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? *age + poverty*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind, and when and where you lost your sight? *Two or three years am well disabled from wounds - and am feeble from old age*
13. What property, real and personal, or income, do you possess, and its gross value? *Fifteen acres land at \$1000 per acre - income about \$2500 per year*
14. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868, 1869, 1870, 1871 and 1872, and what disposition, if any, by sale or gift, have you made of same? *no property except above 15 acres*
15. In what County did you reside during those years, and what property did you then return for taxation? *Fulton County - 15 acres - by good people helping me + the Govt*
16. How were you supported during the years 1869, 1870, 1871 and 1872? *by good people helping me + the Govt*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *about \$2500 from rent + garden*
18. What was your employment during 1868, 1869, 1870 and 1871? What pay did you receive in each year? *on own land*
19. Have you a family? If so, who composes such family? Give their means of support? Have they homestead, or other property? Their ages and how employed? *Yes - wife + 3 children - means about \$2500 - wife + 3 children - not employed by any one*
20. Are you receiving any pension? If so, what amount and for what disability? *Yes - on account of wound in right wrist - \$5000*
21. Have you ever made an application for pension before? *Yes*
22. How many applications have you ever made and under what claim? *one - under*

Sworn to and subscribed before me this _____ day of _____, 190 _____

John R. Lindsey of *Fulton* County.

Every question must be answered.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me A. H. Lindarmer M.D. and H. B. Braggs M.D., both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Thos K Warts, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Feeble from old age. Arthritic.
Arthritic.
Arthritic.
Arthritic.

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this

19 day of Sept 1901

John R. Wilkerson Ordinary

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

I, John R. Wilkerson Ordinary, in and for said County, hereby certify that the applicant Thos K Warts resides in said County, and has been a bona fide resident of this State since the day of 189.

and that the witnesses, viz: C. L. Thomas

are of trustworthy character, and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of _____ County shows that applicant returned for taxation in his name in 1899. _____ Dollars of property, and in 1900. _____ 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 19 day of Sept 1901

John R. Wilkerson Ordinary,

of Fulton County.

NOTE.

- Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
- 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,

Fulton COUNTY.

L. P. Thomas of said State and County, having been presented as a witness in support of the application of Thos K Warts for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions depose and answers as follows:

- What is your name and where do you reside? Atlanta Ga
- Are you acquainted with Thos K Warts the applicant; if so, how long have you known him? Since 1862
- Where does he reside, and how long and since when has he been a resident of this State? Fulton County, since 1862
- When, where and in what company and regiment did he enlist, and how do you know? 1862 - Moh - Co - 5 - 42nd Reg - I belonged to same
- Were you a member of the same company and regiment? I was member of same
- How long did he perform regular military duty? until Mustered out - 1864
- When and where was his command surrendered? at High Point, N.C. - 1864
- Were you present when it surrendered? Yes
- Was applicant present? He was not
- If he was not present, where was he? at home in Fulton Co. Ga
- When did he leave his command? 1864 For what cause? When Mustered out
- By what authority he left? by his Commanding Officer How do you know all of this? belong to same Regt & engaged in the same battle around Nashville
- What property, effects or income has the applicant? (Give your means of knowledge.) about 10 acres of poor land - informed by neighbor
- What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902? about same, as above
- and what disposition, if any, did he make of same? about same, as above
- Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? He has not
- What is the applicant's occupation and physical condition? Farmer - I know his age & mental state - during the war he was quite feeble
- Is the applicant unable to support himself by labor of any sort; if so, why? He is answered in No 14
- How was he supported during the years 1898, 1899, 1900, 1901 and 1902? by member of family & friends - I own efforts
- What portion of his support for those four years was derived from his own labor or income? about 2000 per year
- Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? See answer No 14
- Who composes family? What property have they? Children's age and their earning capacity? Wife & 3 children - children none under 15 - some poor land
- What interest have you in the recovery of a pension by this applicant? I have none

Sworn to and subscribed before me, this the

18 day of Sept 1901

John R. Wilkerson Ordinary.

Witness

L. P. Thomas

42nd Regt

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.

Return to and subscribed before me, this the
 18th day of Sept 1907
John W. Williamson Ordinary.

W. J. Thomas as
 Witness.
4-2-10-10

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton COUNTY, J. K. Waits hereby authorize
J. A. Shuttles of said County
 to receive and receipt for the pension paid hereon, and request that he remit same to
me by hand
 at My home

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 15
 day of Jan 1908. [L. S.]

Executed in the presence of

J. A. Shuttles

Waits, J. K.
Fulton County

COPIES SENT TO 1260
 (FOR THOSE ALREADY ENROLLED.)

No. 142

**DISABLED
 SOLDIER'S PENSION
 1906.**

Name J. K. Waits
 County Fulton
 Co. 2nd Regt.
 Disability By Soldier
 Amount, \$ 60.00

11/7 1908

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO

J. A. Shuttles

no date

Waits, J. K.
Fulton Co.

COPIES SENT TO 1260
 (FOR THOSE ALREADY ENROLLED.)

No. 80

**DISABLED
 SOLDIER'S PENSION
 1907.**

Name J. K. Waits
 County Fulton
 Co. 2nd Regt.
 Disability By Soldier
 Amount, \$ 60.00

11/7 1907

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT HANDLED TO

J. A. Shuttles

no date

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton COUNTY, J. K. Waits hereby authorize
J. A. Shuttles of Fulton County Georgia
 to receive and receipt for the pension paid hereon, and request that he remit same to
me by bringing to me
 at My House

In WITNESS WHEREOF, I have hereunto set my hand and seal, this 15
 day of Jan 1907. [L. S.]

Executed in presence of

J. A. Shuttles (J. P.)

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears J. K. Waits 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 24 day of Oct 1892; that he enlisted in the military service of the Confederate States, (or of the State of Ga) during the war between the States, and served as a Private in Company 1 of 42th Regiment of Ga Volunteers Stewart's Brigade; that whilst engaged in such military service in the State of Miss on the 16 day of May 1863, he was wounded, injured or diseased as follows:

Leg disabled, Baker Creek, Miss

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 Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 5 day of June 1906.

Post Office Stewart's Brigade

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,

Georgia Fulton County.

I, J. P. Kimbly J. P. Ordinary of said County, do certify that I am well acquainted with J. K. Waits the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 5 day of June 1906.

J. P. Kimbly J. P.

Ordinary

County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears J. K. Waits 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 24 day of Oct 1892; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company 1 of 42th Regiment of Ga Volunteers Stewart's Brigade; that whilst engaged in such military service in the State of Miss on the 16 day of May 1863, he was wounded, injured or diseased as follows:

Leg disabled, Baker Creek, Miss

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1907. I have heretofore, under said law, as a resident of Fulton County, been allowed an invalid pension of Fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 5 day of June 1907.

J. K. Waits J. K. Postoffice R. P. D. No 1 Fulton, Ga

Note.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

State of Georgia,

Fulton County.

I, J. P. Kimbly J. P. Ordinary of said County, do certify that I am well acquainted with J. K. Waits the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal this 5 day of June 1907.

J. P. Kimbly J. P. Ordinary Fulton County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1907.

AM
your
state
has

Ordinary _____ County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1908.

GEORGIA, _____ County.

I, _____, Ordinary of said county, do certify that I personally know _____, the applicant, and that she is the lawful widow of _____, and was on the _____ Pension Roll of said _____ county, and was paid a Pension from _____ county for 190 _____, and at the time of his death on the _____ day of _____ 190 _____, there was due to him and unpaid his Pension of _____ dollars from the State of Georgia, and I know _____ the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this _____ day of _____ 190 _____
Ordinary
County.

