QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Cobb County.

C W Pyron of said State and County is hereby presented as a witness in support of the application of W. P. Stanley for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? Charles W Pyron — Acworth Cobb County Georgia.

2. How long and since when have you known W P Stanley the applicant? 5-5-0-60 years — Acworth since Febry 1862

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Marietta Cobb County Georgia Been a resident of this State for 80-or 60 years to my knowledge.

4. When, where and in what Company and Regiment did W. P. Stanley enlist during war from 1861 to 1865? (Give date and place) July-15-20-1862- Acworth Ga. Company A - 18th Georgia Regiment.

5. How did you obtain your information of this Service? I was in same Co. and Reg. and Offi cers Corps in my Company & Regt at Fredericksburg Va. about such date.

6. How long within his own personal knowledge did he perform actual military service with this Company and Regiment? (give date) From May 8-1862 - to April 6th 1865-

7. When and where was his Command surrendered or discharged (give date and place) Regiment Captured on April 6-1865- at Sailors Creek an affidavit was made out in that date with Prisoners for return extract below

8. Were you personally present at the Surrender? Yes

9. If not, where were you and how came you there? I was present

10. Was the applicant personally present with his Command at surrender? No - Except Captured as set out below

11. If not where was he and how came him there?

12. When did he leave his Command? Some time of Capture Where was his Command when he left it? Sailors Creek for what cause did he leave? Helping Dick Cheatham who was wounded to ambulance By whose authority did he leave Commander Capt Hunting and how long was he granted leave? No official Record Sick, Wounded How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was there

13. In what way was he prevented from returning to his Command? General R E Lee surrendered and Command was Captured on April 9-1865- How do you know? I was there at the Surrender

14. What effort did he make to return to his Command and how do you know? None as Command was Captured April 6-1865-

15. Was applicant captured as a prisoner No If so, when and where? X

In what prison was he held? X and when released

Sworn to and subscribed before me, this the 5 day of Oct 1915

Chas W Pyron

Jas Abbott Notary Public

Ordinary, of Cobb County, Georgia.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
Cobb County.

Personally before me comes R. A. Hill & S. C. McEachern who on oath says that they are freeholders residing in said County and we know W P Stanley the applicant for pension and we know the property that is now in the use, possession and control of himself and of its cash value to wit: (Make List by items and value.)

One Horse & Hack Buggy Value $100.00
Value of Account 400.00

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items.) None
2. When and to whom was it sold or given to? —
3. What was the price paid or stated to be paid? —
4. What relation is the party to applicant? —
5. What disposition was made of the proceeds of the sale? —
6. Was the disposition of this property made in good faith and full values? —

or was it made to obtain a pension? —

Sworn to and subscribed before me, this the 4 day of Oct 1915

J M Gann Ordinary, of Cobb County.

R A Hill
S C McEachern

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J M Gann Ordinary of said County, certify that I know the applicant W P Stanley for Pension is the person he represents himself to be and resides in said County. That I also know C W Pyron & J S Goodson the witness swearing to the service and R A Hill & S C McEachern who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of W P Stanley shows that his value for tax is in 1908 $1266.00 for 1909 $ for 1910 $ for 1911 $1600 for 1912 $1700 for 1913 $1700 for 1914 $1600 for 1915 $1700

Sworn under my hand and official seal of office this 26 day of Oct 1915

J M Gann Ordinary, of Cobb County.

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

Georgia Cobb County

Personally appeared before the undersigned W. P. Stanley, who being duly sworn, on oath makes the following statements as an amendment to his application for pension, the same having been disallowed on account of the valuation affiant put on a piece of property, in the town of Smyrna Ga. in his returns for taxation, for several years preceding the time of his application

1st Applicant now avers that he was mistaken as to the value of said property, and that while affiant owned said property, the same was injured in value by the said town of Smyrna elevating street in front of said property so that the flow of water, when rains come went directly on affiants property, rendering the same undesireable for resident property, therefore causing the property to remain empty, that affiant being unable to sell the same, and getting no returns therefrom traded the same for 4¼ acres of ground north of Marietta, giving the house & lot in Smyrna for said 4 acres of ground on even swap, and that affiant now puts a value on said 4¼ acres to be $1000.00 for which amt affiant would be glad to sell the same there being no improvements on the same, and that this is the only property affiant now owns of any kind

W. P. Stanley

Sworn to and subscribed before me this June 12th/16

J. M. Gann
Ordinary

OFFICE OF

J. M. GANN

JUDGE OF PROBATE COURT, COBB COUNTY

MARIETTA, GEORGIA

Georgia Cobb County:

Personally appeared before the undersigned R. A. Hill, and J. W. Morris, residents of said County, being duly sworn say that they are well acquainted with the property now owned by W. P. Stanley, same being about Four and one fourth acres of land lying just out the City limits of the Marietta, we believe that said land not to be worth more than $8.50.00 at a full estimate, that we also know the property formily owned by said W. P. Stanly in the town of Smyrna, being one house and lot, and that said propertywas not nor is not worth more than $1.000.00 or $1100.00 at the highest, that said Stanley gave this property, for the 4¼ acres above refered to; that we have no interest in the valuation of this property whatever

This June 23/16

R. A. Hill

J. W. Morris

Sworn to and subscribed to before me this June 23/16, and I certify that R. A. Hill, &, J. W. Morris are well known to me, they being freeholders and that their statements are entitled to full faith and credit.

J. M. Gann
Ordinary Cobb County Ga.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J M Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth Stonsell 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. Stonsell 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 11th day of Feby. 1893.

SEAL

J M Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Elizabeth Stonsell of Cobb County in said State, do hereby appoint J M Stone Ordny of Cobb 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 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 Feby. 1893

Elizabeth her mark Stonsell

Executed in the presence of us:
G M Fleming
T D Power.

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

Stonsell, Elizabeth
Cobb County
FOR THOSE HERETOFORE PAID.
Fee Paid
1893.
Ind Paulding Co 1891
No. 29606

Widows' Pension,

for year ending February 15th, 1893.

—PAID TO—
Mrs Elizabeth Stonsell
—OF—
Cobb County.
Formerly Paulding County

Warrant Issued
4/13 1893

AND HANDED TO
J M Stone

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally come Mrs. Elizabeth Stonsell

who being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has *resided* in said State continuously ever since 18 12 That she is the Widow of Wm. Stonsell who was a Soldier in Company A. of the 18th Regiment of Ga Volunteers, that he enlisted in said Regiment on or about the month of June 186 1 and served in the Army up to 27th June 186 2 That he lost his life on the 27th day of June 18 62 (*State here full particulars of the husband's death, when, where and from what cause.*) (

That the Said deceased Soldier while in the Confederate army was Killed on 27th day of June 1862. At the battle of Gaines' farm in Va.

(Applicant drew from Paulding County last Year)

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 1840; 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 11th day of July 1893.
Jos. Stone Ordinary.

Elizabeth + Stonsell
Post-office Acworth Ga

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth Stonsell 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. Stonsell 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 5th day of Feby 1894.

SEAL J. M. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Elizabeth Stonsell of Cobb County in said State, do hereby appoint J. M. Stone of Marietta 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 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 5th day of Feby 1894.

× Elizabeth her + mark Stonsell × [L. S.]

Executed in the presence of us:

Geo D Collins ×

[illegible] ×

DIRECTIONS.

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

Stonsell, Elizabeth
Cobb County

FOR THOSE HERETOFORE PAID.

1894.

No. 816

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—

Mrs. Elizabeth Stonsell

—OF—

Cobb County.

WARRANT ISSUED

7/13 1894,

AND HANDED TO

J. M. Stone

GEO. W. HARRISON, State Printer, Atlanta.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth Stonsell 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. Stonsell 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 22nd day of Jany 1895.

SEAL J. M. Stone Ordinary.

Form No. 3

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Elizabeth Stonsell of Cobb County in said State, do hereby appoint J. M. Stone of Marietta 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 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 22nd day of Jany 1895.

× Elizabeth her + mark Stonsell × [L. S.]

Executed in the presence of us:

D. N. Stokely

W. P. D. L. Lemm

DIRECTIONS.

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

Stonsell, Elizabeth
Cobb C.

FOR THOSE HERETOFORE PAID.

1895.

No. 486

WIDOW'S PENSION,

for year ending Febuary 15th, 1895.

—PAID TO—

Mrs. Elizabeth Stonsell

—OF—

Cobb County.

widow of Wm. Stonsell

WARRANT ISSUED

24 Jny 1895.

AND HANDED TO

My

GEO. W. HARRISON, State Printer,

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb

Personally comes Mrs. Elizabeth Stansell

who being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has *resided* in said State continuously ever since 1812 That she is the Widow of Wm. Stansell who was a Soldier in Company A. of the 18th Regiment of Ga. Volunteers, that he enlisted in said Regiment on or about the month of June 1861 and served in the Army up to June 27 1862 That he lost his life on the 27th day of June 1862 (*State here full particulars of the husband's death, when, where and from what cause.*) (

He was killed in battle at Cold Harbor Virginia on June 27th 1862

)

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1833; 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 5th day of February 1894.
J. M. Stone Ordinary.

Elizabeth her mark Stansell
Post-office Acworth Ga

Give full particulars here

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb

Personally Comes Mrs. Elizabeth Stansell

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has *resided* in said State continuously ever since 1812 That she is the Widow of Wm. Stansell who was a Soldier in Company A. of the 18th Regiment of Ga. Volunteers, that he enlisted in said Regiment on or about the month of June 1861 and served in the Army up to June 1862 That he lost his life on the 27th day of June 1862 (*State here full particulars of the husband's death, when, where and from what cause.*) (

He was killed at Gain's farm Va. on the 27th day of June 1862. Killed dead in said battle

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1833 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 22nd day of Jany 1895.
J. M. Stone Ordinary.

Elizabeth her mark Stansell
Post-office Acworth Ga

In presence of D. V. Stokely J.P.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. H. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth Stansell 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. Stansell 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 5th day of Feby. 1896.

{SEAL} J. H. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I Elizabeth Stansell hereby authorize J. H. Stone of Marietta Ga to receive and receipt for the pension paid hereon and request that he remit same to me by Rem 5th

In Witness Whereof, I have hereunto set my hand and seal, this day of Feby 1896.

Elizabeth X Stansell [L.S.]
mark

Executed in the presence of

A. M. Hicks

Stansell Elizabeth
Cobb County
Ga

FOR THOSE HERETOFORE PAID.

1896.

No. 3575

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. Elizabeth Stansell

OF

Cobb County.

widow of Wm. Stansell

WARRANT ISSUED

1896.

AND HANDED TO

Geo. W. Harrison, State Printer.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. H. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Elizabeth Stansell 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. Stansell 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 6th day of Feby 1897.

{SEAL} J. H. Stone Ordinary.

Form No 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I Elizabeth Stansell hereby authorize J. H. Stone of Marietta Ga to receive and receipt for the pension paid hereon and request that he remit same to me at Marietta Ga

In Witness Whereof, I have hereunto set my hand and seal, this 6th day of Feb. 1897.

Elizabeth X Stansell [L.S.]
mark

Executed in the presence of

J. H. Stone J. P.

Stansell Elizabeth
Cobb County
Ga

FOR THOSE HERETOFORE PAID.

1897.

No. 3605

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Elizabeth Stansell

OF

Cobb County.

widow of Wm. Stansell

RICHARD H. JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

1897.

AND HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb

Personally Comes Mrs. Elizabeth Stansell

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1812 That she is the Widow of Wm. Stansell who was a Soldier in Company A of the 18th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of June 1861 and served in the Army up to June 27th 1862 That he lost his life on the 27th day of June 1862 (State here full particulars of the husband's death, when, where and from what cause.) (While in line of battle he was struck by minnie ball fired from the enemies line and was killed by same in the battle in front of Richmond on 27th June as aforesaid

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 1833 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 Cobb County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this 5th day of Feby 1896.
J. M. Stone Ordinary.

Elizabeth her x mark Stansell
Post-office Acworth Ga.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb

Personally Comes Mrs. Elizabeth Stansell

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1870 That she is the Widow of William Stansell who was a Soldier in Company A of the Eighteenth Regiment of Georgia Volunteers, that enlisted in said regiment on or about the month of June 1861 and served in the Army up to 27th of June 186 That he lost his life on the 27th day of June 1862 (State here full particulars of the husband's death, when, where and from what cause.) he was color bearer and mounted on a canon and was shot off of it shot at Cams [illegible] [illegible]

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 1836, 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 Cobb 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 6th day of Feb 1897.
J. M. Stone Ordinary.

Elizabeth her mark Stansell
Post-office Acworth

POWER OF ATTORNEY.

State of Georgia, Cobb County.

I, Elizabeth Stansell hereby authorize J. M. Stone of Cobb Co to receive and receipt for the pension paid hereon and request that he remit same to me by him

In Witness Whereof, I have hereunto set my hand and seal, this 4th day of Feb 1898.

Elizabeth her mark Stansell [L. S.]

Executed in the presence of

D. V. Stokely J. P.

Stansell Elizabeth
Cobb County

For Those Heretofore Paid.

1898.

To Building Co. 1899

NO. 2470

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. Elizabeth Stansell

OF

Cobb County,

Widow of Wm. Stansell

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

Feby 8 1898.

AND HANDED TO

J M S

GEO. W. HARRISON, STATE PRINTER, ATLANTA

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. Elizabeth Stansell

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1812 That she is the Widow of Wm Stansell who was a Soldier in Company A of the 18th Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of June 1861 and served in the Army up to June 27th 1862 That he lost his life on the 27th day of June 1862 (State here full particulars of the husband's death, when, where and from what cause.) at Gaines Farm in Virginia. That in engagement and killed on 27th day of June 1862.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1833

I have been allowed a pension as a resident of Cobb 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 4 day of Feb 1898. J.M. Stone Ordinary. } Elizabeth her + mark Stansell Post-Office Acworth Ga

State of Georgia, Cobb County. } I J.M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. Elizabeth Stansell who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the I understand 1812

Given under my official signature and seal this the 4th day of Feby 1898.

J.M. Stone

Ordinary of Cobb County.

Official Seal.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Elizabeth Stansell hereby authorize John Awtry of Marietta to receive and receipt for the pension paid hereon and request that he remit same to me at Acworth by Check

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2 day of Feby. 1901.

Elizabeth her X mark Stansell [L. S.]

Executed in presence of

Stansell Elizabeth
Cobb Co

To Those Heretofore Paid.

1901.

No. 2245

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO

Mrs. Elizabeth Stansell

OF

Cobb County.

Widow of Will Stansell

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

2/7 1901,

AND HANDED TO

Awtry

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

Paid

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Elizabeth Stansell, hereby authorize John Awtry of Marietta to receive and receipt for the pension paid hereon, and request that he remit same to at

In Witness Whereof, I have hereunto set my hand and seal, this 14th day of Jany 1902.

Elizabeth Stansell [L. S.]

Executed in presence of

Stansell Elizabeth
Cobb County

To Those Heretofore Paid.

1902.

No. 251

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. Elizabeth Stansell

OF

Cobb County,

Widow of

Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/16 1902

AND HANDED TO

Ordy

GEO. W. HARRISON STATE PRINTER ATLANTA GA

FORM No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. Elisabeth Stansell

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1812. That she is the Widow of Wm Stansell who was a soldier in Company A of the 18th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of June 1861, and served in the Army up to June 27 1862. That he lost his life on the 27th day of June 1862 (*State here particulars of the husband's death, when, where and from what cause*) That he lost his life by gun Shot wound While engaged in the Battle of Seven Pines on the 27th of June 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1833

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

Sworn to and subscribed before me, this 2nd day of Feb 1901. John Awtrey Ordinary. } Elisabeth Wm Stansell her mark Acworth Ga. Post Office

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

Given under my official signature and seal, this the 4th day of Feb 1901.

John Awtrey
Ordinary of Cobb County.

{ Official Seal. }

FORM No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. Elizabeth Stansell

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1812. That she is the Widow of Wm Stansell who was a soldier in Company A of the 18th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of June 1861, and served in the Army up to June 27th 1862. That he lost his life on the 27th day of June 1862 (*State here particulars of the husband's death, when, where and from what cause*) That he lost his life by gun Shot wound while engaged in the battle of Seven Pieces in Va on 27th of June 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1833.

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

Sworn to and subscribed before me, this 14th day of Jany 1902. John Awtrey, Ordinary. } Elizabeth Stansell Post Office

State of Georgia, Cobb County. } I John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. Elisabeth Stansell who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereself to be, and that she has continuously resided in this State since the day of 18

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

John Awtrey
Ordinary of Cobb County.

