Thaxton, John B.
Oglethorpe Co.
2 Eaton, Geo. P.

No. 1869

APPLICATION FOR ALLOWANCE

FOR

Loss of 2 Fingers

Applicant John B. Thaxton

County Oglethorpe

Amount 10

Date of Warrant March 25

Entered on record

March 25 1889

Wm H

SECRETARY EXECUTIVE DEPARTMENT.

Allowed

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 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." Thereby 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.

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 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 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.

No. 1869

APPLICATION FOR ALLOWANCE

FOR

Applicant, John P. Thaxton

County, Oglethorpe

Amount $10

Date of Warrant March 25

Entered on record March 25 1889

SECRETARY EXECUTIVE DEPARTMENT.

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,

Oglethorpe County.

PERSONALLY appears John P. Thaxton of Oglethorpe 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 12th day of July 1865; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company K, of th Regiment of Georgia Volunteers Cumming's Brigade; that whilst engaged in such military service, at the battle of Winchester in the State of Virginia, on the day of 1864, he was wounded as follows: Shot through articulations of middle and ring fingers of right hand thereby causing amputation of both of said fingers at their entirety

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 19th day of March 1889

Geo. E. Easter Clerk

John P. Thaxton

Clerk

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:

STATE OF GEORGIA, Oglethorpe County.

PERSONALLY came Edgar Maxwell - W. T. Young - G. H. Smith citizens of Oglethorpe county, in said State, who, being duly sworn, say that they are acquainted with John P. Thaxton and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a *bona fide* citizen of this State, and resides in Oglethorpe county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this 19 day of March 1889
Geo. H. Lester. Clerk Supr. Court

Edgar Maxwell
W. T. Young
G. H. Smith

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

STATE OF GEORGIA, Oglethorpe County.

PERSONALLY comes before me Jos. J. Bacon Ordinary of said county, W. Z. Foust and W. H. Reynolds, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined J. P. Thaxton and after such examination say that the applicant has been injured as follows: Shot through the phalangeal extremity of metacarpal bones of right hand necessitating the amputation of both middle and ring fingers of said hand in their entirety

Sworn to and subscribed before me, this 19th day of March 1889
J. J. Bacon
ORDINARY.

W. Z. Foust M.D.
W. H. Reynolds 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, Oglethorpe County.

I, J. J. Bacon Ordinary of said county, do certify that I am well acquainted with John P. Thaxton the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in 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 Geo. H. Lester before whom the foregoing affidavits were made and power of attorney was signed, is a clerk of the Superior Court of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 19th day of March 1889

J. J. Bacon
Ordinary Oglethorpe County.

POWER OF ATTORNEY.

STATE OF GEORGIA, Oglethorpe County.

Know all Men by these Presents, That, I, John P. Thaxton of Oglethorpe county, in said State, do hereby appoint Hon. Wm. A. Wright 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.

In witness whereof I have hereunto set my hand and seal, this 19th day of March 1889.

John P. Thaxton (L. S.)

Executed in the presence of us:
J. J. Bacon
Geo. H. Lester, Clerk Supr. Court

[illegible]
John P. Thaxton

STATE OF GEORGIA,
Oglethorpe County.

I, J. J. Bacon Ordinary of said county, do certify that I am well acquainted with John P. Thaxton 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 Geo. H. Lester before whom the foregoing affidavits were made and power of attorney was signed, is a clerk of the Superior court of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 20th day of February 1890

J. J. Bacon
Ordinary Oglethorpe County.

STATE OF GEORGIA,
Oglethorpe County.

I, J. J. Bacon Ordinary of said County, do certify that I am well acquainted with John P. Thaxton 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 Geo. H. Lester before whom the foregoing affidavits were made and power of attorney was signed, is a clerk of the Superior court of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 3d day of March 1891.

J. J. Bacon
Ordinary Oglethorpe County.

1890.

No. 2314

APPLICATION FOR ALLOWANCE.

FOR YEAR ENDING OCTOBER 31, [illegible]

—FOR—

Loss 2 fingers

Applicant, Jno P. Thaxton

County, Oglethorpe

Amount, 10.00

Date of warrant, [illegible]

Entered on record [illegible] 1890

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO W A Wright

1891

No. 269

Application for Allowance

FOR THE YEAR ENDING OCTOBER 31, [illegible]

FOR Loss of two fingers

Applicant, Jno P. Thaxton

County, Oglethorpe

Amount, 10

Date of Warrant, Mch 17

Entered on record Mch 17 189_

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO W A Wright

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Oglethorpe County.