Application for Pension
Due Deceased Soldier
Under Act 1881
No. _____
1908
Fulton County
Waits, T. R.
BY
Mrs. Julia Wait
Widow of _____
of County _____
Co. _____ Reg't _____ Vols.
Approved and Paid
J. W. LINDSEY,
Commissioner of Pensions.
140

GEORGIA, Fulton County.
I hereby authorize and constitute J. A. Smith of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 190 _____, through my deceased husband J. R. Smith, who was on _____ Pension Roll and paid from _____ for 1902.
Witness my hand this 30 day of July 1908.
Attested before me:
J. P. Kinnel (J.P.)
Julia Wait

STATE OF GEORGIA. FULTON COUNTY.

Ordinary's Office, Atlanta, August 7, 1908.
I, John P. Wilkinson, Ordinary of said County, certify that Reuben whose genuine official signature appears to the annexed paper, was at the time of said signing an acting Justice of the Peace, in and for said County duly sworn and commissioned, and that his commission was dated the 15th day of December 1904 and will expire on the 15th day of December 1908, and that all his official acts as such are entitled to full faith and credit.

Given under my official signature and seal of office, the day and year above written.
John P. Wilkinson
ORDINARY

J. P. Kimberley (J.P.)

W. Julia Wait

APPLICATION FOR PENSIONS DUE DECEASED SOLDIER.

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Fulton County.

Personally before me come Mrs. Julia Wait of said county, after being duly sworn, on oath says that she is the widow of J. K. Wait who was duly enrolled as a Invalid Pensioner from the county of Fulton and was paid a Pension of Twenty Dollars from Fulton county for 1907, and that the said J. K. Wait died in Fulton county on the 10th day of July 1908, and at the time of his death a Pension of Twenty Dollars was due him from Fulton county and unpaid for 1908. Applicant further swears that she married the said J. K. Wait on the 5th day of March 1870, in Fulton county and State of Georgia and 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 20th day of July 1908
John A. Wehman ORDINARY Fulton County. X Julia Wait [L.S.]

AFFIDAVIT OF WITNESS.

GEORGIA, Fulton County.

Personally before me come B. F. Roberts, who on oath says that he knew J. K. Wait while in life and that he knows Mrs. Julia Wait the above applicant, that he knows that the said J. K. Wait and Julia Baker were in due form of law married in the county of Fulton in the State of Georgia on the 5th day of March 1870, and that they resided together as husband and wife from date of marriage to the day of his death on the 10th day of July 1908, and I now know that she is his dependant widow.

Sworn to and subscribed before me this 20th day of July 1908
John A. Wehman ORDINARY Fulton County. X B. F. Roberts
J. P. Kimberley (J.P.)

NOTE: 1st.—This form can be used by guardian of minor children where there is no widow.
 2nd.—Ordinary must send in all cases certified copy of marriage license attached.

STATE OF GEORGIA. FULTON COUNTY.

Ordinary's Office, Atlanta, Ga., Dec. 15, 1914

I, John R. Wilkinson, Ordinary of said County, certify that J. P. Kimberley, whose genuine official signature appears to the annexed paper, was at the time of said signing an acting Justice of Peace, in and for said County, duly sworn and commissioned, and that his commission was dated the 15th day of Dec. 1914 and will expire on the 14th day of Dec. 1915, and that all his official acts as such are entitled to full faith and credit.

Given under my official signature and seal of office, the day and year

above written

John R. Wilkinson
 ORDINARY

Georgia
Fulton County }
I, Mary F.
Peacock of said County, having
been presented as witness in
support of the application of Thos.
H. Waits for pension, and
after being duly sworn
true answers to make to
the following questions, deposes
and answers as follows:
My name is Mary F. Peacock
and reside at 49 Garrison
St. Atlanta Ga. am
acquainted with Thos. H. Waits
the applicant, and have known
him ^{for} ~~for~~ years - that he resides
in Wilton Co. Ga. all his life
He enlisted in Company I. 4th
Georgia Regt. in 1862, at
Big Shanty Georgia - that I saw
him go off & have heard
from the Army - that he
performed military duty
about 3 1/2 years - that he was
at home in Fulton County
wounded at the surrender
that he owns a little home
of 12 or 15 Acres; that he is
now old and infirm
and not able to work, and

② and has two or three wounds which still renders him unable to perform work and that is 72 years old; that has family consists of his wife and self; that I have no interest in his pension

Mary F. Beaud

Approved & subscribed
 to before me this
 18th Sept 1905
 H. J. Sharpshire
 Not Pub. Auction Co. Ltd

at name in
wounded at the surrender,
that he owns a little home
of 12 or 15 Acres; that he is
now old and infirm
and not able to work, and

STATE OF GEORGIA,
FULTON COUNTY.

Ordinary's Office, Atlanta, Jan. 17th 1907

I, John R. Wilkinson, Ordinary of said County,
certify that D. P. Kimberly whose genuine
official signature appears to the annexed paper, was at the time of
said signing an acting Justice of Peace, in and
for said County, duly sworn and commissioned, and that his com-
mission was date the 15th day of Dec. 1904
and will expire on the 14th day of Dec. 1908,
and that all his official acts as such are entitled to full faith and
credit.

Given under my official signature and seal of office, the day and year
above written.

John R. Wilkinson
ORDINARY

NAME, Waite, Thos. K.

WHEN AND WHERE BORN?

ENLISTED WHEN AND WHERE?

COMPANY AND REGIMENT? Private, Co. I, 42d Regiment Ga. Vols.
Stovall's Brigade.

NAME OF CAPTAIN AND COLONEL?

WOUNDS? Bakers Creek Miss., May 16, 1863 shot in left leg below knee
At Nashville Tenn., Dec. 14, 1864 shot in left arm below elbow.

OFFENSES, WHEN AND WHERE?

RELEASED,

WHEN AND WHERE UNDER SENTENCE?

IF NOT PRESENT AT SURRENDER, WHERE AND WHY?

DIED, WHEN AND WHERE?

BURIED,

WITNESSES, None.

P.O. 1869

COUNTY. Fulton

above written.

John R. Williams
ORDINARY.

WITNESSES, None.

P.O. 1889

COUNTY. Fulton

Audited

1889.

COMPTROLLER GENERAL

Fulton

Maimed Soldiers.

Voucher No. *781*

Amount \$ *50.*

Paid to *Thos K Wadts*
For *Left leg disabled*

July 21 1889

Included in Warrant No.
issued to Treasurer.

1889

WARRANT CLERK

W. J. Campbell, State Printer, Constitution Job Office

Applicant

Audited

Feb. 5 1890
Wm S Wright
COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. *826*

Amount \$ *50.*

Paid to *Thos K Wadts*
For *Left leg disabled*

July 5 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK

W. J. Campbell, State Printer, Constitution Job Office

Applicant

STATE OF GEORGIA.
EXECUTIVE DEPARTMENT.

No. 781.
Atlanta, Ga. Feb'y 21 1889

Mr. Thomas H. Waite of the County
of Fulton having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act.

Dec. 24, 1888, and the same having been allowed for
Left leg disabled 4 1/2 Dollars
He is entitled to receive the sum of \$4 1/2 Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

The Treasurer will pay the same and hold his receipt on this voucher, and return same to
Executive Department for warrant.