{ Official Seal. }

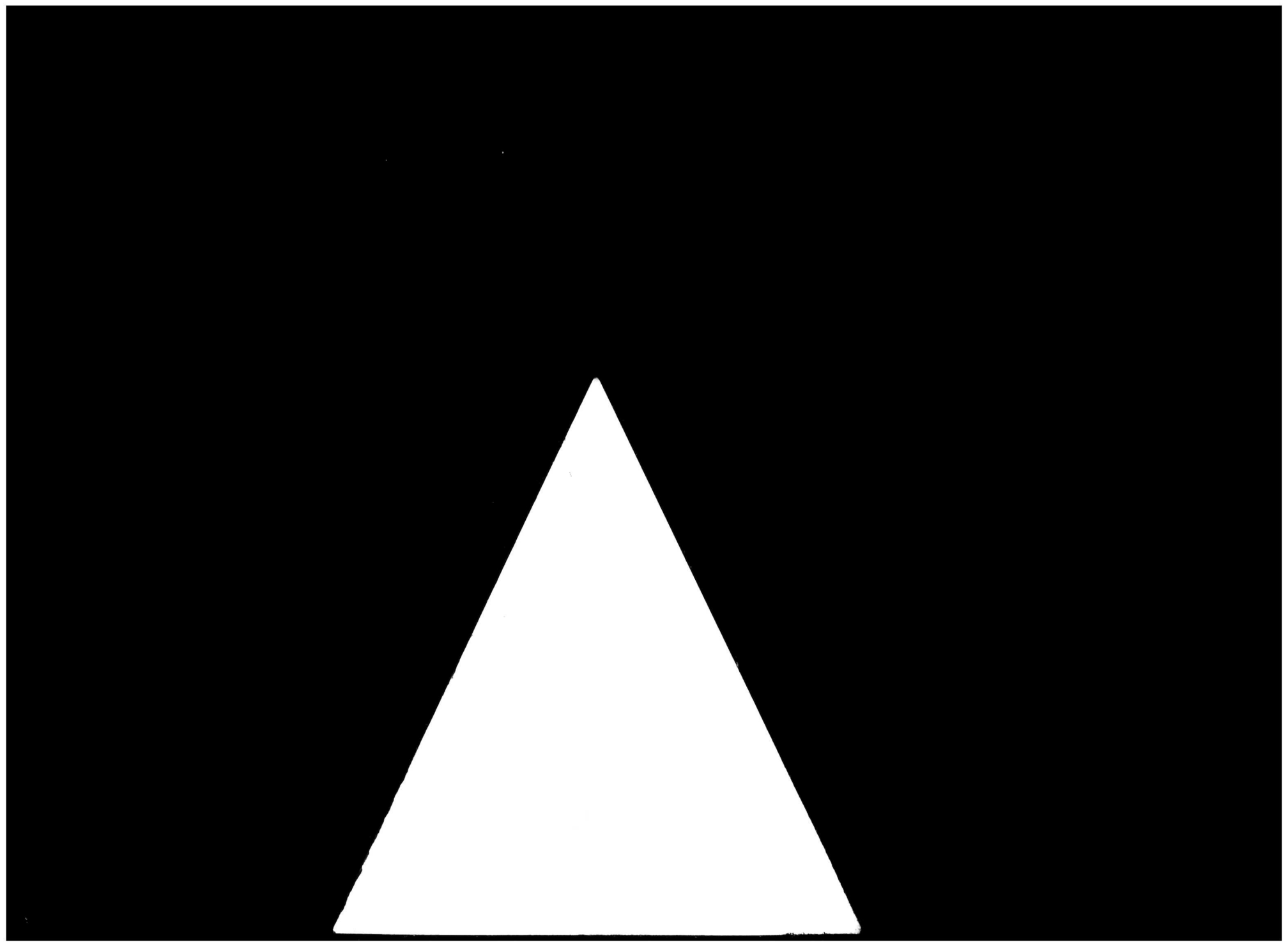
NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1902.

NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1902.

State of Georgia Paulding County

I E W Y Allgood Ordinary in and for said County of Paulding, State of Georgia hereby certify that Mrs Elizabeth Stansell the applicant for a pension in this case and from proof presented to me that Mrs Elizabeth Stansell did apply for a pension from this Paulding County for the year Ending 4th Feb 1892 and such claim for pension as the widow of William Stansell was paid and I further certify this applicant is the same identical person given under my hand and seal of office this the 8th day of February 1893

E. W. Y. Allgood Ordinary



Stansell, James B.
[illegible]

Code Section 1250.

No. [illegible]

INVALID

SOLDIER'S PENSION,

1906

Name James B. Stansel
County Coff
Co. A. 18th Ga. Regt.
Disability Rupture
Amount, $
190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison State Printer, Atlanta.

8/31/05

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

I, _____ hereby authorize _____
of _____ to receive and receipt for the pension allowed and
request that he remit same to _____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 190 _____

_____ [L. S.]

Executed in the presence of

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

I, _____ hereby authorize _____
of _____ to receive and receipt for the pension allowed and
request that he remit same to _____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 190

_____ [L. S.]

Executed in the presence of

Stansell James B.
Cobb County

Code Section 1250.

No. _____

INVALID
SOLDIER'S PENSION,
1906

Name James B. Stansel
County Cobb
Co. A. 18th Ga. Regt.
Disability Rupture
Amount, $ _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

8/31/05

Form No. 1.

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

The Instructions as Set Out in the Notes Must be Observed.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears James B. Stansel of said Cobb County, State of Georgia, who being duly sworn, says on oath that he was born on the 16th day of July 1834, that he is a *bona fide* citizen and resident of Georgia, and has been continuously since the 16th day of July 1834, that he enlisted in the military service of the Confederate States (or the State of _____) on the 11th day of June 1861, during the war between the States, and served in Company A of 18th th Regiment of Ga. Volunteers Hood's Brigade, and was honorably discharged on the 9th day of April 1865; that whilst engaged in such military service, and in line of duty in the State of Virginia, on the _____ day of November 1861 he was disabled or wounded as follows: Applicant at said time and place had an attack of mumps. Before I entirely recovered I was put on a forced march from our camp near Dumfries a distance of about four miles to Freestone Point on the Potomac River. As a result of said forced march I had a relapse of the mumps, which resulted in a rupture of the left side. This rupture has grown worse as I advanced in age, and now I am rendered by it practically incompetent to perform the ordinary manual avocations of life

Where was command surrendered? Appomattox va. except those previously captured.

Was applicant present? Yes — If not, where was he? _____ How come there? _____

And by whose authority? State fully: _____

Deponent desires to participate in the benefits of Section 1250 of the Code, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ending October 26th, 1905

Sworn to and subscribed before me, this the 28th day of July 1905. } J B Stansel

John Awtry
Ordinary.

Post Office _____

NOTE.—State fully nature of wound or character of disease which causes the disability, and *explain particularly* the extent of the disability. If claim is based on disease, give *full and connected history* of disease, tracing it directly to the service.
NOTE.—Do not trouble to mention wounds which do not disable.
NOTE.—The Ordinary will see that *all* blank spaces are filled when the affidavits are signed.

Form No. 2.

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, Cobb County.

PERSONALLY appears before me, the undersigned Ordinary in and for said County, Logan House, L. H. Tanner and ____, personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say under oath, that they are personally and well acquainted with J. B. Stansel whose application is herewith presented for a pension, that he has resided in this State continuously since the 18th day of ____ 1861, that he served in Company A of the ____ Regiment of Georgia Hoods Brigade, and from our personal knowledge he, while in line of duty, was injured by the service as follows: (*Give full statement, and tell in your own language when, where, and how the injury happened, or the disease was contracted, and to what extent applicant is disabled from work as a direct result thereof. If he does any labor, or can do any, state what.*)

In November 1861, in State of Virginia, while we were in Camp near Dumfries, applicant had an attack of Mumps. Before he entirely recovered we were put on a forced march of about four miles to Occoquan Point, on the Potomac river. As a result of said forced march applicant had a relapse of the mumps, they fell on him and caused a rupture of the left side, and he still suffers from said rupture, in consequence of which he is rendered practically incompetent to perform the ordinary manual occupations of life. This trouble has grown worse as applicant advanced in age.

Where was applicant's command surrendered? Appomattox Va, April 9th 1865.

Was he with it? Yes. If not, where was he? On October 1864 he was captured at Jarrett's Station and was confined in Old Capitol Prison at Washington D.C. until April 6th 1865, when he was paroled.

Where were you all? Horse was captured 3 days before.

How do you know the facts you state to be true? I was present as stated, in same Co.

We personally know above stated facts. We were with him in the army and have known him ever since.

He was honorably discharged or retired from the service on 9th day of April 1865. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1861. We have no interest in the recovery of a pension by him.

his
Logan X House
mark

L H Tanner

John Brewer

Sworn to and subscribed before me, this 3 day of Aug. 1905.

John Dunlap
Ordinary.

NOTE 1.—The Ordinary will see that the full text of the affidavit is understood by the witnesses, and that they are legally qualified to the same.
2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.
3.—All blank spaces must be filled when signed.
4.—Three witnesses are required.

Form No. 3.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA, Cobb County.

PERSONALLY comes before me John Dunlap Ordinary of said County, E. M. Bailey and W. C. Humphries, both known to me as reputable physicians of said County, who, being severally sworn, say on oath, that they have carefully examined J. B. Stansel and after such personal examination, say that the present condition of applicant is as follows: Disability on left side resulting from double rupture and hernia left right side. The hernia is extensive in character. The physical condition is such as to prevent him from doing a days work.

and that such condition is permanent. Said condition arises from the following facts: The disability was caused by mumps.

We have treated applicant professionally for ____ years, and his condition, as above stated, does not arise from hereditary or congenital causes, or from vicious or intemperate habits.

E. M. Bailey M.D.
W. C. Humphries M.D.

Sworn to and subscribed before me, this 3rd day of Aug. 1905.

John Dunlap
Ordinary.

NOTE 1.—*State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state its location, character and present condition. If from disease, give its nature and character, and its causes or origin, as understood by affiants.*
NOTE 2.—The physicians will be careful to fill every blank space in oath.

Form 4

STATE OF GEORGIA, Cobb County.

I, John Dunlap, Ordinary of said County, do certify that I am well acquainted with J. B. Stansel the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and he is disabled, as he claims*, and I know he is the individual he represents himself to be, and that he resides in this County and has been a bona fide resident since the 1st day of Jany 18 87. I also certify that the witnesses, to-wit: Logan House L. H. Tanner and John Brown are persons of respectability, that their statements are worthy of full credit and belief, *and that the full text of the affidavit was read to and understood by them before they signed the same.*

Given under my official signature and seal, this 3 day of Aug. 1905.

John Dunlap
Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, J B Stansell hereby authorize John Awtrey of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of Jany 1906.

J B Stansell [L. S.]

Executed in the presence of
John Awtrey

Stansell, James B.
Cobb Co.,

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 293

DISABLED
SOLDIER'S PENSION
1906.

Name J. B. Stansell
County Cobb
Co. A. 18th Regiment Ga
Disability Disease
Amount, $50.00

_____ 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

THE FRANKLIN PRINTING AND PUBLISHING CO. GEO. W. HARRISON, MGR.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, J B Stansell, hereby authorize John Awtrey of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18 day of Jany 1907.

his
J. B. Stansell [L. S.]
mark

Executed in presence of

Stansell, James B.
Cobb Co.,

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED)

No. 249.

DISABLED
SOLDIER'S PENSION
1907.

Name J B Stansell
County Cobb
Co. A. 18 Regiment Ga. Vols
Disability Disease
Amount, $50 JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears J B Stansell of Cobb 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 ____ in Company A, of 18 Ga Regiment of ____ Volunteers Harris's Brigade; that whilst engaged in such military service in the State of ____, on the ____ day of ____ 186__ he was wounded, injured or diseased as follows:

Diarea

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of $50 Dollars, for the year 1905.

Sworn to and subscribed before me, this the 1 day of Jany 1906.
John Awtry

J B Stansell
Post-Office ____

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

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this ____ day of Jany 1906.
John Awtry
Ordinary Cobb County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Cobb County.

Personally appears J B Stansell of Cobb 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 ____ in Company A, of 18 Ga Regiment of ____ Volunteers Harris's Brigade; that whilst engaged in such military service in the State of ____, on the ____ day of ____ 186__, he was wounded, injured or diseased as follows:

Diarea

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of $50 Dollars, for the year 1906.

Sworn to and subscribed before me, this the 18 day of Jany 1907.
John Awtry Ord.

J B Stansell
Postoffice ____

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

State of Georgia,
Cobb County.

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

Given under my official signature and seal this 18 day of Jany 1907.
John Awtry
Ordinary Cobb County.

Affix your seal here

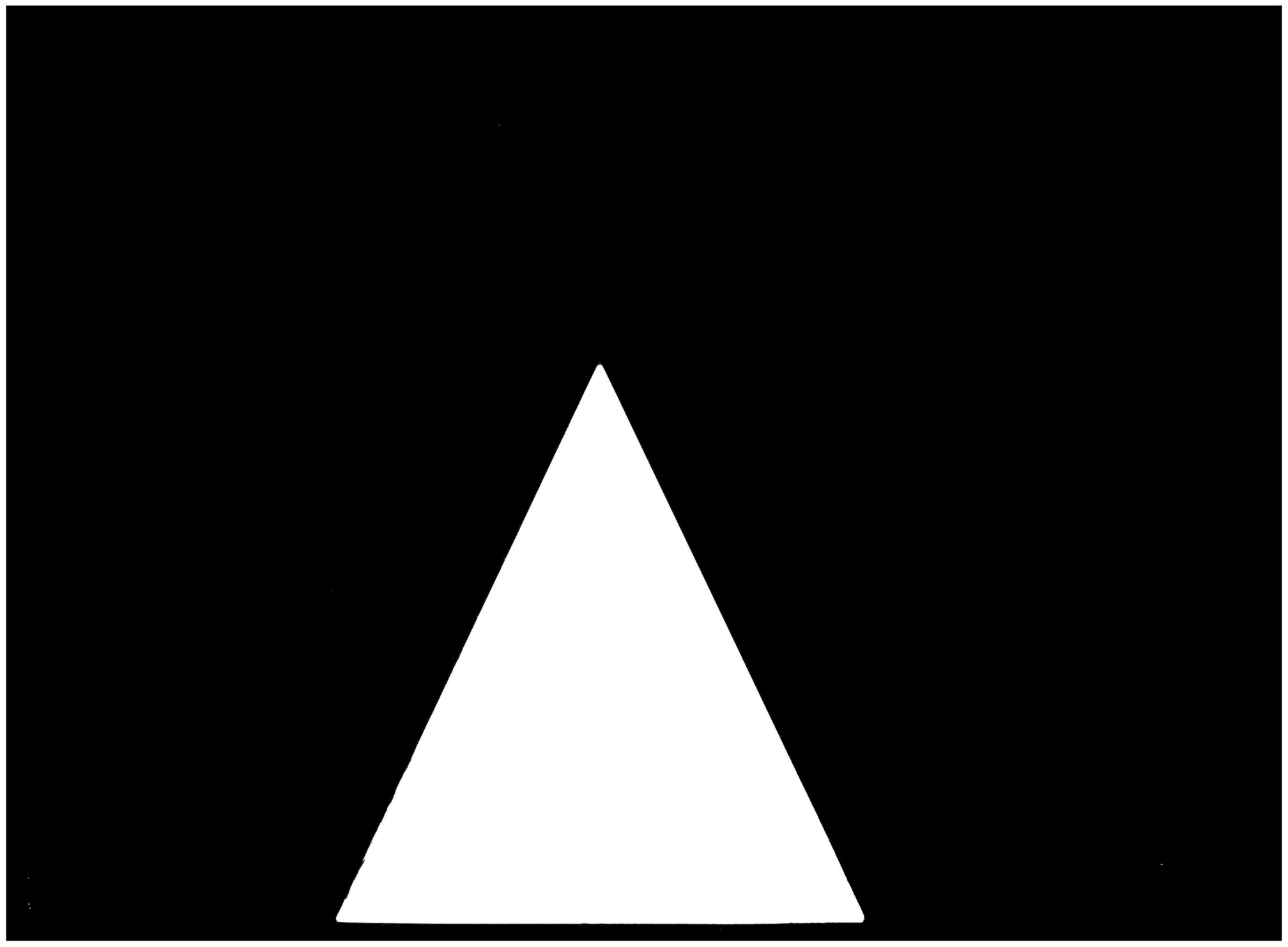
NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1st, 1907.

Affix your seal here

Ordinary [illegible] County.

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

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



Stansell, Mary G.
Cobb County

No.....

Widow's Pension

UNDER ACT 1910.

County Cobb

Name Mary G. Stansell

Widow of E. G. Stansell

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

10/3/10

Stansell, Mary G.
Cobb County

No.

Widow's Pension

UNDER ACT 1910.

County

Name Mary G Stansell

Widow of G. G Stansell

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

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

STATE OF GEORGIA,
Cobb County.

Personally before me comes Mary G Stansell of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act of ....1910, and submit testimony to make out the same, true answers makes to the following questions to wit:

1. What is your name, and where do you reside? Mary G Stansell Acworth Cobb Co Ga
2. How long and since when have you been a continuing resident in the State of Georgia? About 65 Years ever Since I was 15 year Old. Since 1845
3. When, where and to whom were you married? 1858. Cobb Co. Ga. G. G. Stansell
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) In Month of April 1863. Acworth Cobb Co., in Co A. 18th Ga. Infantry
5. When and where did the Commands of your husband surrender or discharge from the army? In Spring of 1865 in Virginia. He was in Gen Lees Army
6. Was your husband personally present at the time of the surrender or discharge of this Command? No information can be obtained that he was present I learn he died west
7. If he was not present state clearly where he was?
8. Where was his Command when he left?
   a. For what cause did he leave his command?
   b. By whose authority did he leave his Command?
   c. For how long was he granted leave of absence?
   e. What was his physical condition when he left his Command?
   f. What effort did he make to return to his command?
   g. In what way was he prevented from going back to Command?
   h. Was he captured by the enemy at any time?
   i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
   j. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? Sept 3rd 1888. Yes
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) 90 acres. Value 800.00
   1 Steer value 50.00 Household Goods 25.00
   1 Cow " 20.00 Total $ 875.00
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) No
11. What property of any description of any value have you now? Give list and cash value? 90 acres of land value 800.00 Horse 60 - Cow 20 $ Household 875.00
12. What are your annual earnings or income and their value? About 50 Dollars rent of land is all
13. Have you heretofore been paid a pension by the State? Yes If so, when and for what cause were you struck from the Roll? I am unable to Write

Sworn to and subscribed before me this the 13 day of August 1910.
J. M. Barton Ordinary.
of Cobb County.

Mary G Stansell
her mark

Born Aboard child Boy was one

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

STATE OF GEORGIA,
Cobb County.

Personally before me comes A. Nichols John Brown who after being duly sworn true answers to make, to the following questions, answers as follows:

1. What is your name and where do you reside? A Nichols and John Brown, Acworth Ga

2. How long and since when have you known Mrs Mary G Stansell applicant? Ever Since 1856

3. How long and since when has she continuously resided in this State? (Give date.) Ever Since 1856 or before

4. When and to whom was she married? How do you know in 1858 or 59. We lived in same Settlement

5. How long and since when did you know E. C. Stansell her husband? Ever Since 1857 or before

6. When, where and in what Company and Regiment did E C Stansell enlist? in Sept 1862. he Came to Our Coas a recruit. Co 18th Ga. We were in Virginia at time he Came to us.

