

NOTES.

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

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physicians and followed by a plain statement of facts showing the extent of the disability. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
 2. The law makes no allowance for an arm or a leg, unless the arm or leg has been rendered substantially and essentially useless.
 3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
 4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words always quoted, to say that, unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
 5. If papers are returned for correction, and amendments are added to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.
 6. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.
- The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.

*Witchfield, N. H.
Schumer &
Canton, N. H. E. H.*

Jan 1889

No. *2019*

APPLICATION FOR ALLOWANCE

039 *Witchfield*
Disability from Disease
Applicant *Witchfield*

County *Schumer*

Amount *50.*

Date of Warrant *Apr 19/1*

Entered on Record

Apr 19 1889

W. H. H.

SECRETARY EXECUTIVE DEPARTMENT.

*E. H. H.
W. H. H.*

NOTES.

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

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

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

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

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

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

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

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

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,

Gilmer County.

PERSONALLY appears *E. H. Critchfield* of *Gilmer* county, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such since the *1st* day of

July 18*48*, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the

States, and served as a *private* in Company *D*, of *39* th Regiment of *Ga* Volunteers *Bumby*'s Brigade; that whilst engaged

in such military service, at the battle of in the State of *Ga* on the day of *April* 186*2*, he was

injured as follows: *While at Dalton Ga took sick with measles and fever, was sick in hospital for a long time. The measles and fever settled on lungs and kidneys. has been a sufferer from lung and kidney disease ever since. Served as a soldier in line of battle whenever at that time. was forbidden home several times on account of said sickness. has been ever since unable to work.*

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

Sworn to and subscribed before me, this the *9* day of *April* 188*9*, *E. H. Critchfield*.

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA,

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.

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:

APPLICATION FOR ALLOWANCE

E. H. Critchfield

Disabled from Service

Applicant *E. H. Critchfield*

County *Gilmer*

Amount

Date of Warrant *Apr 19*

Entered on Record

Apr 19 188*9*

M. H. H.

SECRETARY EXECUTIVE DEPARTMENT.

W. A. W.

No. *2019*

Jan 1889

Longstreet, O. H. & Co.

NOTES.

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

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

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

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

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

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

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

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

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,

Gilmer County.

PERSONALLY appears *E. W. Critchfield* of *Gilmer* county, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has been such since the *1st* day of *July* 1868; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a *private* in Company *D*, of *39*th Regiment of *Ga* Volunteers *Leaming*'s Brigade; that whilst engaged in such military service, at the battle of in the State of *Ga* on the day of *April* 1862, he was

injured as follows: *While at Dalton Ga took sick with measles and fever, was sick in hospital for a long time. The measles and fever settled on lungs and kidneys has been a sufferer from lung and kidney disease ever since. Served as a soldier in line of battle where an estate travel was performed home several times on account of said illness. Has been ever since war unable to work.*

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

Sworn to and subscribed before me, this the

9 day of *April* 1889

E. W. Critchfield

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA,

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.

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.

APPLICATION FOR ALLOWANCE

E. W. Critchfield

Disability from disease

Applicant E. W. Critchfield

Gilmer

Amount

100

Date of Warrent *April 19*

Entered on Record *April 19*

1889

SECRETARY EXECUTIVE DEPARTMENT.

W. A. C.

No 90 19

March 1889

Committed to the State Prison

STATE OF GEORGIA,
Georgia County.

PERSONALLY came *J. D. Hays John Burgess*
and *A. H. Fairbanks*
citizens of *Gilmer* county, in said State,
who, being duly sworn, say that they are acquainted with *E. A. Birtchfield and*
were with him in war and know that he ~~received the wounds for~~ contracted the
disease) in the military service, as stated by him in the foregoing affidavit; that said ~~wounds~~
~~for~~ disease) permanently disables applicant, as stated by him; that said applicant is a *bona*
fide citizen of this State, and resides in *Gilmer* county, and we

are well satisfied that all the statements in his affidavit are true; *He swears under oath*
~~that he is well satisfied that all the statements in his affidavit are true;~~
 Sworn to and subscribed before me, this 1 day of April, 1964.

9 day of April 1889
 E. A. Johnson
 Cordy

NOTE: Above affidavit *must* be made by three citizens of the county of applicant's residence.

STATE OF GEORGIA,
Cherokee County.

PERSONALLY comes before me *A M Johnson* Ordinary of said county,
E J Dummerley and *E J Johnson*, both known to
me as reputable physicians of said county, who, being severally sworn, say on oath that
they have carefully examined *E M Centzfield* and after such
examination say that the applicant has been injured as follows: *Lindumae*

of Liver, stomach and kidneys - weak and languid
has dry rough skin - Pulse 96 respiration 22. General
emaciation and health broken down nervous system

very much affected mind impaired. In the medical and from the statements of the very best citizens of this town who were with applicant in the war and who have known him since then, we feel safe in giving his troubles resulting from illness and hardships of the war, as the cause of his present and honest condition and we do not hesitate to say that the doctors have rendered great relief in his present condition. In giving my name I do so sworn to and subscribed before me, this

Jas. Parker M.

9 day of Apr 1885 J. R. Johnson M
 A. L. Johnson
 ORDINARY.

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

STATE OF GEORGIA,
John County.

I, Sam Johnson Ordinary of said county,
do certify that I am well acquainted with E M Centenfield the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be,
and that he resides in this county. I also certify that the foregoing witnesses, are persons
of respectability, and that their statements are worthy of full credit and belief.

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

Given under my official signature and seal, this 9 day of Apr 1888
E. A. Johnson
 Ordinary Winn County.

POWER OF ATTORNEY

STATE OF GEORGIA,
Gilmer County.