By the Governor
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

50.
RECEIVED OF STATE TREASURER, R. U. HARDEMAN.
Fifty 00 01 Dollars.
per above voucher, this 21 of Feb'y 1889.
Thomas H. Waite

STATE OF GEORGIA.
EXECUTIVE DEPARTMENT.

No. 926
Atlanta, Ga. Feb'y 5 1890

Mr. Thomas H. Waite of the County
of Fulton having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act.

approved, Dec. 24, 1888, and the same having been examined and allowed for
Left leg disabled 4 1/2 Dollars
He is entitled to receive the sum of \$4 1/2 Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

The Treasurer will pay the same and hold his receipt on this voucher and return same
to Executive Department for warrant.

By the Governor,
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

50.
RECEIVED OF STATE TREASURER, R. U. HARDEMAN.
Fifty 00 01 Dollars.
per above voucher, this 5 of Feb'y 1890.
T. H. Waite

per above voucher, this 21 of July 1880.
Thomas E. Waite

per above voucher, this 21 of July 1890
J. H. Mait

Audited.

1891.

COMPTROLLER GENERAL

Voucher No 270

Amount \$ 50

Paid to J. H. Mait

for Leg. ac.

July 7 1891.

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK

Geo. W. Harrison, State Printer, Atlanta.

Applicant

NAME Waite, Thomas E.

YEAR 1880 COUNTY Fulton

WHEN AND WHERE BORN? Oct. 24, 1832, DeKalb County, Georgia

ENLISTED WHEN AND WHERE? March 1862, Fulton County, Georgia

RANK.

COMPANY AND REGIMENT? Co. I, 42nd Regt. Georgia

NAME OF CAPTAIN AND COLONEL? L. P. Thomas, Lieut. Col.

WOUNDED? Left the command near Nashville, Tennessee, on account of being wounded. Wounded in left wrist and ankle.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? Command: About April 1865, Greensboro, N. C.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? In Fulton County, Georgia on account of being wounded.

DIED, WHEN AND WHERE?

BURIED,

Lieut. Col.

WITNESSES. L. P. Thomas /s/ same Regiment.

No date

1999

No

Atlanta, Ga. *Picky* 4 1894

He is entitled to receive the sum of £144 for such disability the same being the allowance due for the year ending 31st Dec 1904

The Treasurer will pay the same and hold his receipt in this case for the same.

Executive Department for warrant.

By the Governor

Sec'y EXEC

Sec'y EXECUTIVE DEPARTMENT

RECEIVED OF R. C. HARDEMAN, Sheriff of the State of Georgia

Dollars

per above voucher, this...

1891

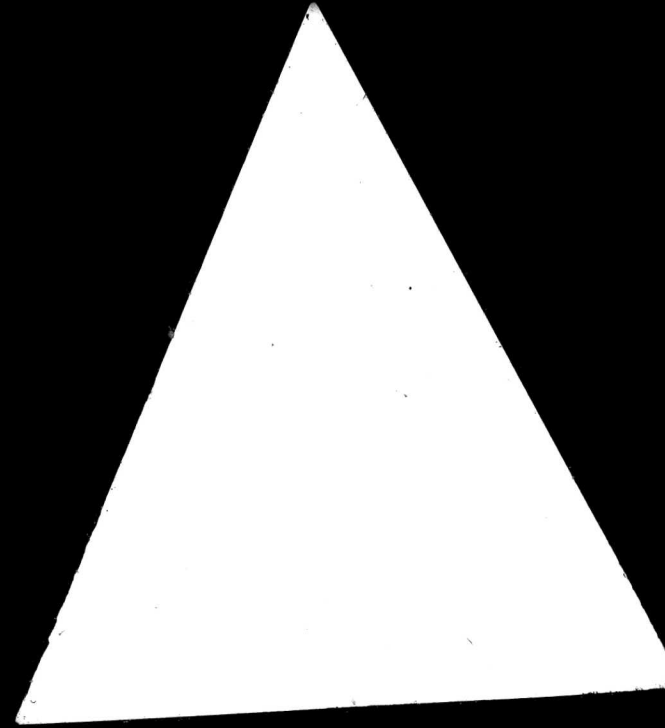


\$ 30

RECEIVED OF R. U. HARDEMAN, Secretary of the State of Georgia

Dollars.

per above voucher, this Fifty and no Cents of July 1891.
G. H. Mills



644 *Hammond*
Warts, W. S.
No. *2314*
Fulton

INDIGENT PENSION
1897.

Name *W. S. Warts*
County *Fulton*

Approved *7/8* 1897.

WARRANT HANDLED TO

Officer

8/12 1897

STATE OF GEORGIA.

County, *Fulton*

POWER OF ATTORNEY.

to receive and receipt for the pension allowed and request that he will allow to

Witness my hand and seal this
Executed in presence of

day of _____ 1897.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed and request that he remit same to _____

Witness my hand and seal this _____ day of _____ 1897.

Executed in presence of _____

INDIGENT PENSION

1897.

Name *W. J. Waits*

County *Fulton*

Approved *7/8* 1897.

WARRANT HANDLED TO

Officer

W. J. Waits, Clerk of Court.

July 12 1897

Questions for Applicant.

STATE OF GEORGIA,

Fulton County.

W. J. Waits

_____ of said State and County, desiring to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office) *Georgia, Fulton County, Hammond, DC.*
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? *At same place. Resident of this state 66 years.*
3. When and where were you born? *Swannett County in 1830.*
4. When and where and in what company and regiment did you enlist or serve? *August 1868 At Chickamauga. Company 18. First Regt. Meads.*
5. How long did you remain in such company and regiment? *Twenty two months.*
6. For how long a period did you discharge regular military duty? *Twenty months.*
7. When, where and under what circumstances were you discharged from service? *Marquette Georgia, May 1869. Had been sick in hospital two months and was unfit for duty.*
8. What is your present occupation? *None.*
9. How much can you earn (gross) per annum by your own exertions or labor? *Nothing.*
10. What has been your occupation since 1866? *until 1874 it was that of farming.*
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"? *Upon first and second grounds.*
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? *Have been unable to earn a support two years. Contracted Rheumatism during war and was paralyzed on first of March 1876. and have not recovered.*
13. What property, effects or income do you possess and its gross value? *about \$30. Household goods.*
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? *In 1894 had \$1000 sold to pay debts. 1895 had nothing. In 1896 had nothing.*
15. In what County did you reside during those years and what property did you then return for taxation? *Fulton County. I have my tax returns.*
16. How were you supported during the years 1895 and 1896? *Contributions from relatives.*
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? *Cost \$250. Contributed nothing myself.*
18. What was your employment during 1895 and 1896? What pay did you receive in each year? *Nothing.*
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? *Have a wife, who is an invalid. Four sons who work at various occupations. One daughter married. no homestead.*
20. Are you receiving any pension, if so what amount and for what disability? *no pension.*

Sworn to and subscribed before me this the _____ day of _____ 1897.

W. J. Waits

W. J. Waits Ordinary.

of *Fulton* County.

Applicant.

Albert Hamill witness

Every question MUST be answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.

Fulton County.

Albert Hamill, of said State and County, having been presented as a witness in support of the application of W. J. Wails for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Albert Hamill
Atlanta Ga.
2. Are you acquainted with W. J. Wails, the applicant, is of how long have you known him? about 36 years
3. Where does he reside, and how long has he been a resident of this State? In Oak Grove Dist. Fulton Co. 66 years
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? He was in my Company and Regiment

5. When, where and in what company and regiment did he enlist? Company "B" 1st Regiment of the State Troops August 1862

6. Were you a member of the same company and regiment? Yes

7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About 70 months and was in hospital two months before discharged.