7. Were you a member of the same Company? Yes

8. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Until April 9 1865 about 2½ years

9. When, and where did his Command surrender, and was discharged? April 9 1865 pay roller April 13 1865. Appomattox Court House Va.

10. Were you personally present when it was surrendered? Yes If not where were you We were present and how ~~came you there~~?

11. Was the husband of applicant personally present at surrender? Yes If not where was he? He was present when, where and for what cause did he leave Command? (Give date.) Won was over By whose authority did he leave his Command? War over and how long was he granted leave? for all time How do you know all this? Do you state if of your own personal knowledge? (State all you know fully, and how you know it.)

12. For what cause if you know of your own knowledge was he prevented from returning to his Command?

13. What effort did he make to return to his Command and how do you know this? Of you own knowledge or how?

Sworn to and subscribed before me this the 13th day of August 1910

J M Gann Ordinary. of Cobb County.

A. Nichols
John Brown

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA, Cobb County.

Personally before me comes E D Fitzgerald and T J Helton who on oath says that they are freeholders of said County and that they know Mary G Stansell of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows 90 acres of land 875.00

Personal property	$ 70.00
Notes and accounts due	$
Total	$

Schedule (B).

We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:

Personal property	$
Money, Notes and accounts	$

Schedule (C).

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

90	Acres of land worth	$ 875.00
1	Horses and Mules	$ 50.00
1	Cows and Hogs	$ 20.00
	Other property	$
	income and earnings none	$
	Total Value of all property and effects	$ 945.00

Sworn and subscribed before me this the 13th day of August 1910

J M Gann Ordinary. of Cobb County.

T. J. Helton
E. D. Fitzgerald

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Cobb County.

I, J M Gann Ordinary of said County do certify that I know Mrs Mary G Stansell the applicant for pension. She is the person she represents herself to be and she is a bonafide continuing resident citizen of said County and was in the 4th Nov. 1908.

That I also know A Nichols and John Brown the witness who swears to the service of husband, and T J Helton and E D Fitzgerald who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Returned for Tax is for 1908 $470.00 for 1910 $545.00

Sworn under my hand and official seal of office this 23rd day of Sept 1910

SEAL.

J M Gann Ordinary. Cobb County

(SEAL.)

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

Georgia, Cobb County:---

I, J. M. Gann, Ordinary of said County, Certify that all records in this office including the M arriage Record of said County was burned together with the Court House by Shermans Army in the year 1864 and we have no County records previous to 1865.

Oct. 18 1910

J M Gann
Ordinary.

[illegible] 1972 [illegible]

J M Carter Ordinary. C. D. Fitzgerald

of Cobb County.

Ordinary's Certificate

STATE OF GEORGIA,
Cobb COUNTY.

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

Sworn under my hand and official seal of office this 31 day of Oct 1919

(SEAL) J M Gaul Ordinary,
Cobb County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Stanton J. N. Mrs
Co 6 53 Apr 1920
53 No. Cobb Co

53
Widow's Pension
Under Act 1910—as Amended by Act of 1919.

County Cobb
Name Mrs J N Stanton
Widow of Dr J N Stanton
Company
Regiment 53 Ga Safety
Approved

6 1920

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

11-1-1919

Ordinary's Certificate

STATE OF GEORGIA,
Cobb COUNTY.

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

Sworn under my hand and official seal of office this 31 day of Oct 1919

(SEAL)

J M Gann Ordinary,
Cobb County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Miss J. N. Stanton
Dr 6 53
Ga Cobb Co

No. 53
Widow's Pension
Under Act 1910—as Amended by Act of 1919.

County Cobb
Name Mrs J N Stanton
Widow of J H Stanton
Company ____
Regiment 53 - Ga Infty
Approved ____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

11-1-1919

Enl. 2nd Lt. Co. G. 53rd Ga. Inf. Regt.
Resigned Dec 1862

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

Questions for Applicant

STATE OF GEORGIA,
Cobb-c COUNTY.

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

1. What is your name, and where do you reside? Mrs J. N. Stanton Marietta Ga
2. How long and since when have you been a continuing resident of the State of Georgia? all my life
3. When, where and to whom were you married? To Dr J. N. Stanton in surgeon Co near Madison Dec 27 - 1864
   a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) enlisted in Covington Newton Co - 53rd Ga regiment Infantry
5. When and where did the commands of your husband surrender or discharge from the army? ____
6. Was your husband personally present at the time of the surrender or discharge of this command? no
7. If he was not present state clearly where he was? at home practicing medicine
8. Where was his command when he left? ____
   a. For what cause did he leave his command? to practice Medicine
   b. By whose authority did he leave his command? the Officers
   c. For how long was he granted leave of absence? no specific time
   c. What was his physical condition when he left his command? good
   f. What effort did he make to return to his command? ____
   g. In what way was he prevented from going back to Command they needed him at home
   h. Was he captured by the enemy at any time? no was not
   i If so, when and where captured and where held as a prisoner, and when and for what cause released? ____
   j. When and where did your first husband die? In Marietta Ga - Jan 12 1912
   k. Were you residing together when he died? yes
   l If not, how long had you resided apart? ____
   m. Are you now a widow? yes
9. Have you or your husband heretofore been paid a pension by the State? No

If so, when and for what cause were you or your husband placed on the roll? because he was with them 16-00 dollars

Sworn to and subscribed before me this the 31 day of Oct 1919

Mrs J. N. Stanton

J M Gann Ordinary
Cobb County.

(SEAL)

He was in this army some time dont know exactly how long

Enl. may
Ordered
1865 (MR)

Cobb County.
(SEAL)

He was in the army some time
dont know exactly how long

Starnes, J.C. (John C.)
Cobb County

No. On

INDIGENT PENSION,

1900.

1902

Name Starnes J C.

County Cobb.
Co F Cobbs Legion

Approved 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

4/23/1902

Power of Attorney.

STATE OF GEORGIA,
County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1900.

[L. S.]

Executed in presence of _____

Power of Attorney.

STATE OF GEORGIA,

_____ County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1900.

_____ [L. S.]

Executed in presence of

Starnes, J. C. (John C.)
Cobb County

No. _____

INDIGENT PENSION,

1900.

1902

Name Starnes J. C.

County Co Ga.
Co 2 Cobbs Legion

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

4/23/1902

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office)
John C. Starnes: I reside near Marietta Cobb Co Ga

2. How long and since when have you been a resident of this State?
All my life: Since 1835

3. When and where were you born? In DeKalb Co Ga Sept 24th 1835

4. When and where and in what company and regiment did you enlist or serve? I enlisted in Co F. Cobbs Legion. in Carroll Co Ga, March 1862

5. How long did you remain in such company and regiment? Until May 3rd 1863

6. When and where was your company and regiment surrendered and discharged? At Appo Mattox C. H. Virginia. April 1865.

7. Were you present with your company and regiment when it was surrendered? I was not.

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was disabled at Chancellorsville battle on May 3rd & was Skept at White Sulphur Springs hospital until close of the war

9. How much can you earn (gross) per annum by your own exertions or labor? Comparatively nothing.

10. What has been your occupation since 1865? Cropper

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Blindness infirmity & poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? My brain was very seriously affected by explosion of a shell at the battle of Chancellorsville on May 3rd 1863 which for five years past has rendered me entirely blind in right eye and nearly so in the left eye rendering me unable to perform manual labor. I am also afflicted with rheumatism

13. What property, real or personal, or income, do you possess, and its gross value?
Nothing but household furniture worth about fifteen dollars

14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? Same as above mentioned No Sale or gift

15. In what County did you reside during those years, and what property did you then return for taxation?
In Cobb County. Returned no property

16. How were you supported during the years 1898 and 1899? I have been supported by the Church and by Charity for five years

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About fifty dollars very little because of my infirmity

18. What was your employment during 1898 and 1899? What pay did you receive in each year?
Cropping as far as I could consisting of little patches

19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have a wife. She has no means of support No Homestead.

20. Are you receiving any pension? If so, what amount and for what disability?
None.

21. Have you ever made an application for pension before? I have. Papers were mislaid or lost in Pension office

22. How many applications have you ever made and under what class? Two, First lost papers & 2nd returned for defect in application. Indigent class

Sworn to and subscribed before me this the 30th day of Sept, 1900.

John C Starnes
Applicant.

John Autry, Ordinary,
of Cobb County.

Every Question MUST be Answered

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Fulton COUNTY.

Said Moon answers as to questions 11 to 19 inclusive

Jos Cruse and H. L. Moon of said State and County, having been presented as a witness in support of the application of John C Stones for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? J. W. Cruse Atlanta Ga.
2. Are you acquainted with _____, the applicant; if so, how long have you known him? Since 18 61
3. Where does he reside, and how long and since when has he been a resident of this State? Cobb Co Ga Since 1861
4. When, where and in what company and regiment did he enlist, and how do you know? Co F Cobb Legion Ga
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? from March 1861 may 1863
7. When and where was his command surrendered? Appmatox C.H. Va
8. Were you present when it surrendered? I was
9. Was applicant present? he was Not
10. If he was not present, where was he? in Hospital

When did he leave his command? may 1863 For what cause? Disable at Chalcomille
By what authority he left? under orders from Commander How do you know all of this? I was a member of the Same C.O. & was present

11. What property, effects or income has the applicant? (Give your means of knowledge.) None except his little household furniture
12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? None except as above
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? He has not
14. What is the applicant's occupation and physical condition? Cyper He is feeble blind in his right eye and nearly so in his left eye
15. Is the applicant unable to support himself by labor of any sort, if so, why? He is not because of his infirmity. He is a close neighbor and I know his condition well.
16. How was he supported during the years 1898 and 1899? For these and several years past he has been supported mainly by his friends. I have aided him.
17. What portion of his support for these two years was derived from his own labor or income? Almost nothing. He is unable to work
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He is blind in his right eye and nearly so in his left eye. He is very feeble
19. What interest have you in the recovery of a pension by this applicant? None = None

Sworn to and subscribed before me, this the 25th day of Sept 1900.

J. W. Cruse
Witness.

John R Wilkinson Ordinary.
Fulton Co Attest. D L Moon
John Awtry ordinary Cobb Co.

I certify that J W Cruse is a citizen of Fulton Co & his statement is entitled to full credit & belief. John R Wilkinson ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me John H Simpson and E J Sitz, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully _____, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Entirely blind in right eye Left eye very weak sight. Can see with aid of strong glass only. was struck in eye 20 years ago & from inflamation lost sight. Is not in condition to make living by work

They further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

John H Simpson M.D.
E J Sitz M.D.

Sworn to and subscribed before me, this the 2nd day of October 1900.

John Awtry Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I, John Awtry, Ordinary in and for said County, hereby certify that the applicant J C Stones resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 189__ and that the witnesses, viz: _____

are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1898 Nothing Dollars of property, and in 1899 Nothing Dollars of property.

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

Witness my hand and seal of office, this 24 day of Feb 1902

John Awtry Ordinary,
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, _____ hereby authorize _____
John Awtry of _____
to receive and receipt for the pension allowed and request that he remit same to
_____ at _____
by _____

Witness my hand and seal, this 6 day of Jan 1903

J. C. Stones [L. S.]
Mark

Executed in presence of
J. M. Gaines

Stevens J. C.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 504

INDIGENT
SOLDIER'S PENSION
1903.

Name J. C. Stones
County Cobb
Co. 4 Regiment Cobb
Legion

WARRANT ISSUED
1/23 1903

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. W. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J C Stames of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18___; that he is 67 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 2 years in Company H, of 60th Regiment of Georgia Legion; that his physical condition is as follows: Crippled & age Infirmity Poverty

that his property consists of the following items Nothing

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb county been ~~allowed~~ granted a pension for the year 1

Sworn to and subscribed before me, this the 6 day of Jan 1902

J C Stames
Mark

John Irby
Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 6 day of Jan 1902

Affix your seal here

John Irby
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, C. Harris hereby authorize
John Austin of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 5th day of May 1904.

C. Harris [L. S.]
Mark

Executed in presence of

Starner & Co.
Cobb Co

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 643

INDIGENT
SOLDIER'S PENSION
1904.

Name C. Harris
County Cobb
Co. 4 Cobb Legion Regiment

WARRANT ISSUED
1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Wy

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J. C. Stames of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of All life 18__; that he is 68 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of farmer) during the war between the States, and served for the term of 12 years in Company 4 Cobb Legion of ____; that his physical condition is as follows: Owing to age Infirmity & poverty

that his property consists of the following items: Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1____

Sworn to and subscribed before me, this the 5th day of Jan 1904.

John Hartley Ordinary.

his J. C. Stames mark

STATE OF GEORGIA,
Cobb County.

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

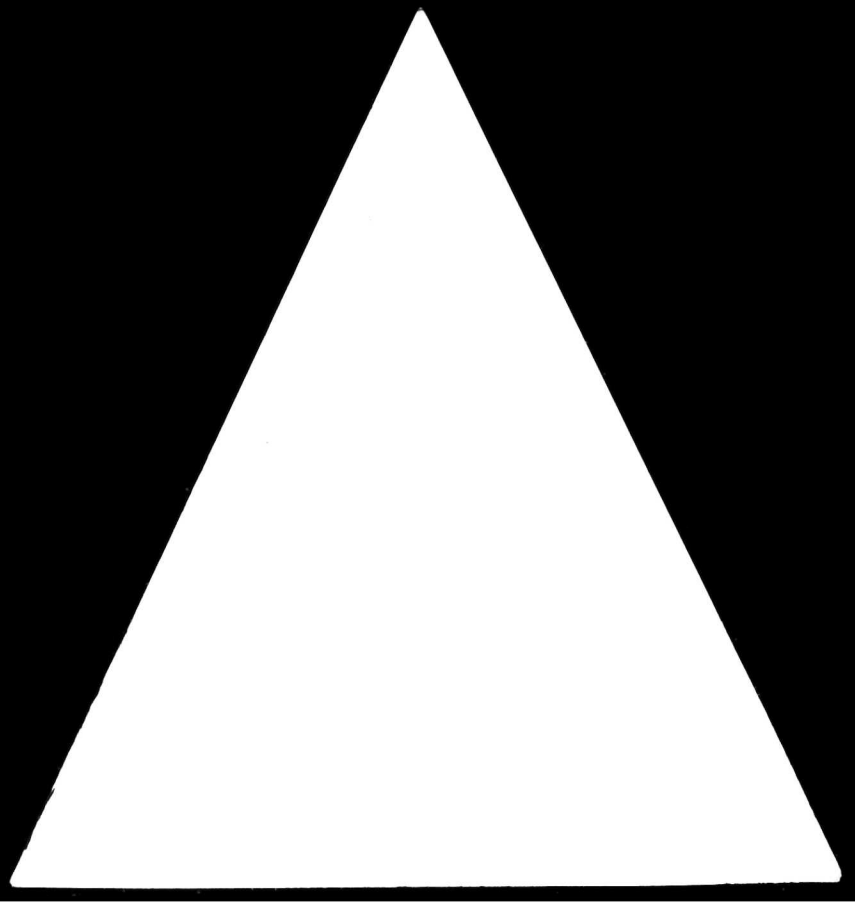
Given under my official signature and seal, this 5th day of Jan 1904.

John Hartley
Ordinary Cobb County.

Affix your Seal here.

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

NOTE.—Affidavit should not be attested before January 1st, 1904.



Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

Know all Men by these Presents, That I, S. A. Starnes of Cobb County, in said State, do hereby appoint J. E. Kennedy of Acworth 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 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 12 day of May 1891

S. A. Starnes [L. S.]
mark

Executed in the presence of us:
David Kennedy
J. M. Stone Cntry

DIRECTIONS.

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

Starnes S. A.
Cobb County
$36 1891.

No. 2962

Widows' Pension

PAID TO
Mrs S. A. Starnes
OF
Cobb COUNTY.

$100.00.

Warrant Issued
AND HANDED TO
1891

Geo. W. Harrison, State Printer, Atlanta

11

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

Know all Men by these Presents, That I, S. A. Starnes of Cobb County, in said State, do hereby appoint J. E. Kennedy of Acworth 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 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 12 day of May 1891.

S. A. her mark Starnes [L. S.]

Executed in the presence of us:
David Kennedy
J. W. Stone Ordy.

DIRECTIONS.

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

Starnes S. A.
Cobb County
1891.
No. 9962
Widows' Pension
PAID TO
Mrs. S. A. Starnes
OF
Cobb COUNTY.
$100.00.
Warrant Issued
1891
AND HANDED TO

Geo. W. Harrison, State Printer Atlanta

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,
County of Cobb

In person came before me, the undersigned Ordinary in and for the County of Cobb Mrs. S. A. Starnes, who being sworn according to law, says under oath that she is the widow of E. T. Starnes, who was a soldier in the service of the Confederate States, and served as a member of Company "D", of the 36 Regiment of Ga. Volunteers; that he enlisted in said service on or about the day of April 1862, and was in the Army up to 12th June 1862 That while in the Army, he was on the about 12 day of June 1862. (See Note No. 1)

That while in line of duty in the Army at Clinton Tenn. he was attacked with Measles, came home on sick furlough on or about June 15th or 18th and died with the measles about 20th day of June 1862 at home,

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 9 th day of December 1854, and that she has resided in Georgia continuously since the day of August 1835, 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 12 day of May 1891.

J. W. Stone
Ordinary.

S. A. her mark Starnes
Post-Office Acworth Ga.

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

Form No. 2.

Affidavit for Three Witnesses.

State of Georgia,
County of Cobb

In person came before me, the undersigned Ordinary in and for said County, witnesses David Kennedy, J. J. Graves and Thomas Farmer (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. S. A. Stames of the County of Cobb, State of Georgia, is the widow of E. T. Stames who was a soldier in Company D of the 36 Regiment of Ga. Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the day of April 186 1 That while in said service, or by reason of said service in the Army, he lost his life as follows:

While in line of duty in the Army near or at Clinton Tenn. he was attacked with Measles on or about 10th or 15th day of June 1862. was sent home on Sick Furlough and died at home with the Measles on or about 20th day of June 1862.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were We were Members of the same Company with E. T. Stames, knew him and his wife before the war, & have known his widow Mrs S.A. Stames ever since the war.