PERSONALLY appears John P. Thaxton of said 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~~ Birth day of 18 ; 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 K, of 8 th Regiment of Ga Volunteers Anderson's Brigade; that whilst engaged in such military service, at the battle of Wilderness in the State of Virginia, on the day of May 1863, he was wounded as follows: Shot by minnie ball in right hand causing loss of two middle fingers of said right hand entirely — fingers be taken out ... in the hand —

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 Ten dollars.

Sworn to and subscribed before me, this the 20th day of February 1890.
Geo. H. Lester, Clerk

John P. X Thaxton (his mark)

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
Oglethorpe County.

KNOW ALL MEN BY THESE PRESENTS, That I, John P. Thaxton of said county, in said State, do hereby appoint Hon. W. A. Wright of Atlanta Ga 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 20th day of February 1890

John P. X Thaxton (his mark) [L. S.]

Executed in the presence of us:
J. J. Bacon
Geo. H. Lester, Clerk
Supr. Court

DIRECTION.

Send money to me as follows, by Express & Care of Ordinary to Lexington P.O. Oglethorpe County, Georgia.

John P. X Thaxton (his mark)

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Oglethorpe County.

PERSONALLY appears John P. Thaxton of Oglethorpe 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 12th day of July 1830; 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 K, of 8 th Regiment of Ga Volunteers Anderson's Brigade; that whilst engaged in such military service at the battle of Wilderness in the State of Virginia, on the 6th day of May 1864, he was wounded as follows: Shot by minnie ball in right hand. Ball passing entirely through said right hand. Thereby causing the loss of two middle fingers from said hand and causing said hand to be substantially, essentially and permanently disabled. I have heretofore been allowed a pension of Ten Dollars for loss of two fingers — but said hand has now become entirely disabled.

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 Ten dollars, for for life years past

Sworn to and subscribed before me, this the 3d day of March 1891.
Geo. H. Lester, Clerk

John P. X Thaxton (his mark)

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,
Oglethorpe County.

Know all Men by these Presents, That I, J. P. Thaxton of Oglethorpe County, State of Georgia, do hereby appoint Hon. Wm. A. Wright 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.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 3d day of March 1891.

John P. X Thaxton (his mark) [L. S.]

Executed in the presence of us:
J. J. Bacon
Geo. H. Lester, Clerk
Supr. Court

DIRECTION.

Send money to me as follows, by Express Care Ordinary to Lexington P. O. Oglethorpe County, Georgia.

John P. X Thaxton (his mark)

STATE OF GEORGIA.

Oglethorpe County.

I, J. J. Bacon Ordinary of said county, do certify that I am well acquainted with John P. Thaxton 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.

J. J. Bacon

Ordinary Oglethorpe County.

No. 863

SOLDIERS' PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 20, 1892.

Name John P. Thaxton

County Oglethorpe

Disability Loss of finger

Amount, $ 11

Entered on record 1892.

W. H. HARRISON, Secretary of Executive Department.

AGENT.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Oglethorpe County.

Know all Men by these Presents, That I John P. Thaxton of Oglethorpe County, State of Georgia, do hereby appoint Benjamin A. Wright of Atlanta 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 4th day of April 1893.

John P. Thaxton [L. S.]

mark

Executed in the presence of us:

J. J. Bacon, Ordinary

C. J. St. Peter.

DIRECTION.

Send money to me as follows, by check or Express C. O. D. to Lexington P. O.

Oglethorpe County, Georgia.

John P. Thaxton

mark

1893.

No. 2351

Application for Allowance

For the Year Ending October 20, 1893.

FOR

Loss of 2 fingers

Applicant, John P. Thaxton

County, Oglethorpe

Amount, 11

Date of Warrant,

Entered on record, 1893

Secretary Executive Department.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Oglethorpe — County.