Know all Men by these Presents, That I, Edw. C. Cuthbert
of Chatham
county, in said State, do hereby appoint Wm. A. Wright
of Hilton County my true and lawful attorney in fact for
me and in my name, to receive and receipt for whatever amount of money I may be entitled
to from the State of Georgia, by reason of the injury received as aforesaid in the military ser-
vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
authorizing my said attorney to receipt in my name for any Warrant that may be issued by
the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this 9th day of April 1887
E. W. Griffiths (L.S.)
Executed in the presence of us:

Ed. John Jay
ordr.

STATE OF GEORGIA,

Bilmer County.

I, *A. M. Johnson* Ordinary of said county, do certify that I am well acquainted with *E. M. Critchfield* 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 *11th* day of *February* 189*1*.

A. M. Johnson
Ordinary *Bilmer* County.

STATE OF GEORGIA,

Bilmer County.

I, *A. M. Johnson* Ordinary of said County, do certify that I am well acquainted with *E. M. Critchfield* 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 *11th* day of *February* 189*1*.

A. M. Johnson
Ordinary *Bilmer* County.

1890.

No. 1269

APPLICATION FOR ALLOWANCE

FOR THE YEAR ENDING 1890.

Desired Allowance

Applicant, *E. M. Critchfield*

County, *Bilmer*

Amount, *\$ 80*

Date of warrant, *Feb. 14 1890.*

Entered on record

Feb. 14 1891

W. H. H.

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT ISSUED TO

W. H. H.

Bilmer Co
Critchfield, E. M.
1891

No. 1133

Application for Allowance

FOR THE YEAR ENDING OCTOBER 31, 1891.

E. M. Critchfield

Applicant, *E. M. Critchfield*

County, *Bilmer*

Amount, *\$ 80*

Date of Warrant, *Feb. 11*

Entered on record

1891

W. H. H.

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT ISSUED TO
W. H. H.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Gilmer County, }
PERSONALLY appears *E. M. Critchfield* *Gilmer* County,
State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
resident of said State, and has been such continually since the day of
June 1862; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a *private* in Company *9*, of *89* th Regiment
of *Georgia* Volunteers *Cumming's* Brigade; that whilst engaged
in such military service, at the battle of in the State
of *Georgia* on the day of *April* 1862, he was

wounded as follows: *had wounds and fractures from
affecting Liver and Kidneys was unable
afterward for service as a soldier have suffered
continually since the war with weak lungs
and kidney disease caused by said service
and on account of this disease he is rendered
totally unable for manual labor*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887,
and the acts amendatory thereof, and makes application for the allowance to which he is
entitled for the year ending October 26, 1890. I have heretofore been allowed a pension of
of *fifty* dollars.

Sworn to and subscribed before me, this the *11th* day of *February* 1890
A. M. Johnson *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

Gilmer County, }
KNOW ALL MEN BY THESE PRESENTS, That I, *E. M. Critchfield*
of *Gilmer* 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
11th day of *February* 1890
E. M. Critchfield [L. S.]

Executed in the presence of us:

A. M. Johnson *Ordinary*
Send money to me as follows, by *direction*
to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Gilmer County, }
PERSONALLY appears *E. M. Critchfield* *Gilmer* 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
June 1848; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a *private* in Company *9*, of *89* th Regiment
of *Georgia* Volunteers *Cumming's* Brigade; that whilst engaged
in such military service at the battle of in the State
of *Georgia* on the day of *April* 1862, he was

wounded as follows: *bad pneumonia, liver and kidneys
affecting liver & kidneys, remained in hospital
three months and sent home in a very weak
condition never able for service as a soldier afterward
have been ill time since the war in a very
weak condition and on account of this disease
he is totally disabled for labor of any kind*

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

fifty dollars, for *from 1885*
Sworn to and subscribed before me, this, the *11th* day of *February* 1891
A. M. Johnson *Ordinary*

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

POWER OF ATTORNEY.

STATE OF GEORGIA

Gilmer County, }
Know all Men by these Presents, That I, *E. M. Critchfield*
of *Gilmer* 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 authoriz-
ing my said attorney to receipt in my name for any Warrant that may be issued by the Gover-
nor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
11th day of *February* 1891
E. M. Critchfield [L. S.]

Executed in the presence of us:

A. M. Johnson *Ordinary*
Send money to me as follows, by *direction*
to

County, Georgia.

P. O.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Siburn County.

Know all Men by these Presents, That I E. W. Whitefield
of Siburn County, State of Georgia, do hereby appoint
of John C. Smith 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

16 day of March 1893.

E. W. Whitefield [L. S.]

Executed in the presence of us:

John C. Smith

DIRECTION.

Send money to me as follows, by check

Siburn County, Georgia, to Ellen Jones P. O.

E. W. Whitefield

Ylmer Co.
Whitefield, E. W.
1893.

No. 1290
Application for Allowance

For the Year Ending October 26, 1893.

POB

aid by affidavit
Applicant, E. W. Whitefield

County, Gilmer

Amount, 50

Date of Warrant, 3

Entered on record, 20

11 1893.

Warrant

WARRANT HANDS TO

Warrant

Secretary Executive Department.

Geo. W. Harrison, State Printer, Atlanta.

No data

STATE OF GEORGIA.

Gibson County

PERSONALLY appears

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *Summer* day of *1844*; 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 *G* of *39*th Regiment of *GA* Volunteers *Cummins*'s Brigade; that whilst engaged in such military service at the *battle of* in the State of *GA*, on the *14th* day of *April* 1862, he was

wounded as follows

affecting Lungs and Kidneys was in Hospital
 several Months until sent Home on Sick
 furlough until was nearly able for Service
 as a Soldier afterwards have suffered continually
 since with even trouble and on account of
 this disability - Was totally disabled for
 several years.