We further swear that Mrs. S. A. Stames was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resides in Cobb County of the State of Georgia.

Sworn to and subscribed before me, this the 15 day of May 1891.

Jill Stone
Ordinary.

David Kennedy
J. J. Graves
Thomas Farmer

Note.—Witnesses must not testify about things they may believe, but confine their statements to such facts as they personally know.

Form No. 3.

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

State of Georgia,
County of Cobb

I, Jill. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. S. A. Stames 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 15th day of May 1891.

SEAL

Jill. Stone
Ordinary.

* I am fully satisfied as to Thomas Farmer one of the witnesses subscribing hereto

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 lawer or other agent to attend to these claims. The Department will furnish *full* and specific instructions, and give ample opportunity to every claimant.

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

If proofs must be made out of the State, the witnesses must be sworn before a Judge of a Court of Record under seal, and the witnesses must be certified to as reliable, and that their signatures are genuine.

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

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

By order of the Governor.

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

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. S. A. Stames 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 Elijah Stames 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 8th day of Feby. 1893.

SEAL

J. M. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mrs S. A. Stames of Cobb County, in said State, do hereby appoint J. M. Stone Ordy. of Cobb 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 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 8th day of Feby. 1893

Mrs S. A. her X mark Stames [L. S.]

Executed in the presence of us:
J. Starnes
J. Hicks

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

Stames, S. A.
Cobb County
FOR THOSE HERETOFORE PAID.
1893.
No. 788
Widows' Pension,
for year ending February 15th, 1893.
PAID TO
Mrs S. A. Stames
OF
Cobb COUNTY.
Warrant Issued
7/10 1893
AND HANDED TO
J. M. Stone

Geo. W. Harrison, State Printer, Atlanta.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. S. A. Stames 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 Elijah Stames deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 2nd day of Feby. 1894.

SEAL

J. M. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mrs S. A. Stames of Cobb County in said State, do hereby appoint J. M. Stone of Marietta 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 as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2nd day of Feby 1894.

S. A. her X mark Stames [L. S.]

Executed in the presence of us:
G. M. Fleming
W. D. Starnes

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

Stames, S. A. (Mrs)
Cobb County
FOR THOSE HERETOFORE PAID.
1894.
No. 814
WIDOWS' PENSION,
for year ending February 15th, 1894.
PAID TO
Mrs S. A. Stames
OF
Cobb COUNTY.
WARRANT ISSUED
2/12 1894.
AND HANDED TO
J. M. Stone

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb | Personally comes Mrs. S. A. Stames

who being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has *resided* in said State continuously ever since 1836 That she is the Widow of Elijah Stimes who was a Soldier in Company of the Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of 186 and served in the Army up to 186 That he lost his life on the day of 18 (*State here full particulars of the husband's death, when, where and from what cause.*) (

That he contracted the measles while in the Confederate Army at Cumberland Gap in Tennessee and returned home sick with said disease and died

)

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, 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 8th day of July 1893. J. H. Stone Ordinary. | her Mrs. S. A. × Stames mark Post-office Acworth Ga.

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb | Personally comes Mrs. S. A. Stames

who being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has *resided* in said State continuously ever since 1836 That she is the Widow of Elijah Stames who was a Soldier in Company "D" of the 36 Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of May 186 7 and served in the Army up to June 186 2 That he lost his life on the 25th day of June 18 62 (*State here full particulars of the husband's death, when, where and from what cause.*) (

That in June 1862 he came home from the Confederate Army with the Measles and died with said disease on the 25th day of June 1862.

)

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 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 23 day of July, 1894. J. H. Stone Ordinary. | her Mrs. S. A. × Stames mark Post-office Acworth Ga.

Form No 2.

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

STATE OF GEORGIA, County of Cobb

I, Jill Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. S. A. Starnes 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 Elijah Starnes, 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 9th day of Jany 1895.

(SEAL) Jill Stone Ordinary.

Form No. 3

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

Know all Men by these Presents, That I, Mrs S. A. Starnes of Cobb County in said State, do hereby appoint Jill Stone of Marietta 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 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 9th day of Jan 1895. S A her X Starnes [L. S.] mark

Executed in the presence of us: [illegible]

DIRECTIONS.

Send amount by ____ to me at ____, and oblige

Starnes S. A. (Mrs) Cobb County

FOR THOSE HERETOFORE PAID.

1895.

No. 4847

WIDOW'S PENSION,

for year ending February 15th, 1895.

PAID TO Mrs. S. A. Starnes

OF Cobb County.

widow of Elijah Starnes

WARRANT ISSUED 2 4 95

AND HANDED TO

1895.

Geo. W. Harrison, State Printer.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, Jill Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. S. A. Starnes 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 Elijah Starnes 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 14th day of Jany, 1896.

(SEAL) Jill Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, S. A. Starnes hereby authorize Jill Stone of Marietta Ga. to receive and receipt for the pension paid thereon and request that he remit same to me by him

In Witness Whereof, I have hereunto set my hand and seal, this 14th day of Jany 1896 S A her X Starnes [L.S.] mark

Executed in the presence of G M Fleming

Starnes S. A. (Mrs) Cobb County

FOR THOSE HERETOFORE PAID.

1896.

No. 3074

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO Mrs. S. A. Starnes

OF Cobb County.

widow of Elijah Starnes

WARRANT ISSUED 3 11

AND HANDED TO

1896.

Geo. W. Harrison, State Printer.

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb | Personally Comes Mrs. S. A. Starnes

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has *resided* in said State continuously ever since 1836 That she is the Widow of Elijah Starnes who was a Soldier in Company D of the 36th Regiment of Ga. Volunteers, that he enlisted in said Regiment on or about the month of May 1862 and served in the Army up to June 1862 That he lost his life on the 25th day of June 1862 (*State here full particulars of the husband's death, when, where and from what cause.*)

That while in the Confederate Army he contracted measles — came home with said disease on the 15th day of June, 1862, and died with said disease on the 25th day of June 1862.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension 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 29th day of Jany 1895. J. W. Stone Ordinary. | S. A. her X mark Starnes Post-office Acworth Ga

Form 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb | Personally Comes Mrs. S. A. Starnes

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836 That she is the Widow of Elijah Starnes who was a Soldier in Company D of the 36th Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of May 1862 and served in the Army up to June 1862 That he lost his life on the 25th day of June 1862 (*State here full particulars of the husband's death, when, where and from what cause.*)

That while in the Army at Cumberland Gap Tenn. was brought home and died with said disease June 25th 1862.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cobb 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 14th day of Jany 1896. J. W. Stone Ordinary. | S. A. her X mark Starnes Post-office Acworth Ga

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J M Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. S A Starnes 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 Elijah Starnes 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 11th day of Feby 1897.

J M Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, S. A. Starnes hereby authorize J M Stone of Marietta Ga to receive and receipt for the pension paid hereon and request that he remit same to me by Lissa

In Witness Whereof, I have hereunto set my hand and seal, this 4th day of Feby 1897.

Mrs S. A. her X Starnes [L. S.]
mark

Executed in the presence of

G M Stone

Starnes S. A. (Mrs)
Cobb County

FOR THOSE HERETOFORE PAID.

1897.

No. 3664

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO Mrs. S. A. Starnes OF Cobb County, widow of Elijah Starnes

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED Feby 16 1897,

AND HANDED TO J M S

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

State of Georgia, Cobb County.

I, Mrs S A Starnes hereby authorize J M Stone of Marietta Ga to receive and receipt for the pension paid hereon and request that he remit same to me by Lissa

In Witness Whereof, I have hereunto set my hand and seal, this 3rd day of Feby 1898.

Mrs. S. A. her X Starnes [L. S.]
mark

Executed in the presence of

Starnes S. A. (Mrs)
Cobb County

For Those Heretofore Paid.

1898.

NO. 3419

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO Mrs S. A. Starnes OF Cobb County, Widow of Elijah Starnes

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED Feby 8 1898.

AND HANDED TO J M S

GEO. W. HARRISON, STATE PRINTER, ATLANTA

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. S. A. Starnes

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836 That she is the Widow of Elijah Starnes who was a Soldier in Company D of the 36th Regiment of Ga. Volunteers, that enlisted in said regiment on or about the month of May 1862 and served in the Army up to June 1862 That he lost his life on the 25th day of June 1862 (State here full particulars of the husband's death, when, where and from what cause.)

That while in the Army in the State of Tenn. Came home with them and died with them on 25th June 1862.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cobb 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 4th day of Feby 1897. J. M. Stone Ordinary. } Mrs S. A. her x mark Starnes Post-office Acworth Ga.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. S. A. Starnes

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836 That she is the Widow of Elijah Starnes who was a Soldier in Company D of the 36th Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of May 1862 and served in the Army up to June 1862 That he lost his life on the 25th day of June 1862 (State here full particulars of the husband's death, when, where and from what cause.)

That while in the said service he contracted the measles, Came home with them and died with the said disease on 25th day of June 1862.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852

I have been allowed a pension as a resident of Cobb 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 3rd day of Feby 1898. J. M. Stone Ordinary. } S. A. her x mark Starnes Post-Office Acworth P.O.

State of Georgia, Cobb County. } I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. S. A. Starnes who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the I understand 1836

Given under my official signature and seal this the 3 day of Feby 1898.

J. M. Stone

Official Seal.

Ordinary of Cobb County.

POWER OF ATTORNEY.

State of Georgia,
Cobb County.

I, Mrs S. A. Starnes hereby authorize J. M. Stone of Marietta Ga.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st day of Feby. 1899.

Mrs S. A. her X Starnes [L. S.]
mark

Executed in presence of

Starnes S.A. Mrs.
Cobb County
For Those Heretofore Paid.

1899.

No. 3274

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO Mrs S. A. Starnes

OF Cobb County

Widow of Elijah Starnes

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED
2/8 1899.

AND HANDED TO
[illegible]

GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, S. A. Starnes hereby authorize J. M. Stone of Marietta, Ga.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of February 1900.

her
S. A. X Starnes [L. S.]
mark

Executed in presence of
T. J. Hamby.

Starnes, S.A. (Mrs)
Cobb County
To Those Heretofore Paid.

1900.

No. 2054

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO Mrs. S. A. Starnes

OF Cobb County,

Widow of Elijah Starnes

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
Feb 16 1900,

AND HANDED TO
Starnes

GEO. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs. S. A. Starnes

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836 That she is the Widow of Elijah Starnes who was a soldier in Company D. of the 36th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1862 and served in the Army up to June 1862 That he lost his life on the 25th day of June 1862 (State here full particulars of the husband's death, when, where and from what cause)

That said deceased Husband Contracted Measles in May or June 1862 - Came home and died from said disease June 25 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852

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

Sworn to and subscribed before me, this 1st day of Feby 1899.
J. M. Stone Ordinary.

Mrs S A [illegible] Starnes
Post-Office Acworth Ga.

State of Georgia, Cobb County.

I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. S. A. Starnes who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1836

Given under my official signature and seal this the 1st day of Feby. 1899.

J. M. Stone
Ordinary of Cobb County.

(Official Seal.)

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs. S. A. Starnes

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836. That she is the Widow of Elijah Starnes who was a soldier in Company D of the 36th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1862 and served in the Army up to June 1862 That he lost his life on the 25th day of June 1862 (State here particulars of the husband's death, when, where and from what cause)

That said deceased husband contracted Measles in May or June 1862 - Came home and died from said disease June 25th 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852.

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

Sworn to and subscribed before me, this 9th day of Feby 1900.
J. M. Stone Ordinary.

S. A. [illegible] Starnes
Post Office Acworth, Ga.

State of Georgia, Cobb County.

I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. S. A. Starnes, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1836

Given under my official signature and seal, this the 9th day of Feby 1900.

J. M. Stone
Ordinary of Cobb County.

(Official Seal.)

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, S. A. Starnes hereby authorize John Awtrey of Marietta to receive and receipt for the pension paid hereon and request that he remit same to me at Marietta

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 6th day of January 1901.

S. A. Starnes [L. S.]

Executed in presence of

Jas M Gaine

Starnes, Mrs. S. A.
Cobb County

To Those Heretofore Paid.

1901.

No. 145

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. S. A. Starnes
OF
Cobb County.

Widow of Elijah Starnes

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
Jan. 15 1901,
AND HANDED TO
Gulley

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, S. A. Starnes, hereby authorize John Awtrey of Marietta to receive and receipt for the pension paid hereon, and request that he remit same to me at his office

In Witness Whereof, I have hereunto set my hand and seal, this 2nd day of Jany 1902.

S. A. his x mark Starnes [L. S.]

Executed in presence of

Starnes, Mrs. S. A.
Cobb County

To Those Heretofore Paid.

1902.

No. 249

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. S. A. Starnes
OF
Cobb County,

Widow of

Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/16 1902
AND HANDED TO
Ordy

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

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. S. A. Starnes

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836. That she is the Widow of Eligah Starnes who was a soldier in Company D of the 36th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1862 and served in the Army up to June 1862. That he lost his life on the 25th day of June 1862 (State here particulars of the husband's death, when, where and from what cause). That said deceased husband contracted Measels in May or June 1862 Come home and died from said disease June 25th 1862.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852.

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

Sworn to and subscribed before me, this 5th day of January 1901. John Awtry Ordinary. } S. A. Starnes Post Office

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

Given under my official signature and seal, this the 5th day of January 1901.

John Awtry

Official Seal. Ordinary of Cobb County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. S. A. Starnes

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836. That she is the Widow of Eligah Starnes who was a soldier in Company D of the 36th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1862, and served in the Army up to June 1862. That he lost his life on the 25th day of June 1862 (State here particulars of the husband's death, when, where and from what cause). That said deceased husband contracted Measles in May or June 1862 Come home and died from said disease June 25th 1862

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852.

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

Sworn to and subscribed before me, this 2 day of Jany 1902. John Awtry Ordinary. } S. A. her x mark Starnes Post-Office Acworth Ga

State of Georgia, Cobb County. } I, John Awtry Ordinary of said County, certify that I am well acquainted with Mrs. S. A. Starnes, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereself to be, and that she has continuously resided in this State since the day of 18

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

Official Seal. Ordinary of County.

NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, S. A. Starnes hereby authorize John Autry of Marietta Ga. to receive and receipt for the pension paid hereon, and request that he remit same to _____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this 5th day of January 1903.

S. A. her x mark Starnes [L. S.]

Executed in presence of

Starnes, S. A. (mrs)
Cobb County

To Those Heretofore Paid.

1903.

No. 224

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. S. A. Starnes

OF

Cobb County,

Widow of Elijah Starnes

Co. D. 36th Regiment Ga. Vols

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/23 1903.

AND HANDED TO

Cody

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Mrs. S. A. Starnes hereby authorize John Autry of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 8th day of June 1904.

S. A. her x mark Starnes [L. S.]

Executed in presence of

Starnes, S. A. (mrs)
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. 273

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. S. A. Starnes

OF

Cobb County,

Widow of Elijah Starnes

Co. D. 36th Regiment Ga. Vol.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/28 1904,

AND HANDED TO

Cody

Geo. W. Harrison, State Printer, Atlanta

FORM No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. S A Stames

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836. That she is the Widow of Elijah Stames who was a soldier in Company D of the 36 Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of May 1862, and served in the Army up to June 1862. That he lost his life on the 25th day of June 1862 (*State here particulars of the husband's death, when, where and from what cause.*) That said deceased Husband Contracted Measles in May of June, 1862 Come home and died from said disease June 25 1862

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

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

Sworn to and subscribed before me, this 6th day of Jan. 1903. John Dobbs, Ordinary. } S. A. Stames mark Post Office Vandorf

State of Georgia, Cobb County. } I, John Dobbs Ordinary of said County, certify that I am well acquainted with Mrs. S A Stames, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the ____ day of ____ 18__

Given under my official signature and seal, this the 6th day of Jany 1903.

{ Official Seal. } John Dobbs Ordinary of Cobb County.

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

FORM No. 1.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. S A Stames

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836. That she is the Widow of Elijah Stames who was a soldier in Company D of the 36 Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of May 1862, and served in the Army up to June 1862. That he lost his life on the ____ day of June 1862 (*State here particulars of the husband's death, when, where and from what cause.*) That said deceased Husband Contracted Measles in May or June 1862 Come home and died from said disease June 25 1862

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

I have been paid a pension as a resident of Cobb County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 8th day of Sept 1904. John Dobbs Ordinary. } S. A. Stames mark Post Office

State of Georgia, Cobb County. } I, John Dobbs Ordinary of said County, certify that I am well acquainted with Mrs. S. A. Stames who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the ____ day of ____ 18__

Given under my official signature and seal, this the 8th day of Sept 1904.

{ Official Seal } John Dobbs Ordinary of Cobb County

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, S A Stamnes, hereby authorize
John Awtrey of
to receive and receipt for the pension paid hereon, and request that he remit same to
at

In Witness Whereof, I have hereunto set my hand and seal, this 2
day of January 1905. S A Stamnes [L. S.]
his mark

Executed in presence of
John Awtrey

To Those Heretofore Paid.

1905.

No. 263

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs. S A Stamnes
OF
Cobb County,
Widow of
Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/23 1905.
AND HANDED TO

THE FRANKLIN PRINTING AND PUBLISHING CO. ATLANTA.
GEO. W. HARRISON, MANAGER FOR STATE PRINTER.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, S A Stamnes, hereby authorize
John Awtrey of
to receive and receipt for the pension paid hereon, and request that he remit same to
at

In Witness Whereof, I have hereunto set my hand and seal, this 2
day of January 1906. S A Stamnes [L. S.]
his mark

Executed in presence of
J M Graves

To Those Heretofore Paid.

1906.

No. 183

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO
Mrs. S A Stamnes
OF
Cobb County,
Widow of G W Stamnes
Co. K 36th Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/22 1906,
AND HANDED TO

THE FRANKLIN PRINTING AND PUBLISHING CO. GEO. W. HARRISON, MGR. ATLANTA, GA.