Personally appears John P. Thaxton — — — of Oglethorpe — — County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the — — day of 1830; 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 K, of 8 th Regiment of Georgia Volunteers Anderson's Brigade; that whilst engaged in such military service at the battle of Wilderness in the State of Virginia — —, on the 6 — day of May 1864, he was wounded as follows: Shot by minnie Ball in right hand causing loss of the two middle fingers in their entirety —

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

— — Dollars for loss of two fingers

Sworn to and subscribed before me this the 12 day of March 1892.

his
John P. Thaxton
mark

O. J. Bacon 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,
Oglethorpe — County.

Know all Men by these Presents, That I, John P. Thaxton of Oglethorpe — County, in said State, do hereby appoint Hon. Wm. A. Wright of Oglethorpe 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:

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 12 — day of March 1892.

his
John P. Thaxton [L. S.]
mark

Executed in the presence of us:

James J. Green N. Pub. Ogl. Co.

O. J. Bacon

DIRECTION.

Send money to me as follows, by Express Care Ordinary

to — Lexington P. O.

Oglethorpe — County, Georgia.

his
John P. Thaxton
mark

Wilkins

O. J. Bacon

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Oglethorpe — County.

Personally appears John P. Thaxton of Oglethorpe 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 12 — day of May 1832; 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 K, of 8 th Regiment of Georgia Volunteers Anderson's Brigade; that whilst engaged in such military service at the battle of Wilderness — — — in the State of Virginia, on the day of May 1863, he was wounded as follows: Shot by minnie Ball in right hand causing entire loss of two fingers of said hand — as set forth heretofore.

Deponent desires to praticipate 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, — —

~~Ten~~ — — — dollars, for loss of two fingers

Sworn to and subscribed before me, this, the 4 — day of April 1893.

his
John P. Thaxton
mark

O. J. Bacon 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,
Oglethorpe — County.

I, O. J. Bacon — — Ordinary of said County, do certify that I am well acquainted with John P. Thaxton — 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 O. J. Bacon — — — — before whom the foregoing affidavits were made and power of attorney was signed, is an Ordinary — — of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 4 — day of April 1893.

O. J. Bacon

Ordinary Oglethorpe — County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Oglethorpe COUNTY.

Know all Men by these Presents, That I, Geo. P. Thurlow of Oglethorpe County, State of Georgia, do hereby appoint Wm. Lowe or Wright of Oglethorpe 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 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 6th day of March 1894.

Geo. P. Thurlow mark [L. S.]

Executed in the presence of us

J. D. Bacon

DIRECTIONS.

Send money to me as follows, by Express or Chk. C/ ordinary to Sparta P. O. Oglethorpe County, Georgia.

Geo. P. Thurlow mark

(For Those Already Enrolled.)

No. 2176

Soldier's Pension.

1894.

Name Geo. P. Thurlow

County Oglethorpe

Disability Rec'd Discharge

Amount, $ 30

1894.

W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Oglethorpe County,

KNOW ALL MEN BY THESE PRESENTS, That I, [illegible] of [illegible] County, State of Georgia, do hereby appoint [illegible] 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 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 [illegible] day of [illegible] 1895.

[illegible] [L. S.]

Executed in presence of us

J. D. Bacon

DIRECTIONS.

Send money to me as follows, by [illegible] to [illegible] P. O. [illegible] County, Georgia.

(For Those Already Enrolled.)

No. 2176

SOLDIER'S PENSION.

1895.

Name [illegible]

County Oglethorpe

Disability [illegible]

Amount, $ 30

1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, Oglethorpe County.

PERSONALLY appears Jno. P. Thurston of Oglethorpe 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 12 day of July 1832; 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 K, of 8 th Regiment of Georgia Volunteers Anderson's Brigade; that whilst engaged in such military service at the battle of Wilderness in the State of Va, on the 6 day of May 1862, he was wounded as follows: Shot by minnie Ball in right hand, causing entire loss of two middle fingers

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 Ten dollars, for the year 1893 and previously

Sworn to and subscribed before me, this, the 6 day of March 1894.

Jno. P. his + mark Thurston

J. J. Bacon 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, Oglethorpe County.

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

Given under my official signature and seal, this 6th day of March 1894.

Affix your seal here.

J. J. Bacon

Ordinary Oglethorpe County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, Oglethorpe County.