8. What property, effects or income has the applicant? (Give your means of knowledge.) No property and no income

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? he had about 30 worth of horse held for \$5. and has since yet

10. What is the applicant's occupation and physical condition? nothing and his physical condition is very bad

11. Is the applicant unable to support himself by labor of any sort, if so, why? I think he is, from his general appearance as a detail before you to Berlin City

12. How was he supported during the years 1895 and 1896? By contributions from his children

13. What portion of his support for these two years was derived from his own labor or income? none

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He was in the army, he has grown old and is physically deformed and is very poor

15. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this 4 day of July 1897. Albert Hamill Witness.
W. J. Wails Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA.

Fulton County.

Personally came before me W. J. Wails and N. V. Robinson, both known to me as reputable physicians of said county, and being severally sworn, say on oath that they have examined carefully W. J. Wails, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

Paralysis of the left side, also Rheumatism, and that he is not able to walk without the aid of crutches.

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 11 day of July 1897. W. J. Wails Ordinary.
N. V. Robinson

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.

I, W. J. Wails, Ordinary in and for said County, hereby certify that the applicant W. J. Wails resides in said County, and was a bona

fide resident of this State on the first day of January, 1894, and that the witnesses, viz:

Albert Hamill and N. V. Robinson are of trustworthy character and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions, the applicant and each witness took the oath herein prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same was signed.

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1895, None dollars of property, and in 1896, None dollars of property.

In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this 12 day of July 1897.

W. J. Wails Ordinary
of Fulton County.

NOTE.

Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God." Additional affidavits may be attached if blank space are insufficient.

15. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this 4th day of May 1897. Albert Hamilton Witness.
W. H. Hamilton Ordinary.

NOTE.
Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
Additional affidavits may be attached if blank spaces are insufficient.

POWER OF ATTORNEY.

State of Georgia,

County, }

I, _____, hereby authorize
of _____
to receive and receipt for the pension paid hereon and request that he remit same to
by _____
at _____
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of _____ 1898.

[L. S.]

Executed in presence of _____

Walter M. G.
1/2
NO. 464
INDIGENT
SOLDIER'S PENSION,
1898.
Name W. H. Hamilton
County Fulton

WARRANT ISSUED
1/2
1898.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT SANDED TO
W. H. Hamilton
SOLDIER'S PENSION, 1898.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____, hereby authorize
of _____
to receive and receipt for the pension allowed, and request that he remit same to
at _____
by _____
Witness my hand and seal this _____ day of _____ 1898.
Executed in presence of _____ (L. S.)

Walter M. G.
1/2
NO. 688
INDIGENT
SOLDIER'S PENSION,
1899.
Name W. H. Hamilton
County Fulton

WARRANT ISSUED
1/2
1899.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT SANDED TO
W. H. Hamilton
SOLDIER'S PENSION, 1899.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears H. J. Harbo 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 12 day of Jan 1888; that he is 65 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 18 months in Company 10, of 145th Regiment of Georgia; that his physical condition is as follows: Rheumatism, Paralysis.

that his property consists of the following items —

of the value of — Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of Paulsboro county been allowed a pension for the year 189

Sworn to and subscribed before me, this, the 12 day of Jan 1898.

W. H. Hulsey Ordinary.

State of Georgia,

Fulton County.

I, W. H. Hulsey Ordinary of said County, do certify that I am well acquainted with H. J. Harbo the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 12

day of Jan 1898.



Ordinary

Fulton County.

Note.—The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON County.

Personally appears H. J. Harbo 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 — 1888; that he is 68 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of — months in Company —, of —th Regiment of Georgia; that his physical condition is as follows: Rheumatism, Paralysis.

that his property consists of the following items —

of the value of — Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of FULTON county been allowed a pension for the year 189 8

Sworn to and subscribed before me, this, the 12 day of Jan 1898.

W. H. Hulsey Ordinary.

State of Georgia,

FULTON County.

I, W. H. HULSEY Ordinary of said County, do certify that I am well acquainted with H. J. Harbo the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 12

day of Jan 1898.



Ordinary FULTON

County.

Note.—The blank spaces must be filled.
Note.—A Affidavit should not be attested before January 1st, 1899.

NOTE.—The blank space must be filled.

Ordinary Fulton County.

NOTE.—The blank space must be filled.
NOTE.—A Bill of Sale should not be attested before January 1st, 1900.

Ordinary FULTON County.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County, }

I, _____ hereby authorize

_____ of _____
to receive and receipt for the pension allowed, and request that he remit same to

_____ at _____
by _____

Witness my hand and seal, this _____ day of _____, 1900.

Executed in presence of _____ [L. S.]

COPIES ISSUED.
(For Those Already Enrolled.)

NO. 694

INDIGENT

SOLDIER'S PENSION,

1900.

Name W. W. Lindsey
County FULTON

WARRANT ISSUED

1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

ONE W. W. Lindsey, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FULTON

County.

FULTON

Personally appears H. G. Harts 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 1828 day of 1828; that he is 69 years old and
by occupation a General that he enlisted in the military service of the Confed-
erate States (of the State of Georgia) during the war between the States,
and served for the term of 2 in Company 2, of 1st Regiment of
Georgia; that his physical condition is as
follows: General Sickness

that his property consists of the following items

of the value of 100 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

Sworn to and subscribed before me, this the 16 day of January, 1900.

Ordinary.

State of Georgia,

FULTON

County.

I, W. H. HULSEY,

Ordinary of said County,

do certify that I am well acquainted with H. G. Harts the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.

Given under my official signature and seal, this 16
day of January, 1900.



Ordinary FULTON

County.

NOTE.—The blank spaces must be filled.
NOTE.—An affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County }

I, _____ hereby authorize _____ of _____

to receive and receipt for the pension allowed and request that he remit same to _____ at _____

by _____ day of _____ 1901.
[L. S.]

Witness my hand and seal, this _____ day of _____ 1901.
[L. S.]

Executed in presence of _____

(For Those Already Enrolled.)

No. 609

INDIGENT

SOLDIER'S PENSION.

1901.

Name W. J. White
County Fulton

WARRANT ISSUED

July 14

1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. J. White

John W. Lindsey, Secy. of Pensions.

No. 609

POWER OF ATTORNEY.

STATE OF GEORGIA,

County }

I, W. J. White of Atlanta hereby authorize L. C. White of Ida

to receive and receipt for the pension allowed and request that he remit same to _____ at _____

by _____ day of _____ 1902.
[L. S.]

Executed in presence of

E. R. Dillingham, M.P.
Fulton Co. Ga.

(FOR THOSE ALREADY ENROLLED.)

No. 249

INDIGENT

SOLDIER'S PENSION

1902.

Name W. J. White

County Fulton

Co. _____ Regiment _____

WARRANT ISSUED

July 14

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. J. White

John W. Lindsey, Secy. of Pensions.

No. 609

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County, }
Personally appears W. H. Wait of Fulton
County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 1828; that he is 70 years old and
by occupation a farmer that he enlisted in the military service of the Con-
federate States (or of the State of GA) during the war between the
States, and served for the term of 22 months in Company B, of 1st Regiment
of GA; that his physical condition is as
follows: Good

that his property consists of the following items:

of the value of _____ Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1901. I have heretofore as a resident of Fulton
county been allowed a pension for the year 1 one

Sworn to and subscribed before me, this 10th day of January, 1901, W. H. Wait

John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton County, }
I, John R. Wilkinson Ordinary of said County,
do certify that I am well acquainted with W. H. Wait the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.