FORM No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. S A Stames

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1836 That she is the Widow of Elijah Stames who was a soldier in Company D of the 36 Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of 186 2, and served in the Army up to June 186 2. That he lost his life on the ____ day of ____ 18__ (*State here particulars of the husband's death, when, where and from what cause.*) Contracted Measels in May 1862 Came home and died

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

I have been paid a pension as a resident of Cobb County for the year ending December 31, 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this 2 day of Jany 1905. John Awtrey, Ordinary.

her
S A x Stames
mark.
Post-Office

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. S A Stames, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the ____ day of ____ 18__

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

{ Official Seal. }

John Awtrey
Ordinary of Cobb County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

FORM No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. S A Stames

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 ____ That she is the Widow of E T Stames who was a soldier in Company F of the 36-2a Regiment of ____ Volunteers, that he enlisted in said regiment on or about the month of ____ 186__, and served in the Army up to ____ 186__ That he lost his life on the ____ day of ____ 18__ (*State here particulars of the husband's death, when, where and from what cause.*) Died Whether

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

I have been paid a pension as a resident of Cobb County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 2 day of Jany 1906. John Awtrey, Ordinary.

her
S A x Stames
mark
Post Office

State of Georgia, Cobb County. } I John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. S A Stames, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 2 day of Jany 18__

Given under my official signature and seal, this the 2 day of Jany 1906.

{ Official Seal }

John Awtrey
Ordinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, S A Stamps hereby authorize
John Autrey
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this 8
day of January 1907.

S A Stamps [L. S.]
Mark

Executed in presence of
J W Stamps

Stamps, S. A. (Mrs.)
Cobb County

To Those Heretofore Paid.

1907.

No. 161

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO
Mrs S A Stamps
OF
Cobb County,
Widow of E T Stamps
Co. D 36 Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/31, 1907,
AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. S A Stames

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since _____. That she is the Widow of E T Stames who was a soldier in Company D of the 36 Ga Regiment of _____ Volounteers, that he enlisted in said regiment on or about the month of _____ 186__, and served in the Army up to _____ 186__. That he lost his life on the _____ day of _____ 18__ (*State here particulars of the husband's death, when, where and from what cause.*)

Inf & poorly

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

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

Sworn to and subscribed before me this 8 day of Jany 1907.
John Awtrey, Ordinary.

S A Stames
Post Office _____

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. S A Stames, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the _____ day of _____ 18__.

Given under my official signature and seal, this the 8 day of Jany 1907.

{ Official Seal }

John Awtrey
Ordinary of Cobb County.

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

herself to be, and that she has continuously resided in this State since the _____

day of _____ 18____

Given under my official signature and seal, this the 8 day of Jany 1907.

John A. Avery

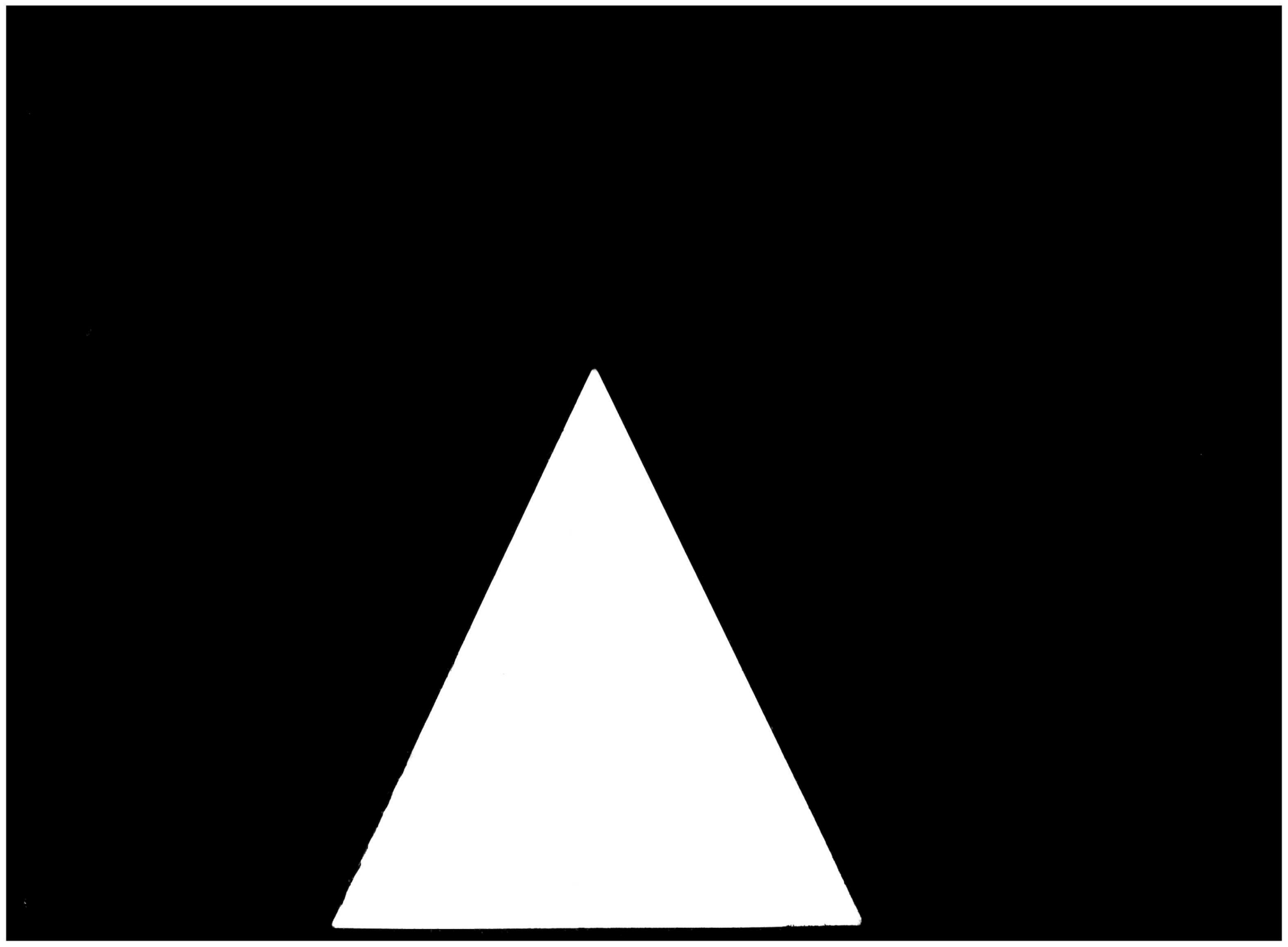
Official Seal

Ordinary of Cobb County.

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

Georgia Paulding County
I H Scoggins Ordinary
in and for said Comty hereby
Certify that J. S. Graves and David
Kennedy are known to me to be
trustful reliable and entitled to
full faith & credit.
Given under my
hand and seal of office
this 2nd day of June 1891

H C Scoggins
Ordinary



Approved tax returns
Rich Johnson
Sec
No. 396
Steele, J. D.
Cobb Co

INDIGENT PENSION

1895.

Name J. D. Steele

County Cobb

Ground

Aug 1 1896

O.K. RICHARD JOHNSON,
J. M. Stone
Secretary Executive Department.
Ordny.

WARRANT HANDED TO

Appt

Geo. W Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____

Witness my hand and seal this _____ day of _____ 1895.

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

I, hereby authorize

of

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

at by

Witness my hand and seal this day of 1895.

Executed in presence of

)

)

INDIGENT PENSION
1895.

Name J. D. Steele
County Cobb
Ground
Filed Aug 1896
No. 39 & 1 Cobb
Atty Grisham
Atty Gen
O. K. RICHARD JOHNSON, Secretary Executive Department.
By Hamilton Asst. Secretary.
WARRANT HANDED TO
Geo. W. Harrison, State Printer, Atlanta.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA, Cobb County. } Co. A, 4 (or 6th) Regt. Ga. Militia

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

1. What is your name and where do you reside? (give State, County and post office) Tennessee Cobb Co Ga.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Same place about 72 years
3. When and where were you born? in 1819 in south Carolina.
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Militia
5. When and where did you enlist? 1864 May. ~~Atlanta. Camp Brown.~~
6. In what company and regiment did you enlist? Co. A 6th Reg.
7. How long did you remain in that company and regiment? until April 1865
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? No transfer
9. For how long a period did you discharge regular military duty? ~~Six~~ About 4 years
10. When, where and under what circumstances were you discharged from service? at the surrender.
11. What is your present occupation? Farming.
12. How much can you earn per annum by your own exertions or labor? Nothing
13. What has been your occupation since 1865? Farming.
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? About Hundred dollars. Nothing
15. What is your present physical condition and how long have you been in such condition? I am 75 years old infirm, worn out unable to work can hardly get about. Cant get about without stick
16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Age, poverty infirmity.
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? I have been unable to work for ten years. My hip was knocked out of joint and it affects me yet and a man in my condition and age cannot labor.
18. What property, effects or income do you possess? 1 Cow and calf
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? Same.
20. In what County did you reside during those years and what property did you then return for taxation? Cobb Nothing.
21. How were you supported during the years 1893 and 1894? By my children.
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About a hundred dols a year — Nothing.
23. What was your employment during 1893 and 1894? What pay did you receive in each year? I could do nothing. Nothing.
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? Have no family. Wife is dead children all married and are [illegible]

25. Are you receiving a pension under any law of this State, if so what amount and for what disability? $20.

Sworn to and subscribed before me this the 4th day of April 1895. } J. D. Steele Applicant.

Jno. Stone Ordinary of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, Cobb County. } Humphries Reid (Major) 4th (or 6th) Regt Ga. Militia

Humphries Reid, of said State and County, having been presented as a witness in support of the application of J. D. Steele for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Marietta Cobb Co Ga.
2. Are you acquainted with J. D. Steele, the applicant, if so how long have you known him? since 50
3. Where does he reside, and how long has he been a resident of this State? Kennesaw Cobb Co Ga.
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Yes. I served with him in the war.
5. When, where and in what company and regiment did he enlist? Co I 60th Reg.
6. Were you a member of the same company and regiment? I was major
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About a year. He was discharged at the surrender.
8. What property, effects or income has the applicant? (Give your means of knowledge.) Know of none.
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? Know of none.
10. What is the applicant's occupation and physical condition? He is old infirm and unable to earn a living by work.
11. Is the applicant unable to support himself by labor of any sort, if so, why? ~~Same~~ He is because of oldage and infirmity
12. How was he supported during the years 1893 and 1894? I am informed by his children.
13. What portion of his support for these two years was derived from his own labor or income? Do not know. Nothing would say from his appearance.
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? Because he is a very old man infirm and a man can tell by looking at him, that he is incapable of earning a living by labor
15. What interest have you in the recovery of a pension by this applicant?

Sworn to and subscribed before me, this the 4th day of April 1895. } Humphries Reid Witness

Jno. Stone Ordy

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, Cobb County. }

Personally came before me C. J. Nolan M. D. and Gilbert Jenent M. D., both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully J. D. Steele, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

About ten years ago was thrown from mule dislocating left hip which has never been reduced making him permanently lame in that limb and interfering materially with his walking

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 4th day of April 1895. } C. J. Nolan M. D. Gilbert Jenent M. D.

Jno. Stone Ord

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Cobb County. }

I, Jno. Stone, Ordinary in and for said County, hereby certify that the applicant J. D. Steele resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: Humphry Reid, C. J. Nolan M. D. & Gilbert Jenent M. D. are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1893, $150. Personal property dollars of property, and in 1894, Nothing dollars of property.

Witness my hand and seal of office, this 4th day of April 1895.

Jno. Stone Ordinary of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. D. Steele hereby authorize J. R. Steele of Atlanta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st day of July 1897. J D Steele [L. S.]

Executed in presence of
M. Stone
Ordy.

ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)

No. 1283

INDIGENT
Soldier's Pension.
1897.

Name J. D. Steele
County Cobb

1/21 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Att

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

POWER OF ATTORNEY.

State of Georgia,
Cobb County.

I, J. D. Steele hereby authorize J. R. Steele of Atlanta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 8th day of July 1898. J D Steele [L. S.]

Executed in presence of
J. M. Stone
Ordy.

Steele, J. D.
Cobb Co.

ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)

NO. 597

INDIGENT
SOLDIER'S PENSION,
1898.

Name J. D. Steele
County Cobb

WARRANT ISSUED
1/11 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Att

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

M. Ttn

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J D Steele of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continously ever since the 1st day of June 1819 that he is 77 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 11 Mos. in Company A, of 4th Regiment of Ga Militia; that his physical condition is as follows: On account of my age and infirmity I am unable to do any work.

that his property consists of the following items None

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Cobb county been allowed a pension for the year 1896

Sworn to and subscribed before me, this the 12th day of January 1897. J D Steele

J H Stone Ordinary.

STATE OF GEORGIA,
Cobb County.

I, J H Stone Ordinary of said County, do certify that I am well acquainted with J D Steele 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 January 1897.

Affix your seal here.

J H Stone
Ordinary Cobb County.

NOTE—The blanks spaces must be filled.

Co A 4th (or 6th) Regt Ga Militia

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J D Steele of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the About 75 Years day of 18; that he is 78 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 11 Mos in Company A, of 4th Regiment of Ga. Militia; that his physical condition is as follows: that on account of his age and infirmity he is unable to support himself at any kind of labor

that his property consists of the following items

Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of Cobb county been allowed a pension for the year 1897

Sworn to and subscribed before me, this the 8th day of January 1898. J D Steele

J H Stone Ordinary.

State of Georgia,
Cobb County.

I, J H Stone Ordinary of said County, do certify that I am well acquainted with J D Steele 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 8th day of January 1898.

Affix your seal here.

J H Stone
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, J. D. Steele, hereby authorize J. M. Steele of Cobb Co. to receive and receipt for the pension allowed, and request that he remit same to me by him

Witness my hand and seal this 12th day of Jany 1899.

Executed in presence of J. D. Steele (L. S.)

CODE SEC. 1254.
(For Those Already Enrolled.)

No. 1470

INDIGENT
SOLDIER'S PENSION,
1899.

Name J. D. Steele
County Cobb

WARRANT ISSUED 1/16 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Steele

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, J. D. Steele hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension allowed, and request that he remit same to me by him

Witness my hand and seal, this 15 day of Jany 1900.

J. D. Steele [L. S.]

Executed in presence of T. J. Hamby

Steele, J. D.
Cobb Co.

CODE SEC. 1254.
(For Those Already Enrolled.)

NO. 817

INDIGENT
SOLDIER'S PENSION,
1900.

Name J. D. Steele
County Cobb

WARRANT ISSUED January 18 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Stone

Geo. W. Harrison, State Printer, Atlanta.

No data

Co A. 4th (or 6th) Regt Ga Militia

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. D. Steele of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1816; that he is 79 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 11 Months in Company A, of 4th 6th Regiment of Ga ~~State troops~~ Militia; that his physical condition is as follows: On account of age infirmity and poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Cobb county been allowed a pension for the year 1898

Sworn to and subscribed before me, this the 12th day of Jany 1899. J D Steele

J M Stone Ordinary.

State of Georgia,
Cobb County.

I, J M Stone Ordinary of said County, do certify that I am well acquainted with J. D. Steele 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 Jany 1899.

Affix your seal here.

J M Stone
Ordinary Cobb County.

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

Co. a 4th (or 6th) Regt. Ga. Militia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. D. Steele of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1816; that he is 80 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 11 Mos. in Company A, of 4 (6th) Regiment of Ga. ~~State troops~~; that his physical condition is as follows: On account of age, infirmity and poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cobb county been allowed a pension for the year 1897

Sworn to and subscribed before me, this the 15th day of January. 1900. J D Steele

J M Stone Ordinary.

State of Georgia,
Cobb County.

I, J M Stone Ordinary of said County, do certify that I am well acquainted with J. D. Steele 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 Jany. 1900.

Affix your seal here.

J M Stone
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. D. Steele hereby authorize John Awtrey of Marietta to receive and receipt for the pension allowed and request that he remit same to me at by

Witness my hand and seal, this 12th day of Jany. 1901.

J D Steele [L. S.]

Executed in presence of

(For Those Already Enrolled.)

No. 24

INDIGENT
SOLDIER'S PENSION.
1901.

Name J D Steele
County Cobb

WARRANT ISSUED
Jan 15th 1901.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO
Awtrey
Geo. W. Harrison, State Printer, Atlanta

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. D. Steele hereby authorize John Awtrey of Cobb to receive and receipt for the pension allowed and request that he remit same to at by Home

Witness my hand and seal, this day of 1902.

J D Steele [L. S.]

Executed in presence of
J M Gann

Steele, J. D.
Cobb County

CODE SECTION 1254
(FOR THOSE ALREADY ENROLLED.)

No. 548

INDIGENT
SOLDIER'S PENSION
1902.

Name J. D. Steele
County Cobb
Co. A Regiment 4 Ga

WARRANT ISSUED
1/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO
Cady
Geo. W. Harrison, State Printer, Atlanta

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appeare J D Steele of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1816, that he is 82 years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 11 mos. in Company A, of 4 th Regiment of Ga. State Troops ; that his physical condition is as follows: On account of age infirmity & poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Cobb county been allowed a pension for the year 1900.

J D Steele

Sworn to and subscribed before me, this the 12 day of Jany 1901

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with J D Steele 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 Jany 1901.

John Awtrey Ordinary Cobb County.

Affix your seal here

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J D Steele of Cobb County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1816; that he is 86 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 11 months in Company A, of 4th Regiment of Ga State Troops; that his physical condition is as follows: On account of age infirmity and poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb county been allowed a pension for the year 1

J D his Thumb Steele

Sworn to and subscribed before me, this the 1st day of January 1902.

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with J D Steele 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 1902.

John Awtrey

Affix your seal here

Ordinary Cobb County.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

I, _____ hereby authorize _____
_____ of _____
to receive and receipt for the pension allowed and request that he remit same to
_____ at _____
by _____

Witness my hand and seal, this _____ day of _____ 1903.