Dependent 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

240 dollars, for 3 years -

Sworn to and subscribed before me, this, the

16 day of *April* 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.

STATE OF GEORGIA,

Kitson, Condy

I, John W. Smith Ordinary of said County,
do certify that I am well acquainted with A. W. Dr. Tolpelt the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this County.

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

Given under my official signature and seal, this 16 day of March 1893

Ordinary

Rubier County

STATE OF GEORGIA.

I, John W. Harrison Ordinary of said county, do certify that I am well acquainted with E. W. Cutchfield 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.

Ordinary Gilmer County.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Gilmer COUNTY. }
Know all Men by these Presents, That I, E. W. Cutchfield of Gilmer County, State of Georgia, do hereby appoint John W. Harrison 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 27 day of February 1894.

Executed in the presence of us

DIRECTIONS.

Send money to me as follows, to

John W. Harrison P. O. Stick
County, Georgia.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name E. W. Cutchfield
County Gilmer
Disability Disease
Amount, \$ 50
Entered on record March 1 1892
W. H. HARRISON,
Secretary of Executive Department.
AGENT,
J. P. Perry
Gen. W. Harrison, State Printer, Atlanta, Ga.

Soldier's Pension.

1894.

(For Those Already Enrolled.)

Name E. W. Cutchfield
County Gilmer
Disability Disease
Amount, \$ 50
27 1894
W. H. HARRISON,
Secretary Executive Department.

WARRANT HAND TO

W. A. C.

Gen. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Sumner County, }
PERSONALLY appears *E. W. Critchfield*
of *Sumner* 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 *Summer* day of *1848*; 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 *E*
of *39*th Regiment of *Volunteers* *Sumner's*
Brigade; that whilst engaged in such military service at the battle of *Gettysburg*
in the State of *Penn*, on the *first* day of *April*

1862, he was wounded as follows: *with pneumonia, fever, dysentery, and severe kidney trouble, was in hospital some time and sent home on sick furlough and never fit for duty as a soldier any more, have been in poor condition and require treatment all the time.*
Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of

fifty Dollars for *3 years*
Sworn to and subscribed before me this the *1st* day of *March* 1892. *E. W. Critchfield*

A. M. Johnson Ordinary.
Note.—State fully nature of wound or character of disease which caused the disability, and explain particularly the extent of the disability.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Sumner County, }
Know all Men by these Presents, That I, *E. W. Critchfield*
of *Sumner* County, State of Georgia, do hereby appoint *J. G. Perry*
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 *first* day of *March* 1892. *E. W. Critchfield* [L. S.]

Executed in the presence of us:

A. M. Johnson
Ordinary

DIRECTION.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Sumner County, }
PERSONALLY appears *E. W. Critchfield* of *Sumner*
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 *June* 1848; 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 *E*, of *39*th Regiment of *Volunteers* *Sumner's* Brigade; that whilst engaged in such military service at the battle of *Gettysburg* in the State of *Penn*, on the *1st* day of *April* 1862, he was

wounded as follows: *with pneumonia, fever, dysentery, and severe kidney trouble, was in hospital some time and sent home on sick furlough and never fit for duty as a soldier any more, have been in poor condition and require treatment all the time.*
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of

fifty dollars, for the year 1893 *1892-1893-1894-1895*
Sworn to and subscribed before me, this, the *27* day of *February* 1894. *A. M. Johnson*

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.

Sumner County, }
I, *A. M. Johnson* Ordinary of said County, do certify that I am well acquainted with *E. W. Critchfield* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this *27* day of *February* 1894. *A. M. Johnson*



Ordinary *Sumner* County.

—LAW OFFICE OF—
JOHN P. PERRY.

Olleyay, Ga., April 17 1885

7
Hon M. H. Harrison
Atlanta Ga.

Dear Sir:

In regard to the application of Mr E. M. Critchfield, as married soldier, I desire to say that his application was sent back a short time ago, as he says, as you remember, when I was in your office some time ago I mentioned this case. And now before I would write you in his behalf, I talked with the parties who signed his application as witnesses. I am well acquainted with them all and them to be the very best citizens of this country, and too honorable to say anything under oath, or otherwise, that is not true. They say Critchfield went into the army well and very stout that they were with him in the service, and that there is no question but what he contracted his disease in the service, and that he has been ever since the war broken down and crippled. They say he made a splendid soldier. I am somewhat acquainted with Critchfield, and from what I know of

—LAW OFFICE OF—
JOHN P. PERRY.

Olleyay, Ga., 1885

II
him, he is unable to do anything. He is very poor. I do not think he will live long. From what can be ascertained about him, I think there is no doubt as to his being a worthy Confederate soldier who was injured from disease contracted in the service, as contemplated by the law. I write this letter to put you in possession of the real state of facts concerning Critchfield. I have no interest in him what ever.

Hoping you are well I remain
Very truly
J. P. Perry

Audited April 19 1889

Wm. R. Wright
COMPTROLLER GENERAL

Gebner
Maimed Soldiers.

Voucher No. 2019

Amount, \$ 50.

Paid to E. H. Critchfield

For Disability
from Disease
Sept 19 1889

Included in Warrant No.
issued to Treasurer.

1889

WARRANT CLERK

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

Haw

Audited Feb. 17 1890

Wm. R. Wright
COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. 1269

Amount \$ 50.

Paid to E. H. Critchfield

For Disabled by
Disease

Feb. 17, 1890

Included in warrant No.
issued to Treasurer.

18

WARRANT CLERK

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

Wabryll

No. 2019

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. April 19 1889.