Given under my official signature and seal, this 10th

day of January, 1901.

John R. Wilkinson
Fulton County.

NOTE - The blank spaces must be filled.
NOTE - Affidavit should not be attested before January 1st, 1901.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County, }
Personally appears W. H. Wait of Fulton.

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 1828; that he is 71 years old and
by occupation a farmer that he enlisted in the military service of the Con-
federate States (or of the State of GA) during the war between the
States, and served for the term of 22 mo in Company B, of 1st Regiment
of GA; that his physical condition is as
follows: Good

that his property consists of the following items:

of the value of _____ Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1902. I have heretofore as a resident of Fulton
county been allowed a pension for the year 1 one

Sworn to and subscribed before me, this 10th day of JAN 13 1902, 1902, W. H. Wait

John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Fulton County, }

I, John R. Wilkinson Ordinary of said County,
do certify that I am well acquainted with _____
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.

Given under my official signature and seal, this _____

day of JAN 13 1902, 1902.

John R. Wilkinson
Fulton County.

NOTE - The blank spaces must be filled.
NOTE - Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, W J Waite hereby authorize L B Waite
of Fulton Co Ga

to receive and receipt for the pension allowed and request that he remit same to
at _____
by _____

Witness my hand and seal, this 16th day of June, 1903.

W J Waite [L. S.]

Executed in presence of

John R. Wickliss

COPIES SECTION 1284

(FOR THOSE ALREADY ENROLLED.)

No. 803

INDIGENT

**SOLDIER'S PENSION
1903.**

Name W J Waite

County

Co. B Regiment 1st

Ga WARRANT ISSUED

12th 1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W J Waite

See Barren, New Prison, Atlanta

L B Waite

no data

W J Waite, 211.
Fulton County

COPIES SECTION 1284

(FOR THOSE ALREADY ENROLLED.)

No. 101

INDIGENT

**SOLDIER'S PENSION
1904.**

Name W J Waite

County

Co. B Regiment 1st

Ga WARRANT ISSUED

12th 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W J Waite

See Barren, New Prison, Atlanta

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, W J Waite hereby authorize
of Fulton County

to receive and receipt for the pension allowed, and request that he remit same to
at my home in Fulton County
by me

Witness my hand and seal, this 20th day of February, 1904.

W J Waite [L. S.]

Executed in the presence of

R. H. Howell

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County,

Personally appears WJ Waits of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1828; that he is 72 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 22 mos in Company B, of 18th Regiment of Georgia; that his physical condition is as follows: I & P

that his property consists of the following items:

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of county been allowed a pension for the year 1

Sworn to and subscribed before me, this the 10 day of January, 1903.

STATE OF GEORGIA,

County,

I, WJ Waits Ordinary of said County, do certify that I am well acquainted with WJ Waits 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 16 1903.

Ordinary County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1904.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County,

Personally appears WJ Waits of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1828 that he is 73 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 22 mos in Company B, of 18th Regiment of Georgia; that his physical condition is as follows: Infirma

that his property consists of the following items:

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of County been allowed a pension for the year 1

Sworn to and subscribed before me, this the 11 day of JAN 20 1904.

STATE OF GEORGIA,

Fulton County,

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with WJ Waits the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this day of 1904.

Ordinary Fulton County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1904.

be and that he resides in this County.

Given under my official signature and seal, this
day of JAN 16 1903 1903.



Ordinary

County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1903.

day of



John R. Wilkinson
Ordinary. Fulton County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1904.

NAME Waite, W.J. YEAR 1897 COUNTY Fulton

WHEN AND WHERE BORN? Grinnett 1880 Ga.

ENLISTED WHEN AND WHERE? August 1898 at Chickamauga

RANK.

COMPANY AND REGIMENT Co. B, 1st. Regt. Ga. Vols.

NAME OF CAPTAIN AND COLONEL?

WOUNDED? Contracted rheumatism during service.

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED? Marietta, Ga. May 1899 had been sick in hospital for some time and was unfit for duty.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. Albert Howell, same comment-- No date.

JWT

STATE OF GEORGIA. FULTON COUNTY.

Ordinary's Office, Atlanta January 20th 1904

I, John R. Wilkinson, Ordinary of said County, certify that A. H. G. Howell whose genuine official signature appears to the annexed paper, was at the time of said signing an acting Justice of the Peace, in and for said County, duly sworn and commissioned, and that his commission was date the 1st day of December 1900 and will expire on the 1st day of December 1904, and that all his official acts as such are entitled to full faith and credit.

Given under my official signature and seal of office, the day and year

above written.

John R. Wilkinson
ORDINARY.

RELEASED.

WHEN AND WHERE? ~~WHEN AND WHERE?~~ Marietta, Ga. May 1864 had been sick in
hospital. Was ~~not~~ unfit for duty.

IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

WITNESSES. Albert Howell, same command-- No date.

JVS

and that all his official acts as such are entitled to full faith and
credit.

Given under my official signature and seal of office, the day and year
above written.

John P. ...
ORDINARY.

1898

Name D. J. Walden
County Fulton

County

Approved _____

RICHARD JOHNSON

Commissioner of Prisons

WARRANT HANDED TO

U. S. GOVERNMENT PRINTING OFFICE: 1967

Patent of 27/19199.
It is need has to examine
Clarion till 12 has been
answered -
Ruth Johnson
C. H. P. P. P.

Pension Office 7739
1901

Application to the
Court to make a
claim for the
same.

Millions must leave
the country because
of them who are
different from the one
which was considered
good parts of towns &
counties belonging to
other and other men
in better than Europe
and Asia.

J. H. [unclear]
[unclear] of [unclear]

STATE OF GEORGIA.
POWER OF ATTORNEY.
COUNTY, _____ }
I, _____, hereby authorize _____
_____ of _____
to receive and receipt for the monies allowed, and request that he remit same to _____
_____ of _____
_____ by _____
_____ day of _____, 1888.
Witness my hand and seal this _____ day of _____, 1888.
Executed in presence of _____ (L. S.) _____

STATE OF GEORGIA.

COUNTRY.

1

of _____

TO RECEIVE AND FORWARD TO THE

Witness my hand and seal this _____ day of _____ 1898

(L.S.)

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

I,

hereby authorize

to receive and receipt for the pension allowed, and request that he remit same to

at

ly.

Witness my hand and seal this

day of

1898.

Executed in presence of

(L.S.)

Business 9/17/1899
It is near his 75 years.
Claim till 12 has been
answered
D. I. Walden
County of Fulton

Pension app. 1900
1901
D. I. Walden
Fulton
D. I. Walden
Fulton

William H. H. H. H.
D. I. Walden
Fulton
D. I. Walden
Fulton

INDIGENT PENSION.

1898.

Name D. I. Walden

County Fulton

Approved 1898.

RICHARD JOHNSON

Commissioner of Pensions.

WARRANT HANDED TO

1898/23/98

Questions for Applicant.

STATE OF GEORGIA.

Fulton County.

Samuel J. Walden

of said State and County, desiring

to avail himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (give State, County and post office.)

Samuel J. Walden, Clara, Fulton County, Georgia

2. How long and since when have you been a resident of this State? (give State, County and post office.)

Since 1894, I have lived in Fulton County, Georgia.

3. When and where were you born? (give State, County and post office.)

3rd June 1841 in Fayette County, Ga.

4. When and where and in what company and regiment did you enlist or serve? (give State, County and post office.)

Enl. in 1861 in Co. E, 15th Ga. Regt. Inf.