_____ [L. S.]

Executed in presence of

Steele, J. D.
Cobb Co

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 539

INDIGENT
SOLDIER'S PENSION
1903.

Name J. D. Steele
County Cobb
Co. A 4th Regiment Ga. State Troops

WARRANT ISSUED
1/28 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

Geo. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. D. Steele hereby authorize
John C. Whey of
to receive and receipt for the pension allowed and request that he remit same to
_____ at _____
by _____

Witness my hand and seal, this _____ day of _____ 1904.

J. D. Steele [L. S.]

Executed in presence of

Steele, J. D.
Cobb Co

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 638

INDIGENT
SOLDIER'S PENSION
1904.

Name [illegible]
County [illegible]
Co. [illegible] Regiment [illegible]

WARRANT ISSUED
1/30 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Orley

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J D Steele of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1816; that he is 84 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 11 mos in Company A, of 4 th Regiment of Ga. ~~State troops~~ Militia; that his physical condition is as follows: from age & poverty cannot support self

that his property consists of the following items:
nothing

of the value of ——— Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cobb county been allowed a pension for the year 1902.

J. D. Steele

Sworn to and subscribed before me, this the day of 1903.

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with J D Steele 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 June 1903.

John Awtrey
Ordinary Cobb County.

Affix your seal here.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
[illegible] County.

Personally appears [illegible] of [illegible] County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18[illegible]; that he is [illegible] years old and by occupation a [illegible], that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of [illegible] months in Company [illegible], of [illegible] th Regiment of [illegible]; that his physical condition is as follows: [illegible]

that his property consists of the following items: [illegible]

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of [illegible] County been allowed a pension for the year 19[illegible].

[illegible]

Sworn to and subscribed before me, this the [illegible] day of [illegible] 1904.

[illegible] Ordinary.

STATE OF GEORGIA,
[illegible] County.

I, [illegible] Ordinary of said County, do certify that I am well acquainted with [illegible] 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 [illegible] day of [illegible] 1904.

[illegible]
Ordinary [illegible] County.

Affix your Seal here.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY,

I, J D Steele hereby authorize
John Autrey of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 12 day of Jany 1905.

J. D. Steele [L. S.]

Executed in the presence of
J M Gann

Steele, J. D.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 763

INDIGENT
SOLDIER'S PENSION
1905.

Name J D Steele
County Cobb
Co. A Regiment 4th

WARRANT ISSUED
JAN 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J D Steele of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1866; that he is 85 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 11 mo in Company A, of 4 th Regiment of Ga State Troops; that his physical condition is as follows: Age infirmity and poverty

that his property consists of the following items: Nothing

of the value of ____ Dollars. I am now earning, by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

J D Steele

Sworn to and subscribed before me, this the 12 day of January 1905.

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 12 day of January 1905.

John Awtrey

Ordinary Cobb County.

Affix your Seal here

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

Seal here

Ordinary ..... County.

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

Steele J. V.

No. Cobb Co.

INDIGENT PENSION

1898.

Name John V. Steele

County Cobb

Approved ..... 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

3/25-98

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

I, _____, of _____, hereby authorize _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____

Witness my hand and seal this _____ day of _____ 1898.

Executed in presence of

_____ (L. S.)

_____

POWER OF ATTORNEY.

STATE OF GEORGIA,
COUNTY.

I, ... hereby authorize

..... of .....

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

..... at ..... by .....

Witness my hand and seal this ..... day of ..... 1898.

Executed in presence of

..... (L. S.)

Steele J. V.
No. Cobb Co

INDIGENT PENSION

1898.

Name John V. Steele
County Cobb

Approved ..... 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

3/25-98

Questions for Applicant.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office.) John V. Steele - Cobb County Ga. P.O. Marietta Ga
2. How long and since when have you been a resident of this State? I have lived in this County & State Sixty ~~five~~ Years -
3. When and where were you born? I was born July 26th 1836 -
4. When and where and in what company and regiment did you enlist or serve? I enlisted in Marietta Ga in 1862 - in Co B 41st Ga Regiment.
5. How long did you remain in such company and regiment? About 2½ Years -
6. For how long a period did you discharge regular military duty? About 2½ Years -
7. When, where and under what circumstances were you discharged from service? I was Captured, in Johnstons Retreat to Atlanta. At the Appling Farm in Cobb Co.
8. What is your present occupation? Crop[illegible]ing
9. How much can you earn (gross) per annum by your own exertions or labor? Scarcely anything -
10. What has been your occupation since 1865? Crop[illegible]ing -
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Age infirmity and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I have not been able to make a full hand for ten or twelve Years but have been able to make a living by economy until the past three Years. Since then I have been unable to make a living but labor. I am a great sufferer from Rheumatism in my limbs and have suffered for a number of years in varying extent. In the winter time I am confined to my house and have suffered for a number of years in varying extent.
13. What property, effects or income do you possess, and its gross value? I have nothing but a little household & Kitchen furniture Value $40.00 an old mule & wagon Value $35.00 [illegible]
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897, and what disposition, if any, did you make of same? I had no other property than above mentioned and made no disposition of any -
15. In what County did you reside during those years, and what property did you then return for taxation? I resided in Cobb County during those Years -
16. How were you supported during the years 1896 and 1897? I was supported by the labor of myself aided by my children.
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Individually it cost about forty or fifty dollars - I did not contribute more than a third -
18. What was your employment during 1896 and 1897? What pay did you receive in each year? Crop[illegible]ing (those Years.) None - except my living as above mentioned.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Yes, Wife - two daughters and one Son. Their means of support is their labor. They have no homestead
20. Are you receiving any pension? If so, what amount, and for what disability? None -

Sworn to and subscribed before me this the 5 day of May, 1898.
J. M. Stone Ordinary
of Cobb County.

John V. Steele
Applicant.

Every Question MUST be Answered

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb COUNTY.

John T. Conn of said State and County, having been presented as a witness in support of the application of John V. Steele for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? My name is John T. Conn I reside in Cobb County

2. Are you acquainted with John T. ~~Conn~~ V. Steele, the applicant; if so how long have you known him? I have known him ever since 1862

3. Where does he reside, and how long and since when has he been a resident of this State? He resides in Cobb Co and resided here ever since 1862

4. When, where and in what company and regiment did he enlist, and how do you know? He enlisted in Co B. 41st Ga Regt in Marietta in March 1862

5. Were you a member of the same company and regiment? I was a member of the same Co & Regt

6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About three years - I do not remember the circumstances of his discharge - but know that he was a good and faithful soldier.

7. What property, effects or income has the applicant? (Give your means of knowledge.) I do not know of any property or effects possessed by him

8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? Don't know - because I do not live near him -

9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom? Don't know - for the above reason

10. What is the applicant's occupation and physical condition? Don't know because of the above reason.

11. Is the applicant unable to support himself by labor of any sort, if so, why? Can't say - because of above reason

12. How was he supported during the years 1896 and 1897? Don't know -

13. What portion of his support for these two years was derived from his own labor or income? Don't know.

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? Don't know, because I live in one portion of the County of Cobb and he lives in another -

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

Sworn to and subscribed before me, this the 5 day of Mch 1898.

J. T. Conn Witness. as to Nos 1. 2. 3. 4. 5 & 6

J. M. Stone Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me A. E. Johnson M.D. and J. D. Malone M.D., both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully John V. Steele, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

That he is suffering from chronic rheumatism affecting his legs and hips, at times he is confined to his bed. He has been thus afflicted for ten or twelve years - His legs and hips are affected to an extent that renders him unable to perform manual labor. He grows worse with age.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the 5 day of Mch 1898.

A. E. Johnson M.D.
J. D. Malone M.D.

J. M. Stone Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I J. M. Stone Ordinary in and for said County, hereby certify that the applicant J. V. Steele resides in said County, and has been a bona fide resident of this State since the he says all his life and that the witnesses, viz: J. T. Conn, M. P. Dunn, A. E. Johnson M.D. and J. D. Malone M.D. are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1896 $170. (Personally) Dollars of property, and in 1897 $105. (Personally) Dollars of property.

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

Witness my hand and seal of office, this 23 day of Mch 1898.

J. M. Stone Ordinary
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John V. Steele hereby authorize
J. M. Stone of Marietta
to receive and receipt for the pension allowed, and request that he remit same to
me at
by him

Witness my hand and seal this 14 day of Jany, 1899.

Executed in presence of

John V his X Steele (L. S.)
mark

Pay to J. G. Hamby
Jany 20/99 J. M. Stone

CODE SEC. 1284.
(For Those Already Enrolled.)

No. 3578

INDIGENT
SOLDIER'S PENSION,
1899.

Name John V Steele
County Cobb

WARRANT ISSUED
1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. G. Hamby

Geo. W. Harrison, State Printer, Atlanta.

Steele J. V.
Cobb Co

CODE SEC. 1284.
(For Those Already Enrolled.)

NO. 574

INDIGENT
SOLDIER'S PENSION,
1900.

Name J. V. Steele
County Cobb

WARRANT ISSUED
Jan 17 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Jno E Mosby

Geo. W. Harrison, State Printer, Atlanta

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. V. Steele hereby authorize
Jno. E. Mosby of Marietta Ga
to receive and receipt for the pension allowed, and request that he remit same to
me
by him

Witness my hand and seal, this 15 day of Jan. 1900.

Executed in presence of

J. V. his X Steele [L. S.]
mark

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears John V. Steele of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 26 day of July 1834, that he is 64 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 1/2 Yrs in Company B, of 41 th Regiment of Ga. Vols; that his physical condition is as follows: On account of Infirmity and poverty he is unable to make support for himself

that his property consists of the following items Nothing

of the value of — Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Cobb county been ~~allowed a pension for the year~~ enrolled for pension 189

Sworn to and subscribed before me, this, the 14th day of Jany 1899.

John V. his x mark Steele

J. M. Stone Ordinary. Marietta Ga.

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 14th day of Jany 1899.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears John V. Steele of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 26 day of July 1834, that he is 65 years old and by occupation a Farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 1/2 in Company B, of 41st Regiment of Ga Vols.; that his physical condition is as follows: On account of infirmity and poverty he is unable to make support

that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cobb county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the 15 day of Jany 1900.

J. V. his x mark Steele

J. M. Stone Ordinary.

State of Georgia,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with J. V. Steele 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 Jany 1900.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John V. Steele hereby authorize
John Awtrey of Marietta, Ga.
to receive and receipt for the pension allowed and request that he remit same to
me at
by him

Witness my hand and seal, this 2nd day of January 1901.
John V. his x mark Steele [L. S.]

Executed in presence of
Thos. J. Kenny

(For Those Already Enrolled.)
No. 247

INDIGENT
SOLDIER'S PENSION.
1901.

Name John V. Steele
County Cobb

WARRANT ISSUED
Jan 5 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Awtrey
Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John V. Steele hereby authorize
John Awtrey of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 14th day of Jan 1902.
John V. his x mark Steele [L. S.]

Executed in presence of

Steele, John V.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 546

INDIGENT
SOLDIER'S PENSION
1902.

Name John V. Steele
County Cobb
Co. B Regiment 41st

WARRANT ISSUED
1/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Only

Geo. W. Harrison, State Printer, Atlanta.

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appeare John V. Steele of Cobb
County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 26th day of July 1834; that he is 68 years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3½ years in Company B, of 41st Regiment of Ga. Vols.; that his physical condition is as follows: On account of infirmity and poverty he is unable to make a support for himself
that his property consists of the following items Nothing

of the value of $ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Cobb county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the 2nd day of January 1901. John V. his X mark Steele

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with John V. Steele 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 2nd day of January 1901.

John Awtrey
Ordinary Cobb County.

Affix your seal here

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears John V Steele of Cobb
County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 26th day of July 1834; that he is 67 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3½ Years in Company B, of 41st Regiment of Ga Vols; that his physical condition is as follows: On account of infirmity and poverty he is unable to make support for himself
that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 14 day of Jany 1902. John V. his X mark Steele

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

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

John Awtrey
Ordinary Cobb County.

Affix your seal here

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. V. Steele hereby authorize
John Mobray of
to receive and receipt for the pension allowed and request that he remit same to
at
by hand

Witness my hand and seal, this day of 1903.
John V. his x Steele Mark [L. S.]

Executed in presence of
J. M. Gann

Steele John V.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 509

INDIGENT
SOLDIER'S PENSION
1903.

Name John V. Steele
County Cobb
Co. A Regiment 41

WARRANT ISSUED
1/23 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. V. Steele hereby authorize
John Mobray of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 1 day of Jan 1904.
J. V. his x Steele Mark [L. S.]

Executed in presence of
J. M. Gann

Steele John V.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 689

INDIGENT
SOLDIER'S PENSION
1904.

Name J. V. Steele
County Cobb
Co. 15 Regiment 4

WARRANT ISSUED
1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. W. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears John V. Steele of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 26 day of July 1834; that he is 68 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 1/2 yrs in Company B, of 41th Regiment of Ga. Vols; that his physical condition is as follows: from infirmity & poverty he cannot support himself

that his property consists of the following items: nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cobb county been allowed a pension for the year 1902

Sworn to and subscribed before me, this the 3 day of January 1903.

John V. his x Steele mark

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with John V. Steele 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 3 day of Jan 1903.

John Awtrey
Ordinary Cobb County.

Affix your seal here

NOTE—The blank spaces must be filled.
NOTE—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears John V. Steele of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 26th day of July 1834; that he is 69 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 years in Company B, of 41st Regiment of Ga Vols; that his physical condition is as follows: from infirmity & poverty he cannot support himself

that his property consists of the following items: nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1903.

Sworn to and subscribed before me, this the 1 day of Jan 1904.

John V. his x Steele mark

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with J V Steele 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 1 day of Jan 1904.

John Awtrey
Ordinary Cobb County.

Affix your seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J V Steele hereby authorize John Hudsey of to receive and receipt for the pension allowed, and request that he remit same to at by.

WITNESS my hand and seal, this 5 day of June 1905.

J V Steele [L. S.]
Mark

Executed in the presence of
J. M. Gann

Steele John V.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 762

INDIGENT
SOLDIER'S PENSION
1905.

Name J V Steele
County Cobb
Co. B Regiment 41st

WARRANT ISSUED
1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J V Steele hereby authorize John Hudsey of to receive and receipt for the pension allowed, and request that he remit same to at by.

WITNESS my hand and seal, this 3 day of June 1906.

J V Steele [L. S.]
Mark

Executed in the presence of
J M Gann

Steele J. V.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 716

INDIGENT
SOLDIER'S PENSION
1906.

Name J V Steele
County Cobb
Co. B 41st Regiment

WARRANT ISSUED
1/22 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Lady

THE FRANKLIN PRINTING AND PUBLISHING CO. GEO. W. HARRISON, MGR.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears John V Steele of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 26 day of July 1834; that he is 70 years old and by occupation a former, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3½ years in Company B, of 41 th Regiment of Ga Cals; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: Nothing

of the value of Dollars. I am now earning, by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 5 day of Jany 1905.
John Ardrey Ordinary.

J V his mark Steele

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 5 day of Jany 1905.

John Ardrey
Ordinary Cobb County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears J V Steele of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18; that he is years old and by occupation a , that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of in Company B, of 41 th Regiment of Vals; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items:

of the value of Dollars. I am now earning by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 3 day of Jany 1906.
John Ardrey Ordinary.

J V his mark + Steele

State of Georgia,
Cobb County.

I, John Ardrey Ordinary of said County, do certify that I am well acquainted with J V Steele 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 3 day of Jany 1906.

John Ardrey
Ordinary Cobb County.

Affix your seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, J. V. Steele, hereby authorize John Sweting of

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

at

by

WITNESS my hand and seal, this 8 day of January 1907.

J. V. Steele [L. S.]
Mark

Executed in presence of

Steele, John V.
Cobb Co.,

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 656

INDIGENT
SOLDIER'S PENSION
1907.

Name J. V. Steele
County Cobb
Co. B. Regiment 41
2a Vols.

WARRANT ISSUED

JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Cobb County.

Personally appears J V Steele of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18__; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company B, of 4th Regiment of _____; that his physical condition is as follows: Inf & poverty

that his property consists of the following items: _____

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 8 day of January 1907.

John Awtrey Ordinary.

J V Steele
his
mark

State of Georgia,
Cobb County.

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

Given under my official signature and seal this 8 day of January 1907.

John Awtrey
Ordinary Cobb County.

Affix your seal here

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

State of Georgia Cobb County
In person appeared before
the undersigned W H Richards
Son who after being duly
sworn says that he knows
J V Steel and that he served
in the Army with said J V
Steel for over 2 years in
Co B 41st Ga and that while
we was camped in Cobb Co
near Marietta Ga in June
or July 1864 said J V Steel
left the camp to go to see
his wife & child that lived
some 7 or 8 miles East of Marietta
in Cobb County my understan
ding was that he was captured
& carried north and I did
not see him any more
till after the surrender my
understanding all the time
has been that said J V Steel
went to see his family and
was returning to his command
when he was arrested
and carried back north

State of Georgia Cobb County
In person appeared before
the undersigned P M Hairston
who after being duly sworn
says that he knows J V
Steel I served with him
in the Army for about
three years in Co B 41 Ga
while we was camped
near Marietta Ga in
June or July 1864 he left the
camp went home to see
his family. He knew that
was the last chance to
get to see them. and was
captured before he returned
and was carried north
he is about 75 years old
unable to work He was
as good soldier as we had
in the command I did
not see him captured
but that was my under
standing sworn to and
subscribed to before me this June 15th
1909. Thos E. Latimer N.P.
P M Hairston

I know he was one of as good soldiers as we had while he was with us. A No of our Boys went home while we was passing threw our County. J V Steel is about 75 years old is unable to work is blind in one Eye & Cant see much out of the other I am satisfied that when said J V Steel left our Camp that he intended to go to see his Wife & Child but was captured before he got back

Sworn to and subscribed before me this June 15th 1909.

F. H. Richardson

Thos. E. Latimer N.P.
Cobb Co. Ga.