Mr. *E. W. Crutchfield* of the County
of *Silver* 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

Disability from Disease
He is entitled to receive the sum of *Fifty 00/1* 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.



GOVERNOR.

By the Governor.

W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/1 Dollars,
per above voucher, this *19* of *April* 1889.

E. W. Crutchfield
per J. M. O'Leary

No. 1269

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb. 17 1890.

Mr. *E. W. Crutchfield* of the County
of *Silver* 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 Disease
He is entitled to receive the sum of *Fifty* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1890.

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

J. B. Gordon
GOVERNOR.

By the Governor.

W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/1 Dollars,
per above voucher, this *17* of *Feb* 1890.

E. W. Crutchfield
W. H. Harrison

Audited Feb. 19 1891.

Wm A Wright
CONTROLLER GENERAL.

1891.

Maimed Soldiers.

Voucher No. 1138

Amount \$50.

Paid to C. W. Conutchfield
For Disability by disease

February 18. 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

W. A. Wright

1891.

No. 1133

STATE OF GEORGIA,

EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feb'y 18 1891.

Mr. *C. W. Crutchfield* of the County
of *Gilmer* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Disability from disease
He is entitled to receive the sum of *Fifty 00 00* Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

The Treasurer will pay the same as soon as he receives on this voucher and return same to
Executive Department for warrant.



W. J. Warburton
GOVERNOR.

By the Governor,

W. H. Hamner

Sec'y EXECUTIVE DEPARTMENT.

50

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

Fifty Dollars,
per above voucher, this *18th* of *February* 1891.

E. W. Crutchfield

W. H. Hamner

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

Form No. 2.

STATE OF GEORGIA, County of Liberty

I, Wm. W. Johnson Ordinary in and for said County of Liberty State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth Critchfield 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 Wm. Critchfield 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, 1st day of January 1893.

SEAL

Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County of Liberty

KNOW ALL MEN BY THESE PRESENTS, That I, Elizabeth Critchfield

of

County in said State, do hereby appoint Wm. W. 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 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 1st day of January 1893.

Executed in the presence of us:

DIRECTIONS.

Send amount by check to Wm. W. Johnson and obligor Elizabeth Critchfield

Critchfield, Elizabeth
Widow
Liberty County
FOR THOSE HERETOFORE PAID.

1893.

No. 1099

Widows' Pension,

for year ending February 15th, 1893.

PAID TO

Mrs. E. Critchfield

OF

Liberty COUNTY.

Warrant Issued

1893

AND HANDED TO

W. W. Johnson

(Geo. W. Harrison, State Printer, Atlanta.)

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

Form No. 2.

STATE OF GEORGIA, County of Bibb
I, W. H. Johnson Ordinary in and for said County of
Bibb State of Georgia, hereby certify that I am acquainted with Mrs.
Elizabeth C. Critchfield 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
Wm. C. Critchfield 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
19th day of January, 1893.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Bibb County.
KNOW ALL MEN BY THESE PRESENTS, That I, Elizabeth C. Critchfield
of Bibb County, in said State, do hereby appoint, Wm. C. Critchfield
of Bibb County, my true and lawful attorney in fact, for
me and in my name, to receive and receipt for whatever amount of money I may be entitled to
from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affi-
davit, hereby authorizing my said Attorney to receipt in my name for any Warrant that may be
issued by the Governor, or for any sum of money which may be coming to me for the reason
aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this 19th
day of January, 1893.

Executed in the presence of us:

W. H. Johnson Ordinary.
DIRECTIONS.
Send amount by check to
me at W. H. Johnson and oblige
Elizabeth C. Critchfield

Warrant Issued

1893

AND HANDED TO

W. H. Johnson

Geo. W. Harrison, State Printer, Atlanta.

for year ending February 15th, 1893.

Widow's Pension.

1893.

FOR THOSE HERETOFORE PAID.

Critchfield, Elizabeth C.

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

Form No. 2.

STATE OF GEORGIA, County of Bibb
I, W. H. Johnson Ordinary in and for said County of
Bibb State of Georgia, hereby certify that I am acquainted with Mrs.
Elizabeth C. Critchfield 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 Wm. C. Critchfield 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 19th day of January, 1895.

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA, Bibb County.
KNOW ALL MEN BY THESE PRESENTS, That I, Elizabeth C. Critchfield
of Bibb County, in said State, do hereby appoint, Wm. C. Critchfield
of Bibb County, my true and lawful attorney in fact, for
me, and in my name, to receive and receipt for whatever amount of money I may be en-
titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the
foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any
Warrant that may be issued by the Governor, or for any sum of money which may be
coming to me for the reason aforesaid.

In Witness Whereof, I have hereunto set my hand and seal, this 19th
day of January, 1895.

Executed in the presence of us:

W. H. Johnson Ordinary.
DIRECTIONS.
Send amount by check to
me at W. H. Johnson and oblige
Elizabeth C. Critchfield

for year ending February 15th, 1895.

Widow's Pension.

1895.

FOR THOSE HERETOFORE PAID.

Critchfield, Elizabeth C.

No. 1734

WARRANT ISSUED

1895.

AND HANDED TO

W. H. Johnson

Geo. W. Harrison, State Printer, Atlanta.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Gibson

Personally comes Mrs.

Elizabeth C. Critchfield

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

Gibson

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

continuously ever since April 1849 That she is the Widow ofMartin A. Critchfield who was a Soldier in Company9 of the 39th Regiment of GeorgiaVolunteers, that he enlisted in said Regiment on or about the month of March1861 and served in the Army up to June 22 1863 That he lost hislife on the 22 day of June 1863 (State herefull particulars of the husband's death, when, where and from what cause.) Shot andkilled in Battle near Marietta Ga.