Personally appears Jno. P. Thurston of Oglethorpe County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 18 ; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company K, of 8 th Regiment of Georgia Volunteers, Anderson's Brigade; that whilst engaged in such military service at the battle of Wilderness in the State of Va, on the 6 day of May 1862, he was wounded as follows: Shot by minnie Ball in right hand causing loss of two middle fingers on said right hand

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 Ten dollars, for the year 189 4 and previously

Sworn to and subscribed before me, this, the 5 day of Feb 1895.

Jno. P. Thurston

J. J. Bacon 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, Oglethorpe County.

I, J. J. Bacon Ordinary of said County, do certify that I am well acquainted with Jno. P. Thurston the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Feby 1895.

Affix your seal here.

J. J. Bacon

Ordinary Oglethorpe County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, Chas. P. Chastain hereby authorize Hon. Linton Wright of Atlanta Ga.

to receive and receipt for the pension paid hereon and request that he remit same to Ino. C. Ordinary by Clk. Superior Ct.

at Cherokee Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of July 1896.

Chas. P. Chastain [L. S.]
his mark

Executed in presence of us
Jno. Bacon Ordinary
F. M. Slater

(For Those Already Enrolled.)

No. 2036

SOLDIER'S PENSION. 1896.

Name Chas. P. Chastain.
County Cherokee
Disability Loss fingers
Amount, $12
By
1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Atty

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cherokee County.

I, Chas. P. Chastain hereby authorize Hon. Linton Wright of Atlanta Ga.

to receive and receipt for the pension paid hereon and request that he remit same to Ino. C. Ordinary by Clk. Sup. Ct.

at Cherokee Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 15 day of July 1897.

Chas. P. Chastain [L. S.]
his mark

Executed in presence of
Jno. Bacon Ordinary
F. M. Slater

ACT OF 24 OCT. 1887.

(For Those Already Enrolled.)

No. 1296

INVALID SOLDIER'S PENSION. 1897.

Name Chas. P. Chastain
County Cherokee
Disability Loss fingers
Amount, $12
1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Atty

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Oglethorpe County. }

Personally appears Jno. P. Thaplin of Oglethorpe 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 [illegible] 1832; 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 K, of 8th Regiment of [illegible] Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of [illegible], on the 6th day of May 1862, he was wounded, injured or diseased as follows:

wounded by minnie Ball in right hand, Causing loss of two fingers of said hand in their entirety

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Oglethorpe county been allowed a pension of Ten — dollars, for the year 1895 and previously

Sworn to and subscribed before me, this, the 10th day of July 1896. } Jno. P. Thaplin his mark

J. J. Bacon

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, }
Oglethorpe County. }

I, J. J. Bacon Ordinary of said County, do certify that I am well acquainted with Jno. P. Thaplin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 July 1896.

Affix your seal here.

J. J. Bacon

Ordinary Oglethorpe County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Oglethorpe County. }

Personally appears Jno. P. Thaplin of Oglethorpe 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 [illegible] 1832; 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 K, of 8th Regiment of [illegible] Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of [illegible], on the 6th day of May 1862, he was wounded, injured or diseased of follows:

48 Balls of Minnie ball in right hand and Causing loss of two fingers on said right hand—

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 Oglethorpe county been allowed an invalid pension of ~~Ten~~ Ten Dollars, for the year 1896 and previously

Sworn to and subscribed before me, this, the 10th day of July 1897. } his Jno. P. Thaplin mark POST OFFICE Philomath

J. J. Bacon 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, }
Oglethorpe County. }

I, J. J. Bacon Ordinary of said County, do certify that I am well acquainted with Jno. P. Thaplin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 July 1897.

Affix your seal here.

J. J. Bacon

Ordinary Oglethorpe County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Oglethorpe County,

I, Jno. P. Thaxton hereby authorize Hon. Wm. A. Wright of Atlanta Ga —

to receive and receipt for the pension paid hereon and request that he remit same to Ord. Ordinary by chk or Express

at Lexington Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18th

day of Feby 1898.

Jno. P. his Thaxton mark [L. S.]

Executed in presence of

J. J. B[illegible]

L. C. [illegible]

(For Those Already Enrolled.)

No. 2818

INVALID SOLDIER'S PENSION. 1898.

Name Jno. P. Thaxton

County Oglethorpe

Disability Two fingers

Amount $10.00 2/23 1898.

RICHARD JOHNSON, Commissioner of Pensions.

WARRANT HANDED TO W. A. W.

GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,
Oglethorpe County.