5. How long did you remain in such company and regiment? (give State, County and post office.)

Until 7th April 1865

6. For how long a period did you discharge regular military duty? (give State, County and post office.)

Four years

7. When, where and under what circumstances were you discharged from service? (give State, County and post office.)

Surrendered at Appomattox 9th April 1865

8. What is your present occupation? (give State, County and post office.)

None known

9. How much can you earn (gross) per annum by your own exertions or labor? (give State, County and post office.)

Nothing known

10. What has been your occupation since 1865? (give State, County and post office.)

No regular business since 1865

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and

poverty," second, "infirmary and poverty," or third, "blindness and poverty?" (give State, County and post office.)

Infirmary and poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? (give State, County and post office.)

About ten years, I have been unable to earn a support, and now I am worse and worse.

13. What property, effects or income do you possess and its gross value? (give State, County and post office.)

Nothing

14. What property, effects or income did you possess in 1864, 1865, 1866 and 1867, and what disposition, if any, did you make of same? (give State, County and post office.)

I had a small house that I rented, and for

about four hundred dollars which my daughter and I

used as a home in 1864

15. In what County did you reside during those years, and what property did you then return for taxation? (give State, County and post office.)

In Fulton Co., above house 1864, 1865, 1866 and 1867

16. How were you supported during the years 1866 and 1867? (give State, County and post office.)

By my daughter

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? (give State, County and post office.)

About fifty dollars, I contributed towards my daughter

18. What was your employment during 1866 and 1867? What pay did you receive in each year? (give State, County and post office.)

I had small odd jobs for which I got very little pay

19. Have you a family? If so, who composes such family? Give their means of support? Have they a household? (give State, County and post office.)

My wife and daughter, I have a daughter who is married and has a family, and a son who is married and has a family.

20. Are you receiving any pension? If so, what amount, and for what disability? (give State, County and post office.)

None

Sworn to and subscribed before me this the

D. I. Walden

Applicant.

day of Dec, 1898.

Ordinary

of Fulton County.

15. What interest have you in the above?
Sworn to and subscribed before me, this 10th day of Dec 1898, by Wm. W. Lindsey Ordinary.
Witness.

Additional affidavits may be attached if blank spaces are immaterial.
In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

POWER OF ATTORNEY.
STATE OF GEORGIA.

County }

I, _____ hereby authorize
_____ of
to receive and receipt for the pension allowed and request that he remit same to
at _____

by _____
Witness my hand and seal, this _____ day of _____ 1901.
[L. S.]

Executed in presence of _____

*Walter Daniel
Canton, Ga.*

(For Those Already Enrolled.)

No. 552

INDIGENT
SOLDIER'S PENSION.
1901.

Name W. W. Lindsey
County Paulding

WARRANT ISSUED
Jan 16 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
W. W. Lindsey

State of Georgia, State Printer, N. York.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Bullitt County.

Personally appears *D. I. Walden* of *Bullitt* 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 *25* day of *December* 18*81*; that he is *67* years old and by occupation a *Carpenter* that he enlisted in the military service of the Confederate States (or of the State of *Geo*) during the war between the States, and served for the term of *4 years* in Company *4*, of *12*th Regiment of *Georgia Inf*; that his physical condition is as follows:

Rupture & Piles

that his property consists of the following items _____

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of *Bullitt* county been allowed a pension for the year 1901 *heretofore*

Sworn to and subscribed before me, this the *12* day of *Jan* 1901.

John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Bullitt County.

I, *John R. Wilkinson* Ordinary of said County, do certify that I am well acquainted with *D. I. Walden* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *12* day of *Jan* 1901.



NOTE - The blank spaces must be filled.
NOTE - Affidavit should not be attested before January 1st, 1901.

POWER OF ATTORNEY.
STATE OF GEORGIA, }

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____ day of _____ 1903.
Witness my hand and seal, this _____ day of _____ 1903. [L. S.]
Executed in presence of _____

Walden, D. D.
of Atlanta, Ga.

CODE SECTION 154
(FOR THOSE ALREADY ENROLLED.)
No. *317*

INDIGENT
SOLDIER'S PENSION
1903.

Name *D. J. Walden*
County *Walden*
Co. *G* Regiment *10th*

WARRANT ISSUED
4/20 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Alph

no data

POWER OF ATTORNEY.

STATE OF GEORGIA, }

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____ day of _____ 1904.
Witness my hand and seal, this _____ day of _____ 1904. [L. S.]
Executed in the presence of _____

Walden, D. D.
Fulton County

CODE SECTION 154
(FOR THOSE ALREADY ENROLLED.)
No. *348*

INDIGENT
SOLDIER'S PENSION
1904.

Name *D. J. Walden*
County *Fulton*
Co. *G* Regiment *14th*

WARRANT ISSUED
4/20 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Alph

no data

STATE OF GEORGIA
FOR THE COMMISSIONER OF PENSIONS

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears D. I. Walden 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 26 day of Dec 1881; that he is 61 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 4 yrs in Company E, of 10th Regiment of Inf; that his physical condition is as follows: I & P

that his property consists of the following items: _____

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of _____ county been allowed a pension for the year 1 _____

Sworn to and subscribed before me, this 29 day of Dec 1903 }
Ordinary.

STATE OF GEORGIA,

County.

I, _____ Ordinary of said County, do certify that I am well acquainted with D. I. Walden the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this _____ day of _____ 1903.

Ordinary.

County.



Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears D. I. Walden 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 26 day of Dec 1881; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 4 yrs in Company E, of 10th Regiment of Inf; that his physical condition is as follows: I & P

that his property consists of the following items: _____

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of _____ County been allowed a pension for the year 1 _____

Sworn to and subscribed before me, this 29 day of Dec 1904 }
Ordinary.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with D. I. Walden the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this _____ day of _____ 1904.

John R. Wilkinson
Ordinary.

Fulton.

County.



Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

I, _____ hereby authorize

of

to receive and receipt for the pension allowed, and request that he remit same to

at

by _____ day of _____ 1905.

Witness my hand and seal, this

[L. S.]

Executed in the presence of

William D. D.
Fulton County
COSS SECTION 1304.
(FOR THOSE ALREADY ENROLLED.)

No. 579

INDIGENT
SOLDIER'S PENSION
1905.

Name *D. J. Halden*
County *Fulton*
Co. *2* Regiment *10th Cal.*

WARRANT ISSUED
1/18 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
1/18

THE SIGNATURE MUST BE WRITTEN AND SIGNED BY THE COMMISSIONER.

no date

William D. D.
Fulton County

INDIGENT
SOLDIER'S PENSION
1906.

Name *D. J. Halden*
County *Fulton*
Co. *2* Regiment *10th Cal.*

WARRANT ISSUED
1/17 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO
1/17

THE SIGNATURE MUST BE WRITTEN AND SIGNED BY THE COMMISSIONER.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

I, _____ hereby authorize

of

to receive and receipt for the pension allowed, and request that he remit same to

at

by _____ day of _____ 1906.

Witness my hand and seal, this

[L. S.]

Executed in the presence of

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears D. J. Walden 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 29 day of Dec 1871; that he is 64 years old and by occupation a None that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company C, of 10th Regiment of Cal Inf; that his physical condition is as follows: Infirmary and poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning, by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 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 1st day of Jan 1905.

Ordinary.

STATE OF GEORGIA.

Fulton County.

I, D. J. Walden 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 _____ day of _____ 1905.