Georgia
Cobb County.

Personally appeared before me, John M. Stone Ordinary of said County. M. P. Hunn, who is presented as a witness in support of the application of John V. Steele for pension under the act approved December 15th, 1894. and after being duly sworn true answers to make, deposes and answers as follows,

To question 7. He answers, That applicant has no property of his own. That applicant returns for taxation some household and Kitchen furniture for taxation. also a one horse wagon and an old mule. but that this property belongs to applicants wife. Witness knows this because of his intimate acquaintance with applicant and his family for the past twenty years. and knows that the family and applicant so regarded it. having been derived through her. That the value of the whole would not exceed sixty dollars. He has no income. except what little he could contribute in labor to the efforts of his family to make a living.

To q 8. He answers: He had no other property or income in 1896 and 1897. than that possessed by him now and mentioned above.

To q 9. He answers. That applicant has not conveyed away any of his property in the past three years.

To q 10. He answers. Applicant is an old man and suffers a a great deal from rheumatism in his limbs. He is

Jno. W. Lindsey,
Commissioner of Pensions,
Atlanta, Ga.

PENSION OFFICE.

June 9 1909

To John V Steele
Marietta Cobb Co Ga.

SIR:

You are hereby notified to furnish to this office on or by the 23
day of June 1909, sufficient competent evidence, why you should
not be stricken from the indigent Pension Roll of
Cobb County, for cause stated below, preferred against you
by Grand Jury 1909

This evidence must be first class, made before Ordinary of your County, clearly and distinctly showing, beyond doubt your right to this Pension under the law.

Charge

That you are not entitled to this Pension

J W Lindsey
Comr of Pensions

and has been for some years Constantly Complaining of this disease. At times rendering him unable to get about or do any work. He has no occupation now.

To g 11= He answers, Applicant is unable to Support himself by labor of any Sort because of his infirmity above described.

To g 12 He answers. That he was a cropper in 1896 and 1897 and made a meagre Support by the aid of his children.

To g 13. He answers. It would be difficult to say what part he contributed to his Support for the two years Mentioned, but Knows he could not have Contributed but very little because of his infirm Condition.

To g 14. He answers. That it is impossible for him to give a more extended discription of applicants Condition than he has already done but Knows that he is an infirm old man and is unable to work.

To g 15 & 16 answers. He has no interest in the recovery of a pension by applicant.

M O Dunn

Sworn to and Subscribed
before me this March 5 1898
J M Stone
Ord

Steele, 190 John V.
Cobb County

Exp - Pontic 1909
Proceedings

John V. Steele

Charge
not intitled
to the Pension

Cited to June
22 - 1909 - Continued
to 21 July - Continued to 27
ck

Restored
for 1912

State of Georgia, Cobb County.

In persona appeared before the undersigned, John V. Steele, who being duly sworn says that in June or July 1864, he had been out home east of Marietta, Ga., as set out in affidavot heretofore filed in this matter, and had started back to his command, and on his way back just east of Marietta and about four or five miles therefrom, he was captured and carried to Nashville Tenn., where he was placed in prison and he remained there until the close of the war. Affiant does not now recollect the name of the prison, but the prison was near Nashville Tenn. Affiant was discharged from said prison in the spring of 1865, but he was so sick with typhoid fever at the time of his discharge that he could not travel; he recovered and got back to his home in Cobb County, Georgia, about the first of June 1865.

his
J. V. x Steele
mark

Sworn to and subscribed before
me this 26th day of July, 1909.

Ordinary Cobb County
Ga

"Pensioners Restored.

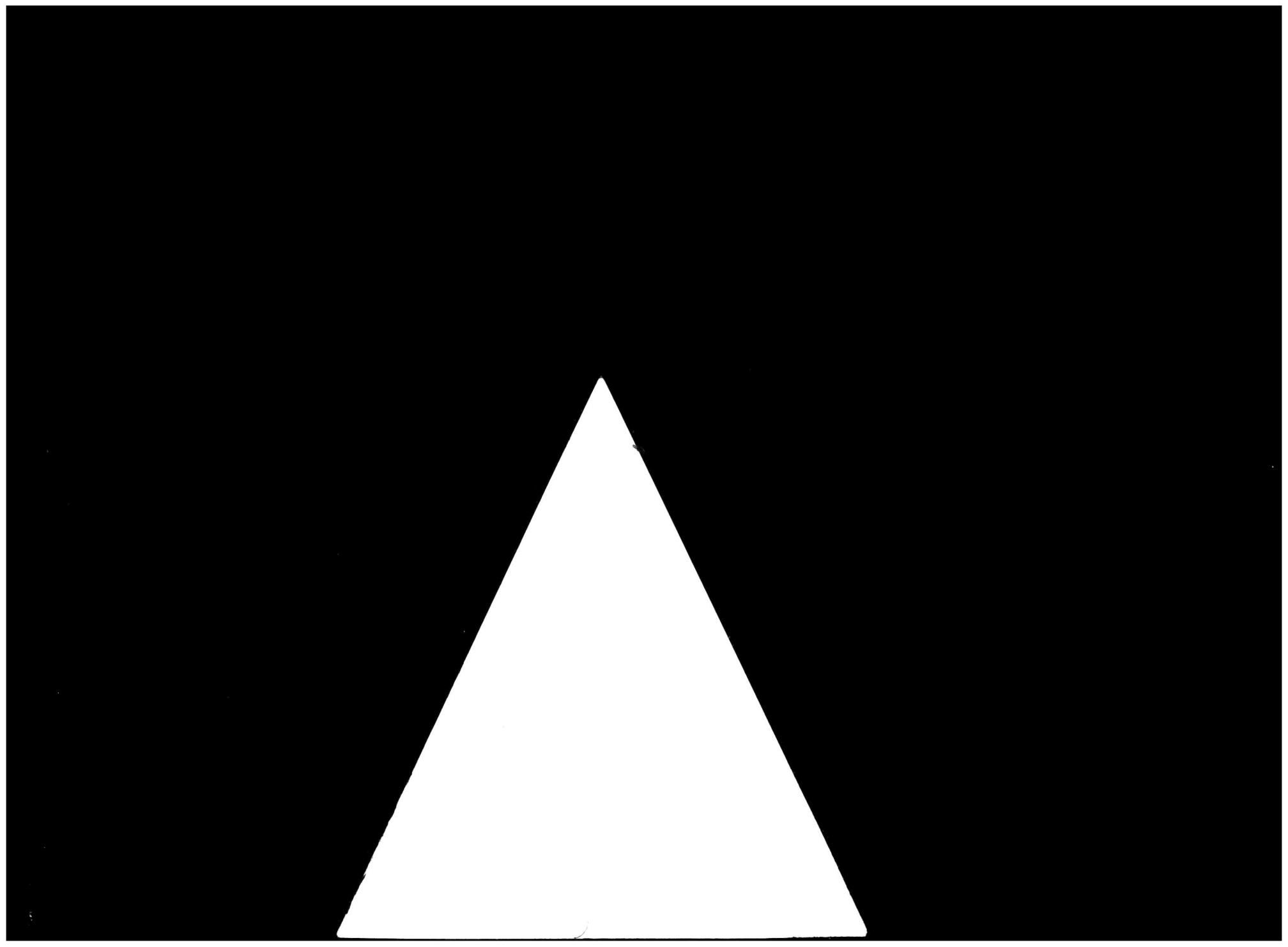
"Upon evidence presented us we recommend that Isaac Reed and John Steel be restored to the Pension Roll, and that they be paid for the year 1910."

Georgia, Cobb County.

I, J. M. Austin, Clerk of the Superior Court in and for said County hereby certify that the above is a true extract from the General Presentments as returned by the Grand Jury serving during the first week, November Term, 1910 of Cobb Superior Court, in reference to pensions.

Witness my hand and the seal of said Court on this the 10th day of December, 1910.

J. M. Austin
Clerk Superior Court.



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.

Steele, Mich.
Lisabo Leg.
Cobb Co

No. 2196

APPLICATION FOR ALLOWANCE

FOR

Right leg Disabled

Applicant, M. W. Steele

County Cobb

Amount $50

Date of Warrant May 6

Entered on record May 6 1889

SECRETARY EXECUTIVE DEPARTMENT.

Applicant

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.

Stale O K $50.00
Fees $1.25 Leg.
Co Fee $.50

No. 2196

APPLICATION FOR ALLOWANCE

FOR

Applicant, M W Steele

County Coble

Amount $50.00 May 6

Date of Warrant May 6 1889

Entered on record May 6 1889

SECRETARY EXECUTIVE DEPARTMENT.

Applicant

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
Coble County.

PERSONALLY appears M W Steele of Coble 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 February 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 Lieutenant in Company A, of 18th Regiment of Georgia Volunteers W.T. Wofford 's Brigade; that whilst engaged in such military service, at the battle of Cold Harbor in the State of Virginia, on the 15th day of June 1864 he was wounded as follows: While in line of battle as a Soldier in the Service of the Confederate States a Minnie ball fired by the enemy struck him in the right hip joint and passing through breaking the bone which caused the right leg to become some three inches short and still preventing his movement and rendering the same limb substantially and essentially useless

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 6th day of May 1889. M. W. Steele

R M Mitchell J.P.

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,
Coble County.

PERSONALLY came before me James L Lemon M M Phillips of the county of Coble State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company A, of 18th Regiment of Georgia Volunteers, and that deponent knows M W Steele, 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 M W Steele as stated by him in said affidavit. Deponent further states that said M W Steele is a *bona fide* citizen of this State and resides in Coble county. L. L Lemon Capt Co H 18 Ga Regt

Sworn to and subscribed before me this 6 day of May 1889 M M Phillips Lt Co A 18th Ga Regt

R M Mitchell J.P.

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:

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.

Steele Wm W. Ga. Inf. Co K

No. 2196

APPLICATION FOR ALLOWANCE

FOR

Right Leg Disabled

Applicant, Wm W Steele Corp'l

County Coweta

Amount $72.

Date of Warrant May 6 1889

Entered on record May 6 1889

SECRETARY EXECUTIVE DEPARTMENT.

Applicant

Coweta County.

PERSONALLY appears M W Steele of Coweta 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 15 day of February 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 Corporal in Company A, of 18 Th Regiment of Georgia Volunteers W.T. Wofford 's Brigade; that whilst engaged in such military service, at the battle of Cold Harbor in the State of Virginia, on the 15th day of June 1864 he was wounded as follows: While in line of battle as a Soldier in the Service of the Confederate States a minnie ball fired by the enemy struck him in the right hip joint and passing through breaking the bone which caused the right leg to become some three inches short and shall prevailing his movement and rendering the said limb substantially and essentially useless

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 6 day of May 1889 — M. W. Steele

R M Mitchell J.P.

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,

Coweta County.

PERSONALLY came before me James L Lemon M M Phillips of the county of Coweta State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company A, of 18th Regiment of Georgia Volunteers, and that deponent knows M W Steele, 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 M W Steele as stated by him in said affidavit. Deponent further states that said M W Steele is a *bona fide* citizen of this State and resides in Coweta county. L. L Lemon Col C.S.A. 18th Ga Regt

Sworn to and subscribed before me this 6 day of May 1889 — M M Phillips Lt Co. A. 18th Ga Regt

R M Mitchell J.P.

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:

BAD COPY***OR***LIGHT PRINT

STATE OF GEORGIA, }
County. }

PERSONALLY came

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

Sworn to and subscribed before me, this
day of 188

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

STATE OF GEORGIA, }
County. }

PERSONALLY comes before me R M Mitchell Justice of the Peace ~~Ordinary~~ of said county, Drs J. R. Humphries and W. C. Humphries, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined M W Steele and after such examination say that the applicant has been injured as follows: Gun shot through the right hip [illegible] breaking up [illegible] fracturing [illegible] destroying the [illegible] & making the limb about three [illegible] rendering movement difficult [illegible] In consequence thereof the limb [illegible] substantially & essentially useless. [illegible] after wound for years & [illegible]

Sworn to and subscribed before me, this
6th day of May 1889

J R Humphries M. D.
W C Humphries M. D.

R M Mitchell J P
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, }
Cobb County. }

I, J. M. Stone Ordinary of said county, do certify that I am well acquainted with M. W. Steele 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 R. M. Mitchell before whom the foregoing affidavits were made and power of attorney was signed, is a Justice Peace of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 6th day of May 1889

J. M. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

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

In witness whereof I have hereunto set my hand and seal, this day of 188 (L. S.)

Executed in the presence of us:

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said county, do certify that I am well acquainted with M. W. Steele 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 W. R. Montgomery before whom the foregoing affidavits were made and power of attorney was signed, is a Clerk of Supr. Court of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 8th day of Feby 1890

J. M. Stone
Ordinary Cobb County.

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with M. W. Steele 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 23rd day of Feby 1891.

J. M. Stone
Ordinary Cobb County.

Steele, M. W.
Cobb Co

1890.
Cobb Co

No. 388
APPLICATION FOR ALLOWANCE.
FOR THE YEAR ENDING OCTOBER 30, 1890.
FOR
Leg Dis Cobb
Applicant, M. W. Steele
County, Cobb
Amount, $50.
Date of warrant, Feb 8
Entered on record Feb 8 1890
W. W. Harrison
Secretary Executive Department.
No. [illegible]
WARRANT HANDED TO
Applicant

Steele, M. W.
Cobb

1891
Steele M. W.
Cobb Co
PAID 1891, No

No. 1605
Application for Allowance
FOR THE YEAR ENDING OCTOBER 30, 1891.
FOR
Leg dis
Applicant, M. W. Steele
County, Cobb
Amount, $50.
Date of Warrant, Feb 24
Entered on record Feb 24 1891
W. W. Harrison
Secretary Executive Department.
No. [illegible]
WARRANT HANDED TO
Applicant

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Co 66 County.

PERSONALLY appears M. W. Steele of Co 66 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 10th day of Feb 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 Corporal in Company "A", of 18 th Regiment of Georgia Volunteers Wofford's Brigade; that whilst engaged in such military service, at the battle of Cool Harbor in the State of Virginia, on the 1st day of June 1864, he was wounded as follows: in the right hip by a minie ball passing through my hip - thereby making it almost useless since - thereby making me a cripple for life

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

Sworn to and subscribed before me, this the 8th day of February 1890
W. W. Montgomery J.P.C.

M. W. Steele

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
County.

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

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

[L. S.]

Executed in the presence of us:

DIRECTION.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears M. W. Steele of Cobb 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 15th day of February 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 K, of 18th Regiment of Ga. Volunteers (Wofford's) Brigade; that whilst engaged in such military service at the battle of Cold Harbor in the State of Virginia on the 1st day of June 1864, he was wounded as follows: Ball Entered Thigh from the front in the right Groin, Ranging Diagonally through thigh joint, fracturing Neck of bone, entering the bone Triangular in shape & Ranging 5½ inches & the Thigh bone to be taken out - Compelled to use Crutch - Am Practically incompetent to perform Ordinary 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, 1891. I have heretofore been allowed a pension of $50, dollars, for Paid disability,

Sworn to and subscribed before me, this the 23rd day of Feby 1891.
M. Alex Cody

M. W. Steele

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,
County.

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

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

[L. S.]

Executed in the presence of us:

DIRECTION.

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

STATE OF GEORGIA,
Cobb County.

I, M. Stone Ordinary of said county, do certify that I am well acquainted with M. W. Steele 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 repesents himself to be, and that he resides in this county.

Given under my official signature and seal, this 1st day of Mch 1894

M. Stone
Ordinary. Cobb County.

Cobb Co.
State, M. W.
No. 243

SOLDIER'S PENSION.
1892.

FOR THE YEAR ENDING OCTOBER 26, 1892

Name M. W. Steele
County Cobb
Disability Dis'ley
Amount, $ 50
Entered on record Mch 2 1892.

W. H. HARRISON,
Secretary of Executive Department.

AGENT.
Applicant

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1893.

[L. S.]

Executed in the presence of us:

DIRECTION.

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

Cobb Co.
Steele, M. W.
1893.

No. 627

Application for Allowance

For the Year Ending October 26, 1893.

FOR

Dis'ley

Applicant M. W. Steele
County, Cobb
Amount, 50
Date of Warrant, 31
Entered on record, Mch 4 1893.

Secretary Executive Department.

WARRANT HANDED TO
Applicant

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears M. W. Steele of Cobb 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 15 day of July, 1863; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company C, of 15 th Regiment of Ga. Volunteers Cleveland's Brigade; that whilst engaged in such military service at the battle of Cold Harbor in the State of Virginia, on the 1st day of June 1864, he was wounded as follows: Ball entered left thigh in the right hip coming out passing the bones of pelvis thigh and hip to by two inches Right Deponent is thereby rendered Practically incompetent to perform the Ordinary Manual operations of life

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of $50. Dollars for Said disability 1891

Sworn to and subscribed before me this the 15 day of March 1892.

M. W. Steele

Ordinary.

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

Ans Ordinary Annual Renewal of Life

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of 1892. [L. S.]

Executed in the presence of us:

DIRECTION.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears M. W. Steele of Cobb 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 15 day of July, 1863; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company C of 15 th Regiment of Ga. Volunteers Cleveland's Brigade; that whilst engaged in such military service at the battle of Cold Harbor in the State of Va. on the 1st day of June 1864 he was wounded as follows: Ball entered left thigh in the right hip coming out passing the bones of pelvis thigh and hip to by two inches Right Deponent is thereby rendered Practically incompetent to perform the Ordinary Manual operations of life

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of $50. dollars, for Said disability

Sworn to and subscribed before me, this the 15 day of March 1893.

M. W. Steele

Joe Stone Ord

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, }
Cobb County. }

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

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

Given under my official signature and seal, this 15 day of March 1893.

Joe Stone Ord

Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

Know all Men by these Presents. That I, _____

of _____

County, State of Georgia, do hereby appoint _____

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

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

day of _____ 1894.

_____ [L. S.]

Executed in the presence of us }

DIRECTIONS.

Send money to me as follows, by _____

to _____ P. O.

County, Georgia.