I, Jno. P. Thaxton hereby authorize Hon. Wm. A. Wright of Atlanta Ga.

to receive and receipt for the pension paid hereon and request that he remit same to Ord. Ordinary by check

at Lexington Ga.

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

day of Feby 1899.

Jno. P. Thaxton [L. S.]

Executed in presence of

C. B. Bacon, Ordinary

Thaxton, John P.
Oglethorpe Co.

CODE SECTION 1250.

(For Those Already Enrolled.)

No. 2181

INVALID SOLDIER'S PENSION. 1899.

Name Jno. P. Thaxton

County Oglethorpe

Disability Two fingers

Amount, $10.00 2/18 1899.

RICHARD JOHNSON, Commissioner of Pensions.

WARRANT HANDED TO W.

GEO. W. HARRISON, STATE PRINTER, ATLANTA

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Oglethorpe County.

Personally appears Jno. P. Thurlow of Oglethorpe 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 Feb 1832; 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 K, of 8 th Regiment of Geo — Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va —, on the 6th day of May 1863, he was wounded, injured or diseased as follows:

Wounded in Battle of Wilderness Va on 6th day of May 1863 in right hand, causing loss of two fingers.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Oglethorpe county been allowed an invalid pension of Zero — Dollars, for the year 1897 and previously.

Sworn to and subscribed before me, this the 18th day of Feby 1898. Jno. P. Thurlow
POST-OFFICE Philomath Ga

D. D. Bacon

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,
Oglethorpe County.

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

Given under my official signature and seal, this 18th day of Feby, 1898.

Affix your seal here.

D. D. Bacon
Ordinary Oglethorpe County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Oglethorpe County.

Personally appears Jno. P. Thurlow of Oglethorpe 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 Feb 1832; 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 K, of 8 th Regiment of Geo Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va., on the 6th day of May 1863, he was wounded, injured or diseased as follows:

At Battle of Wilderness Va on above date was shot in right hand, causing entire loss of two fingers on said right hand

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of Oglethorpe County been allowed an invalid pension of Zero Dollars, for the year 1898 and previously.

Sworn to and subscribed before me, this the 12th day of Feby — 1899. Jno. P. Thurlow
POST OFFICE Philomath Ga

D. D. Bacon 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,
Oglethorpe County.

I, D. D. Bacon — Ordinary of said County, do certify that I am well acquainted with Jno. P. Thurlow the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Feby 1899.

Affix your seal here.

D. D. Bacon
Ordinary Oglethorpe County.

POWER OF ATTORNEY.

STATE OF GEORGIA, Oglethorpe County.

I, Jno. P. Thaxton hereby authorize Hamm & Wright of Chamblee Ga.

to receive and receipt for the pension paid hereon and request that he remit same to me C/ ordinary by clk or Ex

at Lexington Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 15-th day of Feby 1900.

his
Jno. P. X Thaxton [L. S.]
mark

Executed in presence of

J. J. Bacon Ordinary

CODE SECTION 120
(For Those Already Enrolled.)
No. 1967

INVALID
SOLDIER'S PENSION.
1900.

Name Jno. P. Thaxton
County Oglethorpe
Disability Two fingers
Amount, $10 00
Warrant issued Mch 7 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Chas

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, Oglethorpe County.

I, Jno. P. Thaxton hereby authorize J. J. Bacon, ordinary of Lexington Ga.

to receive and receipt for the pension paid hereon and request that he remit same to me C, ordinary by check or otherwise

at Lexington Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 9th day of Feby 1901.

his
Jno. P. X Thaxton [L. S.]
mark

Executed in presence of

J. J. Bacon, ordinary

CODE SECTION 120
(For Those Already Enrolled.)
No. 3122

DISABLED
SOLDIER'S PENSION.
1901.

Name Jno. P. Thaxton
County Oglethorpe
Disability Two fingers
Amount, $10 00
2/19 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Bacon

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Oglethorpe **County.**

Personally appeared Jno. P. Thaxton of Oglethorpe 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 his birth 1832; 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 K, of 8 th Regiment of Geo — Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va —, on the 6 day of May 1863, he was wounded, injured or diseased as follows:

at Battle of Wilderness Va on about date was shot by minnie Ball in Right Hand causing entire loss of two Fingers from said hand

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 Oglethorpe County been allowed an invalid pension of Ten —— Dollars, for the year 189 9 and prematurely

Sworn to and subscribed before me, this, the 15 — day of Feby 1900. Jno. P. Thaxton his mark

POST OFFICE Philomath

J. J. Bacon 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,
Oglethorpe **County.**

I, J. J. Bacon ——— Ordinary of said County, do certify that I am well acquainted with Jno. P. Thaxton the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Feby, 1900.