Ordinary. Fulton County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears D. J. Walden 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 29 day of Dec 1871; that he is 64 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company C, of 10th Regiment of Cal Inf; that his physical condition is as follows: Infirmary and poverty

that his property consists of the following items:

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 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 1st day of Jan 1905.

Ordinary.

State of Georgia,

Fulton County.

I, D. J. Walden 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 _____ day of _____ 1905.

Ordinary. Fulton County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1906.

POWER OF ATTORNEY.
STATE OF GEORGIA,
County, }

I, _____ hereby authorize _____
of _____
to receive and receipt for the pension allowed and request that he remit same to
at _____
by _____
Witness my hand and seal, this _____ day of _____ 1902.
[L. S.]

Executed in presence of _____

Walden, D. S.
Fulton Co.
CROSS SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. *338*

INDIGENT
SOLDIER'S PENSION
1902.

Name *D. S. Walden*
County *Fulton*
Co. *10*
Regiment *10*
WARRANT ISSUED

1902.

44

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W

JOHN W. LINDSEY, Commissioner of Pensions.

No date

Walden, D. S.
Fulton Co.

Cross Section 124.
(FOR THOSE ALREADY ENROLLED.)

No. *414*

INDIGENT
SOLDIER'S PENSION
1907.

Name *D. S. Walden*
County *Fulton*
Co. *10*
Regiment *10*

WARRANT ISSUED

1907.

44

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

W

JOHN W. LINDSEY, Commissioner of Pensions.

No date

POWER OF ATTORNEY.
STATE OF GEORGIA,
County, }

I, _____ hereby authorize _____
of _____
to receive and receipt for the pension allowed, and request that he remit same to
at _____
by _____
Witness my hand and seal, this _____ day of _____ 1907.
[L. S.]

Executed in presence of _____

RECORDED SERVICE

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton County.

Personally appears D. J. Walden 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 25 day of Dec 1888; that he is 60 years old and by occupation a Carpenter that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company 2 of 9th Regiment of U.S.A.; that his physical condition is as follows:

Ruptured Piles
that his property consists of the following items:

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Fulton county been allowed a pension for the year 1901.

Sworn to and subscribed before me, this the _____ day of _____ 1902.

STATE OF GEORGIA,
Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with D. J. Walden the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this _____ day of _____ 1902.

Ordinary Fulton County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County.

Personally appears D. J. Walden of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1888; that he is 60 years old and by occupation a Carpenter that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company 2 of 11th Regiment of U.S.A.; that his physical condition is as follows: Infirmary & poverty

that his property consists of the following items:

of the value of None Dollars. I am now earning by my labor, 4 Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the _____ day of _____ 1907.

John R. Wilkinson Ordinary.

State of Georgia,

Fulton County.

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with D. J. Walden the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal this _____ day of JAN 2 1907.

John R. Wilkinson Ordinary _____ County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1907.

the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this
day of _____ 1902.



Ordinary _____

Fulton

County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1903.

by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal this
day of _____ JAN 2 _____ 1907.

John P. Williamson

Ordinary _____ County.

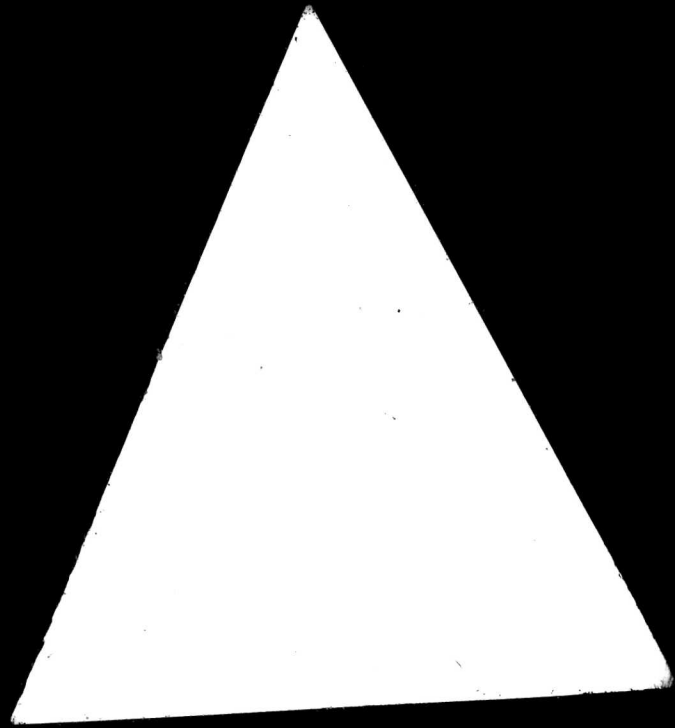
Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1907.

Atlanta Ga Sept 29. 1860.
This is to certify that I and Daniel J. Walden
served together in Co. E, 10th Regt in the Confederate army
and that we were both present with Gen. Beauregard's army
at Appomattox C. Va. on the 9th day of April 1865
when that army surrendered
I have to certify as follows Joseph S. Alford
before me this Sept 29-1860
J. B. Leavelle
Ordinary

I have been ruptured 30 years. For the last 10 or 12 years
it has been impossible, much of the time, to hold it up
with a truss, while trying to work. I have suffered with piles
20 years—tried many remedies including several
operations with knife and injections, none of which
afforded more than temporary relief.
I am to say and certify
before me this—Nov 16 1889
D. J. Walden
W. W. Wiley
Ordinary

I have been ruptured 30 years. For the last 10 or 12 years
it has been impossible, much of the time, to hold it up
with a truss, when trying to work. I have suffered with fillet
25 years - tried many remedies including several
operations with knife and injections, none of which
afforded more than temporary relief.

Am to send enclosed D.I. Walden
copy of this - Jan 16 1889
W. W. W. W.
Or any



Approved for 1931
John W. Clark
Widow's Application

Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920.

County FULTON
 Name Mrs. Frances Miller Walden
 Widow of John H. Walden
 Date of Marriage Feb. 19, 1873
 Company B
 Regiment 12th Battalion, Virginia Light Artillery, C. S. A.
 Approved John W. Clark
Dec 5/1921

Ask for Mar Record

JOHN W. CLARK,
 Commissioner of Pensions.

10/2-11/1931

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY, Ordinary of said County, do certify

that I know Frances Miller Walden Ordinary for pension; that

she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know William Henry Walden

the witness who answers to the name of applicant; 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 true.

Given under my hand and official seal of office this 26 day of Dec 1921

(SEAL OF ORDINARY)
John W. Clark Ordinary.
 of Fulton County.

INSTRUCTIONS.

1. Before any questions are answered the Ordinary and the witnesses in the following order you shall give will be the whole truth. So help you God.
2. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the Ordinary.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the Ordinary.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the Ordinary.
5. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the Ordinary.
6. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the Ordinary.
7. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the Ordinary.
8. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the Ordinary.
9. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the Ordinary.
10. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to by the Ordinary.

Frances Miller Walden
44 Hammond St., Atlanta, Ga.
Widow's Application

Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920.

County FULTON
 Name, Frances Miller Walden
 Widow of John H. Walden
 Date of Marriage Feb. 12, 1872
 Company B
 Regiment 12th Battalion, Virginia Light Artillery, C. S. A.
 Approved Sept 9, 1921
per copy for State

JOHN W. CLARK,
 Commissioner of Pensions.

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.
 I, John H. Daffies, Ordinary of said County, do certify that I know Mrs. Frances Miller Walden the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know Lillian Ransay the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn 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 official seal of office this 26 day of Oct, 1923.
 (SEAL OF ORDINARY) John H. Daffies, Ordinary.
 of Fulton County.