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...; 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

10th day of January 1893.W. J. Johnson Ordinary.

Post-office

Edgewood

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Gibson

Personally Comes Mrs.

E. C. Critchfield

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

Gibson

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

continuously ever since May 1849 That she is the Widow ofMartin A. Critchfield who was a Soldier in Company9 of the 39th Regiment of GaVolunteers, that he enlisted in said Regiment on or about the month of March1861 and served in the Army up to June 1863 That he lost hislife on the 22 day of June 1863 (State herefull particulars of the husband's death, when, where and from what cause.) Shotand killed in Battle New JamesFerry Ga.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1847, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

19 day of June 1895.W. J. Johnson Ordinary.

Post-office

Edgewood

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

Form No. 2.

STATE OF GEORGIA, County of *Gilmer*

Alb Johnson Ordinary in and for said County of
State of Georgia, hereby certify that I am acquainted with Mrs.
E. C. Critchfield 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, 1850, and has not lived out of the State since that date. That she is the
widow of *Murton A Critchfield* 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 *24* day of *January* 1894.

SEAL

Alb Johnson

Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, *Gilmer* County.

KNOW ALL MEN BY THESE PRESENTS, That I, *E. C. Critchfield*
of *Gilmer*
County in said State, do hereby appoint, *Mrs. A. D. Critchfield*
of *Gilmer* County, my true and lawful attorney in fact, for
me, and in my name, to receive and receipt for whatever amount of money I may be en-
titled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the
foregoing affidavit, hereby authorizing my said Attorney to receipt in my name for any
Warrant that may be issued by the Governor, or for any sum of money which may be
coming to me for the reason aforesaid.

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

Executed in the presence of us:

Alb Johnson

Ordinary

DIRECTIONS.

Send amount by *check* to
me at *care of Ordinary, Gilmer* and oblige
E. C. Critchfield

Geo. W. HARRISON, State Printer, ATLANTA.

WARRANT ISSUED
BY MY RIGHT

1894.

OF *Gilmer* COUNTY.

E. C. Critchfield

PAID TO
for year ending February 15th, 1894.

WIDOWS' PENSION,

No. *1657*

1894.

FOR THOSE HERETOFORE PAID.

Critchfield, E. C.
Gilmer County

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of *Gibson*

Personally comes Mrs.

E. C. Crutchfield

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

Gibson

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

continuously ever since

1849 That she is the Widow of

Martin A. Crutchfield

who was a Soldier in Company

G

of the

89

Regiment of

2d

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

March

1861 and served in the Army up to

June

1863 That he lost his

life on the

day of *June*

1863 (State here

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

*Shot**near Battle of Perry, Georgia**June 1863*

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

Sworn to and subscribed before me, this

24 day of *June*, 1894.

Ordinary.

Post-office

E. C. Crutchfield
Mary
Crutchfield

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

Form No. 2.

STATE OF GEORGIA, County of Barren
 I, W. A. Johnson Ordinary in and for said County of
Barren State of Georgia, hereby certify that I am acquainted with Mrs.
E. C. Critchfield 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 Martin S. Critchfield
 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 11 day of January 1896.
 {SEAL} W. A. Johnson Ordinary.

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Barren
 I, E. C. Critchfield hereby authorize W. A. Johnson
 of Barren Co. Ga to receive and receipt for the pension paid hereon and request
 that he remit same to me at Barren Co. Ga
 In Witness Whereof, I have hereunto set my hand and seal, this
 day of January 1896.
E. C. Critchfield [L.S.]
 Executed in the presence of
W. A. Johnson
Ordinary

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

Form No. 2.

STATE OF GEORGIA, County of Barren
 I, W. A. Johnson Ordinary in and for said County of
Barren State of Georgia, hereby certify that I am acquainted with Mrs.
E. C. Critchfield 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 Martin S. Critchfield
 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 _____ day of _____ 1897.
 {SEAL} _____ Ordinary.

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of Barren
 I, E. C. Critchfield hereby authorize W. A. Johnson
 of Barren Co. Ga to receive and receipt for the pension paid hereon and request
 that he remit same to me at Barren Co. Ga
 In Witness Whereof, I have hereunto set my hand and seal, this
 day of January 1897.
E. C. Critchfield [L.S.]
 Executed in the presence of
W. A. Johnson

Critchfield E. C.
Barren County
 FOR THOSE HERETOFORE PAID
1896.
 No. 557
WIDOW'S PENSION,
 for year ending February 15th, 1896.
 PAID TO
E. C. Critchfield
 of
Barren County.
 WARRANT ISSUED
21
 AND HANDLED TO
at
 Geo. W. Johnson, State Printer.

Critchfield E. C.
Barren County
 FOR THOSE HERETOFORE PAID
1897.
 No. 2974
WIDOW'S PENSION,
 for year ending February 15th, 1897.
E. C. Critchfield
 of
Barren County.
 RICHARD JOHNSON,
 Commissioner of Pensions.
 WARRANT ISSUED
21 1897.
 AND HANDLED TO
at
 Geo. W. Johnson, State Printer.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Liberty

Personally Comes Mrs.

M. C. Critchfieldwho being sworn, says on oath, that she is a bona fide resident of said county of
Liberty State of Georgia, and that she has resided in said State
continuously ever since.1855 That she is the Widow ofMartin A. Critchfield who was a Soldier in Company
I of the 39 Regiment of GeoVolunteers, that he enlisted in said regiment on or about the month of March
1861 and served in the Army up to June 1863 That he lost his
life on the 22 day of June 1863 (State herefull particulars of the husband's death, when, where and from what cause.) Shot and
Killed in Battle Near Danvers
Ferry GeoDeponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,
and that she has never married since his death aforesaid, that she became his wife in the year 1857,
that Georgia is her home and she resided in this State 23d day of December, 1890, and has not
lived in any other State or locality since that date. I have been allowed a pension as a resident of
Liberty 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

16 day of May 1896.