Affix your Seal here.

J. J. Bacon
Ordinary Oglethorpe County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Oglethorpe **County.**

Personally appears Jno. P. Thaxton of Oglethorpe 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 his birth 1832; 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 K, of 8 th Regiment of Georgia Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va —, on the 6th — day of May 1863, he was wounded, injured or diseased as follows:

At Battle of Chancellorsville Va on about date was Wounded in Right Hand Causing the loss of two fingers from said hand, as will appear by reference to proofs of file in Pension office.

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 Oglethorpe —— County been allowed an invalid pension of Ten —— Dollars, for the year 1900. and prematurely

Sworn to and subscribed before me, this the 9th day of Feby 1901. Jno. P. Thaxton his mark

Postoffice Philomath

J. J. Bacon, ordinary

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,
Oglethorpe **County.**

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

Given under my official signature and seal, this 9th day of Feby 1901.

Affix your Seal here.

J. J. Bacon
Ordinary Oglethorpe County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Oglethorpe County.

I, Jno. P. Thaxton hereby authorize J. J. Bacon
Ordinary of said County
to receive and receipt for the pension paid hereon and request that he remit same to
me by
at

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15th
day of Jany, 1902.

Jno. P. Thaxton [L. S.]
his mark

Executed in presence of
J. J. Bacon, Ordinary

(FOR THOSE ALREADY ENROLLED.)
No. 2414

DISABLED
SOLDIER'S PENSION
1902.

Name Jno. P. Thaxton
County Oglethorpe
Co. K 8th Regiment Ga Vols
Disability two fingers
Amount, $10 per
1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Orderly

Geo. W. Harrison, State Printer, Atlanta.

Thaxton, Jno. P.
Oglethorpe Co. Ga.
Pvt. Co. K 8th Ga Inf.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Oglethorpe County.

I, John P. Thaxton hereby authorize J. J. Bacon
Ordinary of Oglethorpe
to receive and receipt for the pension paid hereon and request that he remit same to
J. J. Bacon by
at Lexington Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1st
day of January 1903.

John P. Thaxton [L. S.]
his mark

Executed in presence of
J. J. Bacon, Ordinary

(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 1950.
No. 2718

DISABLED
SOLDIER'S PENSION
1903.

Name John P. Thaxton
County Oglethorpe
Co. "K" Regiment 8th
Disability two fingers
Amount, $10 per
1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison State Printer, Atlanta

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Oglethorpe County.

Personally appears Jno. P. Thaxton of Oglethorpe 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 [illegible] 1832; 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 K, of 8 th Regiment of [illegible] Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va, on the 6 day of May 1862, he was wounded, injured or diseased as follows:

1st Battle of Wilderness Va on above date was shot by Minnie Ball in right hand causing loss of two fingers from said hand as will appear by proofs in Pension office.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1902. I have heretofore, under said law, as a resident of Oglethorpe County, been allowed an invalid pension of Ten — Dollars, for the year 1901 and previously

Sworn to and subscribed before me, this the 5th day of May 1902. Jno. P. Thaxton mark

Post-office Philomath Geo.

J J Bacon, Ordinary

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,
Oglethorpe County.

I, Jno. P. Thaxton Ordinary of said County, do certify that I am well acquainted with Jno. P. Thaxton the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1902.

Affix your seal here

J J Bacon
Ordinary Oglethorpe County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Oglethorpe County.

Personally appears John P. Thaxton of Oglethorpe 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 [illegible] 1832; 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 ——— in Company K, of 8 th Regiment of Ga Volunteers, Anderson's Brigade; that whilst engaged in such military service in the State of Va, on the 6 day of May 1862, he was wounded, injured or diseased as follows:

At Battle of Wilderness Va on above date, was shot by Minnie ball in right hand, causing loss of two fingers.