INSTRUCTIONS:

- Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God." If blank spaces are insufficient.
- Additional affidavits may be attached if 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 County in which the applicant or witness resider and must be certified by such Ordinary.
- Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
- Fill out the back of the application carefully.
- Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is 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:

STATE OF GEORGIA.

Fulton COUNTY.

Personally appears before me, Mrs. Frances Miller Walden of said State and County and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, and submits testimony to support the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

- What is your name, and where do you reside? (Give Post Office and County)
Mrs. Frances Miller Walden, 446 Hammond St., SW., Atlanta, Fulton Co., Ga.
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? Ever since the year 1911.
- When, where and to whom were you married? February 12, 1873, Detroit Mich., John H. Walden.
 - Have you married since the death of first and soldier husband? No.
 - When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.) Enlisted October 29, 1863, at Essex, Virginia, Company B, 12th Battalion, Virginia Light Artillery, Confederate States Army.
- When and where did the commands of your husband surrender or discharge from the Service? In 1865, in Virginia.
- Was your husband personally present with his command when it was surrendered or discharged? No.
- If he was not present, state specifically and clearly where he was? At home, at Permyville, Virginia.
- When did he leave the Command? He left Hospital, November, 1864.
- For what cause did he leave? Physical disability.
- By whose authority did he leave? Hospital authorities or officers.
- For how long was his leave of absence granted? 60 days. In what way? By furlough.
- What was his physical condition when he left his command? Unable to perform military service.
- What effort did he make to return to his Command? He was at home sick for many months.
- In what way was he prevented from going back to Command? Illness.
- Was he captured by the enemy at any time? No.
- If so, when and where? In what prison was he held and when was he released? Not captured.
- When and where did your first husband die? November, 1927.
- Were you residing together when he died? Yes.
- If not, how long have you resided apart? Never resided apart.
- Are you now a widow? Yes.
- Have you or your husband heretofore been paid a pension by the State? No.
 If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me, this 26 day of Oct, 1923.
John H. Daffies Ordinary
 of Fulton County.
 (SEAL OF ORDINARY)

Mrs. Frances Miller Walden
 Applicant.

ful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 26 day of Oct. 1923.

(SEAL OF ORDINARY)

of Fulton County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

- j. When and where did your first husband die? November, 1881.
 - k. Were you residing together when he died? Yes.
 - l. If not, how long have you resided apart? Never resided apart.
 - m. Are you now a widow? Yes.
 - n. Have you or your husband heretofore been paid a pension by the State? No.
- If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me, this 26 day of Oct. 1923.

John R. Wright
Ordinary
(SEAL OF ORDINARY)

Mrs. Frances Miller Walden
Applicant.

State of Georgia

Pension Department
Atlanta

JOHN J. HUNT
COMMISSIONER OF PENSIONS

December 21st, 1921.

Judge Thomas H. Jeffries,
Ordinary, Fulton County,
Atlanta, Georgia.

Dear Judge:

IN RE: Application for pension for
Mrs. Frances Miller Walden, widow
of John H. Walden.

I have approved this application, to take effect on and after January 1st, 1922, upon the following grounds:

The marriage is proven to have taken place prior to the year 1861.

The service of the husband is proven by a record signed by the Adjutant General of the United States, as follows:

"The records show that one J. H. Walden enlisted October 29, 1862, at Essex, as a private in Company B, 15th Battalion Virginia Light Artillery, Confederate States Army. The company muster roll for May and June, 1864, the last roll on file, shows him present. He was admitted to the Chimberase Hospital #2, Richmond, Virginia, October 27, 1864, and was furloughed November 12, 1864, for 60 days. No later record of him has been found."

The honorably account for the soldier until the end of the war, the applicant swears that he was at home after his furlough expired, sick and physically unable to perform military duty. With no record to the contrary, and he having been furloughed from a military hospital, the affidavit of the applicant is presumed to be true.

Please make proper record hereof in your office, as required by law.

The regular Requisition for the month of January, 1922 having been made up, the name of this pensioner will be carried on the next following Requisition, supplementary to the January requisition.

Very truly,

John J. Hunt
COMMISSIONER OF PENSIONS

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE
WASHINGTON

ORD

RECEIVED
A. G. 301
Walden, J. H.
(12/25/21) ORD

December 22, 1921.

Honorable Wm. J. Harris,
United States Senate.

My dear Senator Harris:

I have your letter of December 22, 1921, with which you inclosed one, herewith returned, from Mrs. Paul Ramsey, 33 Demorest Avenue, Atlanta, Georgia, who desires to be furnished the record of J. H. Walden, who is said to have served in Co. B, 15th Battalion Virginia Light Artillery, Confederate States Army.

The records show that one J. H. Walden enlisted October 29, 1862, at Essex, as a private in Co. B, 15th Battalion Virginia Light Artillery, C. S. A. The company muster roll for May and June, 1864, the last roll on file, shows him present. He was admitted to the Chimberase Hospital #2, Richmond, Va., October 27, 1864, and was furloughed November 12, 1864, for 60 days. No later record of him has been found.

The collection of Confederate records on file in this Department is far from complete, and failure to find the name or complete record of any person thereon is by no means conclusive proof that the person who bore that name did not serve as stated during some period not covered by the records on file.

Very respectfully,

John R. Wright
Major General,
The Adjutant General.

3 incs.
(Letter)
(Env.)

Certified Record of Marriage

STATE OF MICHIGAN,
County of Wayne,

No. 5461

1. Full name of bridegroom John H. Walden
2. Number of times previously married
3. Residence at time of marriage Detroit
4. Age 23 Color white 5. Birthplace Virginia
6. Occupation Painter
7. Father's name
8. Mother's maiden name
9. Full name of bride Francis Miller
10. Number of times previously married
- Maiden name, if a widow
11. Residence at time of marriage Detroit
12. Age 19 Color white 13. Birthplace St. Clair, Michigan
14. Father's name
15. Mother's maiden name

The parties above named were joined in MATRIMONY, at Detroit
by me this 19th day of February, A. D. 1923
in the presence of

F. Schaeck

of

Detroit

K. O. Nell

of

Detroit

Signed

H. Pullmann,

Minister

228-77375-1M 12-20

Georgia, Fulton County.

Personally appeared Lillian J. Ramsey, who swears that she is personally acquainted with Mrs. Frances Miller Walden, and that she also knew John H. Walden. She further swears that the said Frances Miller Walden and John H. Walden, were living together at the time of the death of the said John H. Walden, which occurred in Fulton County, in November 1927, and that the said Mrs. Frances Miller Walden has not remarried, and that she is now his dependent widow.

Lillian J. Ramsey

Sworn to and subscribed before me,
this 28th day of Oct. 1931.

Wm. R. Markert
C.C. Ordinary

Georgia, Fulton County.

Personally appeared Lillian J. Ramsey, who swears that she is personally acquainted with Mrs. Frances Miller Walden, and that she also knew John H. Walden. She further swears that the said Frances Miller Walden and John H. Walden, were living together at the time of the death of the said John H. Walden, which occurred in Fulton County, in November 1927, and that the said Mrs. Frances Miller Walden has not remarried, and that she is now his dependent widow.

Lillian J. Ramsey

Sworn to and subscribed before me,
this 28th day of Oct. 1931.

William R. Linscomb
C.C.Ordinary

Waldrip, William R.
Widow: Drucilla
F lton County, 1895

*As a K 22 Rpt. Gr.
Jmy*