Ordinary.

Post-office

M. C. Critchfield
none

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Liberty

Personally Comes Mrs.

M. C. Critchfieldwho being sworn, says on oath, that she is a bona fide resident of said county of
Liberty State of Georgia, and that she has resided in said State
continuously ever since.1857 That she is the Widow ofMartin A. Critchfield who was a Soldier in Company
I of the 39 Regiment of GeoVolunteers, that enlisted in said regiment on or about the month of March
1861 and served in the Army up to June 1863 That he lost his
life on the 22 day of June 1863 (State herefull particulars of the husband's death, when, where and from what cause.) Killed in
Battle Near Danvers Ferry GeoDeponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,
and that she has never married since his death aforesaid, that she became his wife in the year 1857,
that Georgia is her home and she resided in this State 23d day of December, 1890, and has not
lived in any other State or locality since that date. I have been allowed a pension as a resident of
Liberty County for the year ending February 15th, 1896, and now apply for
the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this

16 day of May 1897.

Ordinary.

Post-office

M. C. Critchfield
Danvers Ferry Geo

POWER OF ATTORNEY.

STATE OF GEORGIA,

Gilmer County.

I Mrs. E. C. Critchfield hereby authorize John Wm. A. Wright of Atlanta Ga.

to receive and receipt for the pension paid hereon and request that he remit same to me through the Ordinary at Ellijay Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 20th day of January 1900.

Mrs. E. C. Critchfield [L. S.]

Executed in presence of

J. C. Allen

Critchfield, E. C. Mrs.
Gilmer Co.

To Those Herebefore Paid.

1900.

Wm. W. Critchfield (C. 1899)

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO Mrs. E. C. Critchfield

of Gilmer County,

Widow of William A. Critchfield

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 15 1900,

AND HANDED TO

Wright

By W. W. Critchfield State Printer, Atlanta.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of

Gilmer

Personally Comes Mrs.

E. C. Critchfield

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

Gilmer

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

continuously ever since *April 7th* 18*36*. That she is the Widow of*Martin A. Critchfield*

who was a soldier in Company

I of the*39th*

Regiment of

*Ga.*Volunteers, that he enlisted in said regiment on or about the month of *March*18*62* and served in the Army up to *June* 18*64*. That he lost hislife on the *22nd* day of *June* 18*64*. (State hereparticulars of the husband's death, when, where and from what cause) *Killed in bat-**tle near Marietta Ga June 20th 1864.*

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18*57*.

I have been allowed a pension as a resident of *Whitfield* County for the year ending February 15th, 189*9*, and now apply for the pension provided by law for the year ending February 15th, 1900.

Sworn to and subscribed before me, this

20th day of *January* 1900.*J. C. Allen*, Ordinary.*Mrs. E. C. Critchfield*Post Office *Swains Creek Ga.*

State of Georgia,

County of

Gilmer

Ordinary of said County, certify that I am well acquainted

with Mrs. *E. C. Critchfield*, 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 *1st* day of *January* 18*90*.Given under my official signature and seal, this the *20th* day of *January* 1900.

Official Seal.

J. C. Allen, Ordinary of *Gilmer* County.

POWER OF ATTORNEY.

STATE OF GEORGIA, (Elizabethtown)

Gibson County

Know all Men by these Presents, That I, *L. C. Cantalfield*of *Gibson*

County, in said State, do hereby appoint

John A. Wright
 of *Gibson* 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 *October* [L. S.]

Executed in the presence of us:

L. C. Cantalfield
L. C. Cantalfield
L. C. Cantalfield

WITNESSES

If allowed, send amount by

me at *Elizabethtown* and oblige

Widow's Pension

PAID TO

L. C. Cantalfield

Gibson COUNTY

\$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

L. C. Cantalfield
Elizabethtown, P. C. (Ga.)
Gibson County (Elizabethtown)
 1891.

No. 1290

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

County in said State, do hereby appoint

of William C. Gu 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 April 1891.

Executed in the presence of us:

DIRECTIONS.

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



Warrant Issued

AND HANDED TO

1891

County.

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of Liberty

In person came before me, the undersigned Ordinary

in and for the County of Liberty

Mrs. L. C. Critchfield, who being sworn according to law, says under oath that she is the widow of M. A. Critchfield who was a soldier in

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

39 Regiment of Ga Volunteers; that he enlisted in said

service on or about the 12 day of March 1862, and was in the

Union Army up to June 1864 That while in the

Army, he was on the 22 day of June 1864, (See Note No. 1)

While at Powder Springs Ga. was shot and killed in the Battle at Powder Springs

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 12th day of October 1857, and that she has resided in Georgia continuously since the 12 day of March 1847; 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

8 day of April 1891.

Ordinary.

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

Affidavit for Three Witnesses.

Form No. 2.

STATE OF GEORGIA,

In person came before me, the undersigned Ordinary

County of Gibson in and for said County, witnesses

and Mrs. L. C. Critchfield (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say, under oath, that, from their own personal knowledge, Mrs. L. C. Critchfield of the County of Gibson

State of Georgia, is the widow of Mr. A. Critchfield, who was a soldier in Company 8 of the 89 Regiment of Ga. Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 12 day of March 1862 That while in said service, or by reason of said service in the Army, he lost his life as follows: on the 22^d day of June 1864 was shot and killed in the Battle at Powder Springs Ga. said soldier was shot in the head with piece of shell or grape and killed instantly. A. W. Lunkinsky Surgeon

that he was present and fulfilled

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

Sworn to, and subscribed before me, this, the 8 day of April 1891.