See proofs in Pension Office

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 Oglethorpe County, been allowed an invalid pension of $10.00 Dollars, for the year 1902. & previously

Sworn to and subscribed before me, this the 1 day of January 1903. John P. Thaxton mark

Post-office Philomath Geo.

J J Bacon O O C

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,
Oglethorpe County.

I, J J Bacon Ordinary of said County, do certify that I am well acquainted with John P. Thaxton the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 January 1903.

Affix your seal here

J J Bacon
Ordinary Oglethorpe 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,
Oglethorpe COUNTY.

I, Jno P. Thurston hereby authorize
Jule Cland of Lexington
to receive and receipt for the pension paid hereon, and request that he remit same to
me by mail
at Philomath Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26th
day of Jan 1904.

Jno P. his x mark Thurston [L. S.]

Executed in presence of
Jule Cland, Ordy.

Thurston, John P.
Oglethorpe County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. # 1062

DISABLED
SOLDIER'S PENSION
1904.

Name Jno P. Thurston
County Oglethorpe
Co. K Regiment 5
Disability Wound
Amount, $ 10.00
FEB 2 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO Ordy

Geo. W. Harrison, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Oglethorpe **County.**

Personally appears John P. Thurston of Oglethorpe 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 1831; 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 K, of 8 th Regiment of Georgia Volunteers Anderson's Brigade; that whilst engaged in such military service in the State of Virginia, on the day of May 1862, he was wounded, injured or diseased as follows: In the hand causing loss of use of fingers which unfits him for manual labor or work of any kind

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 Oglethorpe County, been allowed an invalid pension of Ten Dollars, for the year 1903.

Sworn to and subscribed before me, this the 26th day of Jan 1904.
Jack Cloud Ordinary

Jno P. Thurston
Post-office Philomath

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,
Oglethorpe **County.**

I, Jack Cloud Ordinary of said County, do certify that I am well acquainted with Jno P. Thurston the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 Jan 1904.

Affix your Seal here.

Jack Cloud
Ordinary Oglethorpe County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1904.

Audited March 20 1889.

Wm F Wright

COMPTROLLER GENERAL

Maimed Soldiers.

Voucher No. 1369

Amount. $ 10.

Paid to Jno P Thaxton

For Loss of Two fingers

March 21 1889

Included in Warrant No.

issued to Treasurer.

1889

WARRANT CLERK.

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

Audited Mch 11 1890

Wm F Wright

COMPTROLLER GENERAL.

Maimed Soldiers.

Voucher No. 2214

Amount $ 10

Paid to Jno P Thaxton

For Loss of Two fingers

March 1890.

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

W F Wright

No. 1951

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. Atlanta, Ga., March 25 1889

Mr. John P. Thaxton of the County of Oglethorpe 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

Loss of Two Fingers

He is entitled to receive the sum of Ten & 00/ Dollars for such disability, the same being the allowance due for the year ending October 24, 1889.

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

J. B. Gordon
GOVERNOR.

By the Governor

CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Ten & 00/ Dollars.

per above voucher, this 28 of March 1889.

John P. Thaxton
J. W. Wright

No. 2214

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. Atlanta, Ga., Mch 11 1890

Mr. John P. Thaxton of the County of Oglethorpe 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 2 fingers

He is entitled to receive the sum of Ten & 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.

J. B. Gordon
GOVERNOR.

By the Governor,

W. N. Harrison
CLERK EXECUTIVE DEPARTMENT.

$ 10 00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Ten & 00/ Dollars,

per above voucher, this 11 of March 1890

John P. Thaxton
J. W. W.

Wrayton, John P.

1891.

Maimed Soldiers.

AUDITED

Audited MAR 17 1891 1891.

Wm. Rymph
COMPTROLLER-GENERAL.

Voucher No. 7695

Amount $ 10

Paid to Jno. P. Wrayton

For Loss of 2 fingers

Mch 17 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

W. A. Wright

1891

No. 2695

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. March 17 1891.

Mr. Jno. D. Thurston of the County of Oglethorpe 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 2 fingers

He is entitled to receive the sum of Ten ——— 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.

RECEIVED PAID

W. J. Northen
GOVERNOR.

By the Governor,

SEC'Y EXECUTIVE DEPARTMENT.

$ 10

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

Ten 00/100 ——— Dollars,

per above voucher, this 17 of March 1891.

Jno D Thurston

W M T