Ordinary.

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

Form No. 3.

STATE OF GEORGIA,

I, A. M. Johnson Ordinary

County of Gibson in and for said County of Gibson

State of Georgia, hereby certify that I am acquainted with Mrs. L. C. Critchfield 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 8 day of April 1891.

SEAL

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.

17431

1894 (Mho)
Critchfield, Margretta
Silmon, Conner
APPLICATION FOR PENSION

DUE DECEASED SOLDIER

UNDER ACT 1891.

Mrs. *M. S. Critchfield*
Widow of *J. W. Critchfield*
County *Silmon*

Approved and paid

Feb 27 1894
W. A. Goh
Executive Department

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

E 1958

APPLICATIONS FOR PENSIONS DUE DECEASED SOLDIERS.

Under Act Approved October 9, 1891.

STATE OF GEORGIA,

COUNTY OF

Sibona

Personally appears before me Mrs. *Marietta S Critchfield* of said County of *Sibona* State of Georgia, who, being duly sworn, says on oath that she is the widow of *Enoch W Critchfield* who was a disabled Confederate soldier, and whose name had been duly enrolled as entitled to a pension of *Fifty* Dollars annually from

the State of Georgia. That said *Enoch W Critchfield* died on the *Eighth* day of *November* 189*4* in *Sibona* County and that at his death, his right to said pension for the year ending October 26, 189*6* had accrued, but had not been paid to him for the said pension year.

Applicant, as his widow, applies for the amount which would have been paid him had he lived to this time

Sworn to and subscribed before me, this

16 day of *February* 189*5*

W. Johnson

Ordinary.

M. J. Critchfield

If allowed, I authorize *Mr. A. Wright of Telfer County Surgeon* to receive and receipt for the amount.

Attest

W. Johnson

M. J. Critchfield

NOTE.—Above form may be used by the guardian or next of kin for any dependent minor children of the deceased soldier who dies and leaves no widow, by altering the name to suit the facts.

STATE OF GEORGIA,

Sibona

COUNTY.

I, *W. Johnson* Ordinary of said County, do certify that I am personally acquainted with Mrs. *M. S. Critchfield* and I know personally, or from sworn testimony of witnesses before me, that she is the widow of *Enoch W Critchfield*, a deceased Confederate Soldier, who has been allowed a pension under the law on account of disability proven, and that at the date of his death his right to a pension had accrued but had not been paid for the current pension year.

Given under my official signature and seal, this

Fifteenth

day of

February

189*6*



W. Johnson

Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA.

John County *John* hereby authorize
W. S. Critchfield of *Tulsa* to
 to receive and receipt for the pension allowed and request that he remit same to
 at *18* day of *March* 1896
 Witness my hand and seal this
 Executed in presence of

W. S. Critchfield [SEAL]

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA, personally came Mrs. *M. S. Critchfield*
 COUNTY OF *John* who says on oath she is the
 widow of *W. S. Critchfield* to whom, in the County of
John State of *Georgia* she was married on the
30 day of *December* 18*90* that she remained his wife up to the *8*
 day of *November* 1894, at which time he died, and that she has not since married.
 At the time of his death he was a resident of *John* County, in said State of
 Georgia, and was on the invalid pension roll of the State of Georgia, having been allowed a pension of
 \$50- per annum on account of (here state the grounds of his disability)

Disease of back, head and heart. He
suffered continuously with pain in his back,
dizziness of head, double vision, palpitation
of heart, shortness of breath and partial
insanity. Could not sleep at night but very
little. For three weeks prior to his death he suf-
fered intensely from heart trouble, shortness
of breath and prostration. His death occurred
suddenly when the family was asleep at night.

Deponent further says that she is now a resident of *John* County and has con-
 tinuously resided in the State of Georgia since the *1st* of *Jan.* 189*5*
 She applies for the pension provided by Act of the General Assembly, approved December 16th, 1895.

Sworn to and subscribed before me this *18* day of *March* 1896

W. S. Critchfield
W. S. Critchfield Ordinary of *John* County.
 Note—All blank spaces must be filled before signing.

Widow's Pension,

No. 385-

Mrs. M. S. Critchfield
 1896

County of *John*
 Widow of *W. S. Critchfield*
 Warrant issued *4/11* 1896

and handed to *W. S.*

RICHARD JOHNSON,
 Sec. Ex. Dept.

GO W. S. CRITCHFIELD

Ex. Dep. 21 March 1896
Applicant will make
further & positive proof
of the date her mar-
riage - by three
witnesses who posi-
tively know the date
place thereof -
Rich. Johnson
(Sec. Ex. Dept.)

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

Form No. 2.

STATE OF GEORGIA, County of Wilkes

I, Wm. H. Johnson Ordinary in and for said County of

Wilkes State of Georgia, hereby certify that I am acquainted with Mrs. M. S. Critchfield 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 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 9 day of May 1897.

SEAL

Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, Wilkes County.

I, M. S. Critchfield hereby authorize Wm. H. Johnson of Wilkes County to receive and receipt for the pension paid hereon and request that he remit same to me at my place.

In Witness Whereof, I have hereunto set my hand and seal, this day of May 1897.

M. S. Critchfield [L. S.]

Executed in the presence of

POWER OF ATTORNEY.

State of Georgia, Wilkes County.

I, M. S. Critchfield hereby authorize Wm. H. Johnson of Wilkes Co. Ga. to receive and receipt for the pension paid hereon and request that he remit same to me, through the Ordinary at Wilkes Co. by check.

In Witness Whereof, I have hereunto set my hand and seal, this day of May 1897.

M. S. Critchfield [L. S.]

Executed in the presence of

J. C. Sullivan Ordinary

Critchfield, M. S.
Wilkes County
FOR THOSE HERETOFORE PAID.
1897.
No. 2971
WIDOW'S PENSION,
for year ending February 15th, 1897.
M. S. Critchfield
OF
Wilkes County.
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
2/4
AND HANDED TO
W. H. J.
1897.
GEO. W. MARRISON, STATE PRINTER, ATLANTA.

Critchfield, M. S.
Wilkes County
FOR THOSE HERETOFORE PAID.
1898.
No. 930
WIDOW'S PENSION,
For year ending February 15th, 1898.
PAID TO
M. S. Critchfield
OF
Wilkes County,
Widow of E. H. Critchfield
RICHARD JOHNSON,
Commissioner of Pensions.
WARRANT ISSUED
2/1
AND HANDED TO
W. H. J.
1898.
GEO. W. MARRISON, STATE PRINTER, ATLANTA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Gilmer

Personally Comes Mrs.

M. S. Critchfield

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

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

continuously ever since

18

That she is the Widow of

who was a Soldier in Company

of the

Regiment of

39th

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

186~~2~~ and served in the Army up to

December

186~~2~~

That he lost his

life on the

day of

Nov

18

94 (State here

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

that he died of heart disease as result of
injury in service

That her said husband E. M. Critchfield was
an invalid pensioner

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,

and that she has never married since his death aforesaid, that she became his wife in the year 1860

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

Gilmer County for the year ending February 15th, 1896, and now apply for

the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this

day of

1897.

Ordinary.

M. S. Critchfield

Post-office

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Gilmer

Personally Comes Mrs.

M. S. Critchfield

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

E. M. Critchfield

who was a Soldier in Company

39th

of the

Regiment of

4a

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

186~~2~~ and served in the Army up to

186~~4~~

That he lost his

life on the

8th

day of

November

18

94 (State here

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

at his house in said County. Died of heart
disease as result of injury 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 1860

I have been allowed a pension as a resident of Gilmer 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

1st

day of Jan'y

1898.

J. C. Collins

Ordinary.

M. S. Critchfield

Post-Office

Gilmer

State of Georgia,

Gilmer

County.

with Mrs. M. S. Critchfield

J. C. Collins

Ordinary of said County, certify that I am well acquainted

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

1st

day of

Dec

1890.

Given under my official signature and seal this the

1st

day of

Jan'y

1898.

J. C. Collins

Ordinary of

Gilmer

County.

Official Seal.

Georgia Personally came mine W. D.
Gibson County Cretchfield Minton & W.
& Cretchfield who on oath
says that there were present at the
marriage to said W. Cretchfield on 30
day of December 1860 the following named
Persons to wit: ^{the following named} Linn Caplan Isaac
Davis - William Busby & Thomas
Simpson Jeff Low Noel Hyatt and
that there were four clergymen from
Savannah being Bluntenship and Julia
Bell. None also present that they per-
sonally is in South Carolina as stated and that
the other two are living as far as I know
but I cannot conveniently obtain the
testimony and hereby submit the foregoing
as the best available testimony I
can make at this time
Sworn to and Subscribed to by W. D. Cretchfield
before me March 26/1866
J. H. Johnson Districting

John Dick Johnson
Sec &c

Dear Sir - I send the foregoing testimony
for Mrs Cretchfield the names Davis is
very particular dear as to the fact
of the marriage also the date
of the testimony of other witnesses who
were present is signed to can be had but
the names live about the town of Milledgeville
and are in common to reach
J. H. Johnson

Georgia Personally came Thomas
Gibson County J. Davis of said County
before the undersigned
Ordinary and for said County well known
to said Ordinary as a citizen of good repute
and entitled to full faith and credit in
all his statements who being duly sworn
according to Law makes the following
statement in the matter of the claim for
Pension of Mrs M. S. Cretchfield widow
of W. D. Cretchfield
That she has met and personally acquainted
with said W. and M. S. Cretchfield for
forty five years that the name of Mrs
M. S. Cretchfield before her marriage
to said W. Cretchfield was M. S.
Hyatt. That said W. Cretchfield
and said M. S. Hyatt was married
in Gibson County Georgia at the
Residence of Alex Bluntenship on the
30 day of December 1860
That she obtained a knowledge of
said marriage by having been
present at said marriage and from
knowing officiated at said marriage
that she was a Justice of the Peace
and duly commissioned and authorized
to solemnize and did solemnize said
marriage under license regularly
issued by John W. Greer Ordinary of
Gibson County
That she has acquainted with the parties
(over)

before their Marriage and after their Marriage
con up to the death of E W Cutchfield
about ~~October~~ November 1894 that said Wilson
has not remembered since the death of
said Soldier

And appears further states that said E W
and M S Cutchfield lived together as
husband and wife from the date of their
Marriage until the death of said E W
Cutchfield and that the fact of their
Marriage was never questioned
by any one to his knowledge appears
further states that there were a very few
Persons present at said Marriage and
he does not now remember any of
Persons who were present
Sworn to and Subscribed } Thomas J Davis
before me March 26-1896
J M Johnson on Oath

Engr 03
John County Personally Exam R E
Miller of said County
of Good Faith who on oath says that
he was not present at the Marriage of
E W and M S Cutchfield but was
present on the day following at the
Home of the Mother of said E W Cutch-
field at the Dinner or Reception
given the Parties this was about the
last day of December 1894 the fact of
their Marriage has never been questioned
Sworn to and Subscribed } J B Miller
before me March 26-1896
J M Johnson on Oath (over)