Steele, M. W. Co

(For Those Already Enrolled.)

No. 640

Soldier's Pension.

1894.

Name M. W. Steele

County Cobb

Disability Dr. Sea

Amount, $ 50

3/13

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDED TO

Wilhoit

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

KNOW ALL MEN BY THESE PRESENTS, That I, _____

_____ of _____

County, State of Georgia, do hereby appoint _____

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

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

day of _____ 1895.

_____ [L. S.]

Executed in presence of us }

DIRECTIONS.

Send money to me as follows, by _____

_____ to _____ P. O.

County, Georgia.

Steele, M. W.
Cobb Co.

(For Those Already Enrolled.)

No. 341

SOLDIER'S PENSION.

1895.

Name M. W. Steele

County Cobb

Disability Dry

Amount, $ 50

3/4

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Ark

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

Know all Men by these Presents. That I, _____

of _____

County, State of Georgia, do hereby appoint _____

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

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

day of _____ 1894.

_____ [L. S.]

Executed in the presence of us }

DIRECTIONS.

Send money to me as follows, by _____

to _____ P. O.

County, Georgia.

Steele, M. W.
Co.

(For Those Already Enrolled.)

No. 641

Soldier's Pension.

1894.

Name M. W. Steele

County Cobb

Disability Dr. Sea

Amount, $ 50

3/13

1894.

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDED TO

Wilhoit

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

KNOW ALL MEN BY THESE PRESENTS, That I, _____

_____ of _____

County, State of Georgia, do hereby appoint _____

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

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

day of _____ 1895.

[L. S.]

Executed in presence of us }

DIRECTIONS.

Send money to me as follows, by _____

to _____ P. O.

County, Georgia.

Steele, M. W.
Cobb Co.

(For Those Already Enrolled.)

No. 341

SOLDIER'S PENSION.

1895.

Name M. W. Steele

County Cobb

Disability Dry

Amount, $ 50

3/4

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Ash

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears M W Steele of Cobb 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 184[illegible] 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 A, of 18 th Regiment of Ga. Volunteers Wofford 's Brigade; that whilst engaged in such military service at the battle of Cold Harbor in the State of Va. on the 1st day of June 1864 he was wounded as follows: By gunshot Striking the right hip tearing and fracturing the bones & Muscles so that deponent is rendered Practically incompetent to perform the ordinary manual avocations of life

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of $50. dollars, for the year 1893

Sworn to and subscribed before me, this, the 17 day of Mch 1894. } M W Steele

J M Stone Ordy

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, }
Cobb County. }

I, J M Stone Ordinary of said County, do certify that I am well acquainted with M W Steele 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 17th day of Mch 1894.

Affix your seal here

J M Stone
Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

Personally appears M W Steele of Cobb 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 15 day of Feby 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 A, of 8th Regiment of Ga. Volunteers, Wofford 's Brigade; that whilst engaged in such military service at the battle of Cold Harbor in the State of Va. on the 1st day of June 1864 he was wounded as follows: By gunshot Striking the right hip & leg so that deponent is rendered Practically incompetent to perform the Ordinary Manual avocations of life

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of 50. dollars, for the year 1894

Sworn to and subscribed before me, this, the 11th day of Mch 1895. } M W Steele

J M Stone Ordy

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, }
Cobb County. }

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

Given under my official signature and seal, this 11th day of Mch 1895.

Affix your seal here

J M Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

I, _____ hereby authorize _____
_____ of _____
to receive and receipt for the pension paid hereon and request that he remit same to
_____ by _____
at _____.

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

_____ [L. S.]

Executed in presence of us
_____
_____

Steele, M W
Cobb Co

ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)

No. 1947

SOLDIER'S PENSION.

1896.
(To Jul 1897)

Name M. W. Steele
County Cobb
Disability Wound right hip
Amount, $ 50.
3/2 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Offer

Geo. W. Harrison, State Printer, Atlanta.

No data

Audited 1889.

COMPTROLLER GENERAL.

Cobb

Maimed Soldiers.

Voucher No. 2196
Amount, $ 50.
Paid to M. W. Steele
For Right leg disabled
May 6. 1889.

Included in Warrant No.
Issued to Treasurer
1889.

WARRANT CLERK.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears M W Steele of Cobb 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 _____ 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 A, of 18th Regiment of Ga Volunteers, Wafford's Brigade; that whilst engaged in such military service in the State of Va, on the 1st day of June 1864 he was wounded, injured or diseased as follows:

By gunshot striking the right hip tearing the hip to pieces — two inches of the bone taken out — deponent is rendered practically incompetent to perform the ordinary manual avocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Cobb county been allowed a pension of $50. dollars, for the year 1895.

Sworn to and subscribed before me, this, the 2nd day of Mch 1896. M. W. Steele

J. M. Stone Ordy

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,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with M W Steele 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 2nd day of Mch 1896.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

No. 2196

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. May 6. 1889.

Mr M. W. Steele of the County of Cobb 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 Right Leg disabled

He is entitled to receive the sum of Fifty 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.

TREASURY STATE OF GEORGIA

B Gordon
GOVERNOR.

By the Governor.

J W Warren
Secy ~~Clerk~~ EXECUTIVE DEPARTMENT.

50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/ Dollars,

per above voucher, this 6th of May 1889.

M. W. Steele

Audited 18

COMPTROLLER GENERAL

Cobb

Maimed Soldiers.

Voucher No. 588

Amount $ 50.

Paid to M M. Steele

For Leg disabled

Deby 8 1890

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK.

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

Applicant

Audited 1891.

COMPTROLLER GENERAL

Steele, M. M.

Cobb

1891.

Maimed Soldiers.

Voucher No. 1665

Amount $ 50

Paid to M. M. Steele

For Leg Disabled

Deby 21 1891.

Included in warrant No.

issued to Treasurer,

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

No. 588

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feby 8 1890

Mr. M. W. Steele of the County of Cobb 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 Leg disabled

He is entitled to receive the sum of Fifty & 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.

TREASURER'S OFFICE STATE OF GEORGIA

P. A. Gordon
GOVERNOR.

By the Governor,

W H Harrison
CLERK EXECUTIVE DEPARTMENT.

$ 50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty & 00 Dollars,

per above voucher, this 8 of Feby 1890

M. W. Steele

1891.

No. 1605

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga Feby 24, 1891.

Mr. M. W. Steele of the County of Cobb 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 Leg dis'd

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

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

W. J. Northen
GOVERNOR.

By the Governor,

W H Harrison
SEC'Y EXECUTIVE DEPARTMENT.

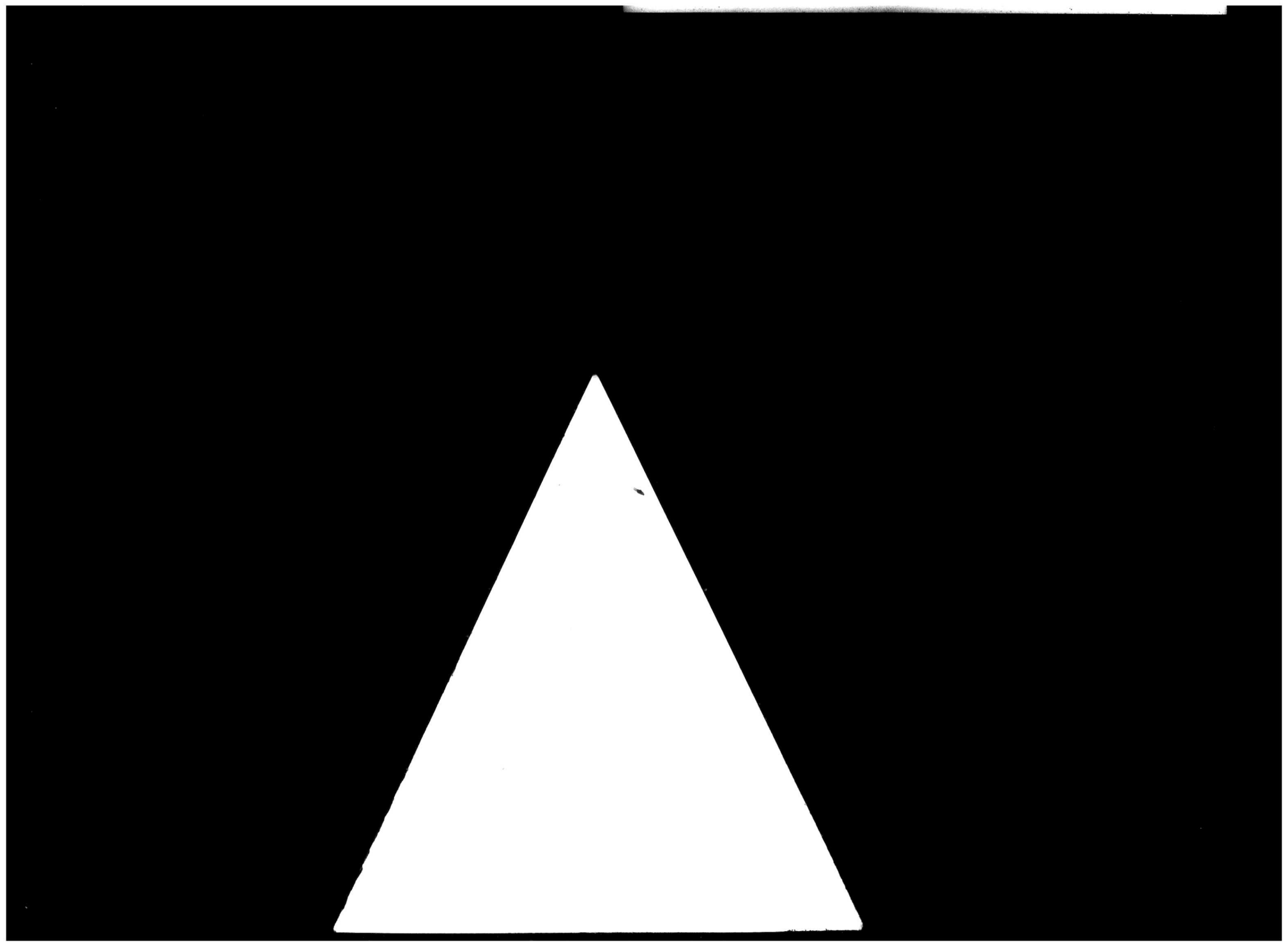
$ 50

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

Fifty Dollars,

per above voucher, this 24 of Feby 1891.

M. W. Steele



W. A. Steele
Cobb County

No.

INDIGENT PENSION.
1903.

Name W. A. Steele

County Cobb

Co. A *15th* *Ga.* *Regt.*

Approved *1903.*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

7/8/03

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1903.

_____ [L. S.]

Executed in the presence of

_____

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ COUNTY.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1903.

_____ [L. S.]

Executed in the presence of

_____

W. A. Steele
Cobb County
No. _____

INDIGENT PENSION.

1903.

Name W. A. Steele
County Cobb
Co. A. 18th Ga. Regt.
Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harris, State Printer, Atlanta.

7/8/03

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Cobb COUNTY.

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

1. What is your name and where do you reside? (give State, County and post-office) W. A. Steele, Kennesaw, Cobb County, Ga.
2. How long and since when have you been a resident of this State? All my life, since 1842.
3. When and where were you born? DeKalb County, Ga. January 1st 1842.
4. When and where and in what company and regiment did you enlist or serve? I enlisted in Co. A. 18th Regt. Ga. Vols. February 1862, at Acworth, Ga.
5. How long did you remain in such company and regiment? until April 6th 1865. When I was captured -
6. When and where was your company and regiment surrendered and discharged? We were captured ~~at~~ near Appomattox Va. On April 6th 1865 and imprisoned at Newport News Va. until June 27th 1865.
7. Were you present with your company and regiment when it was surrendered? Yes -
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was captured with my command as above stated -
9. How much can you earn (gross) per annum by your own exertions or labor? Very little now -
10. What has been your occupation since 1865? Farming and Mechanic -
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? 1st and Second Ground -
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I am broken down and worn out - My shoulders and arms have given out so that I can do but very little work - I have been gradually getting in this condition for five or six years -
13. What property, real and personal, or income, do you possess, and its gross value? Nothing.
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? At first I had a cow and mule - Sold these about 1894 and have had no property since - Except a little money left by my brother, which is already spent for a support.
15. In what County did you reside during those years and what property did you then return for taxation? Cobb County - Returned property above stated for taxes -
16. How were you supported during the years 1899, 1900, 1901 and 1902? By my own labor and a little property left me by brother. This is now all gone -
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About $100.00 per year - I contributed probably half -
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? Worked as Mechanic when was able at good wages but for last year have been unable to do much.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Yes - A wife - She has no means to home stead and is in bad health - She is 59 years old and has no employment.
20. Are you receiving any pension? If so, what amount and for what disability? No.
21. Have you ever made an application for pension before? No.
22. How many applications have you ever made and under what class? None -

Every Question MUST be Answered.

Sworn to and subscribed before me this the 26th day of June 1903.

W. A. Steele
Applicant.

John Awtery Ordinary,
of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb County.

Jas. D. Hughes and J. L. Lemon a citizen of said State and County, having been presented as a witness in support of the application of W. A. Steele for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Jas. D. Hughes Kennesaw Ga. and J. L. Lemon, Acworth, Ga. Cobb County.
2. Are you acquainted with W. A. Steele the applicant; if so, how long have you known him? Yes, about 31 years. (Hughes)
3. Where does he reside, and how long and since when has he been a resident of this State? Kennesaw, Ga. Since I knew him- (Hughes)
4. When, where and in what company and regiment did he enlist, and how do you know? I was present On Enlisting A 18 Georgia Regiment
5. Were you a member of the same company and regiment? Yes.
6. How long did he perform regular military duty? Over 3 Years
7. When and where was his command surrendered? At - Appomattox Court House
8. Were you present when it surrendered? No
9. Was applicant present? No in person
10. If he was not present, where was he? At Newport News
When did he leave his command? Soon after the Surrender For what cause? 3 days before Surrender
By what authority he left? Co above Stated How do you know all of this? from facts gathered from reliable party of the Company who was discharged at the Same time
11. What property, effects or income has the applicant? (Give your means of knowledge.) He has nothing by a little household effects - I know him intimately, Co A Capt J. L. Lemon 18 Ga Regt
12. What property, effects or income did the applicant possess in 1898, 1897, 1898, 1899, 1900, 1901 and 1902? and what disposition, if any, did he make of same? Nothing but what is Stated above.
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? No-
14. What is the applicant's occupation and physical condition? He Changes when able- His Physical Condition is impaired from age
15. Is the applicant unable to support himself by labor of any sort, if so, why? I dont think he is able to support himself by manual labor and he is not qualified to support himself other wise-
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? By his labor, and a little money left him by his deceased brother-
17. What portion of his support for these four years was derived from his own labor or income? I dont know-
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He is becoming old and infirm and is failing in Strength-
19. Who composes family? What property have they? Children's age and their earning capacity? Himself and wife- They have no property except household effects- His wife is a very feble woman.
20. What interest have you in the recovery of a pension by this applicant? None-

Sworn to and subscribed before me, this the 27th day of June 1903.
John Duffey Ordinary.

Jas. L. Hughes Witness.

4510 answers J. L. Lemon, Captain Co. A, 18th Ga. Regt
Signed affts No 19.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me Chas. A. Field M.D. and W. M. Reny M.D., both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully W. A. Steele, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: He has Diabetes Mellitus, and Incipient Rheumatism - Mind Weakens Him totally unable to support - Medical Evidence, Medical Exhibit, he also has received a Shot wound in left thigh & in right forearm which contributes to his disability and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 27th day of June 1903.
John Duffey Ordinary.

Chas A. Field M.D.
W. M. Reny M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, John Duffey Ordinary, in and for said County, hereby certify that the applicant W. A. Steele resides in said County, and has been a bona fide resident of this State since the 1st day of January 1894 and that the witnesses, viz: Jas. D. Hughes and Capt. Jas. L. Lemon are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Cobb County show that applicant returned for taxation in his name in ~~1899~~ 1899 ~~Real~~ 40 ——— Dollars of property, and in ~~1900~~ 1900 ~~Real~~ 30 — Dollars of property, in 1901 No. Dollars of property, in 1902 No- Dollars of property.

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

Witness my hand and seal of office, this 27th day of June 1903.
John Duffey Ordinary,
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, W A Steele hereby authorize John Awtrey of Manitta to receive and receipt for the pension allowed and request that he remit same to me at his office by hand

Witness my hand and seal, this 18th day of January 1904.

W A Steele [L. S.]

Executed in presence of

Steele, W. A.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 630

INDIGENT
SOLDIER'S PENSION
1904.

Name W A Steele
County Cobb
Co. A Regiment 18

WARRANT ISSUED
1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ord.

Geo W Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, W A Steele hereby authorize John Awtrey of to receive and receipt for the pension allowed, and request that he remit same to at by

WITNESS my hand and seal, this 17 day of Jany 1905.

W A Steele [L. S.]

Executed in the presence of
Jm Gann

Steele, W. A.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
To Fulton Co. 1906

No. 755

INDIGENT
SOLDIER'S PENSION
1905.

Name W A Steele
County Cobb
Co. A Regiment 18th

WARRANT ISSUED
1/28 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears W A Steele of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1842 that he is 61 years old and by occupation a Mechanic, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of Nearly 4 years in Company A, of 18 th Regiment of Ga Vols.; that his physical condition is as follows: On account of infirmity & poverty he cannot support himself

that his property consists of the following items: No thing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904

Sworn to and subscribed before me, this the 18 day of January 1904. W A Steele

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 18 day of January 1904.

John Awtrey
Ordinary Cobb County.

Affix your Seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears W A Steele of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1842; that he is 63 years old and by occupation a Mechanic, that he enlisted in the military service of the Confederate States (or of the State [redacted]) during the war between the States, and served for the term of 4 years in Company A, of 18 th Regiment of Ga Vols.; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: Nothing

of the value of Dollars. I am now earning, by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 17 day of Jany 1905. W A Steele

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with W A Steele 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 17th day of January 1905.

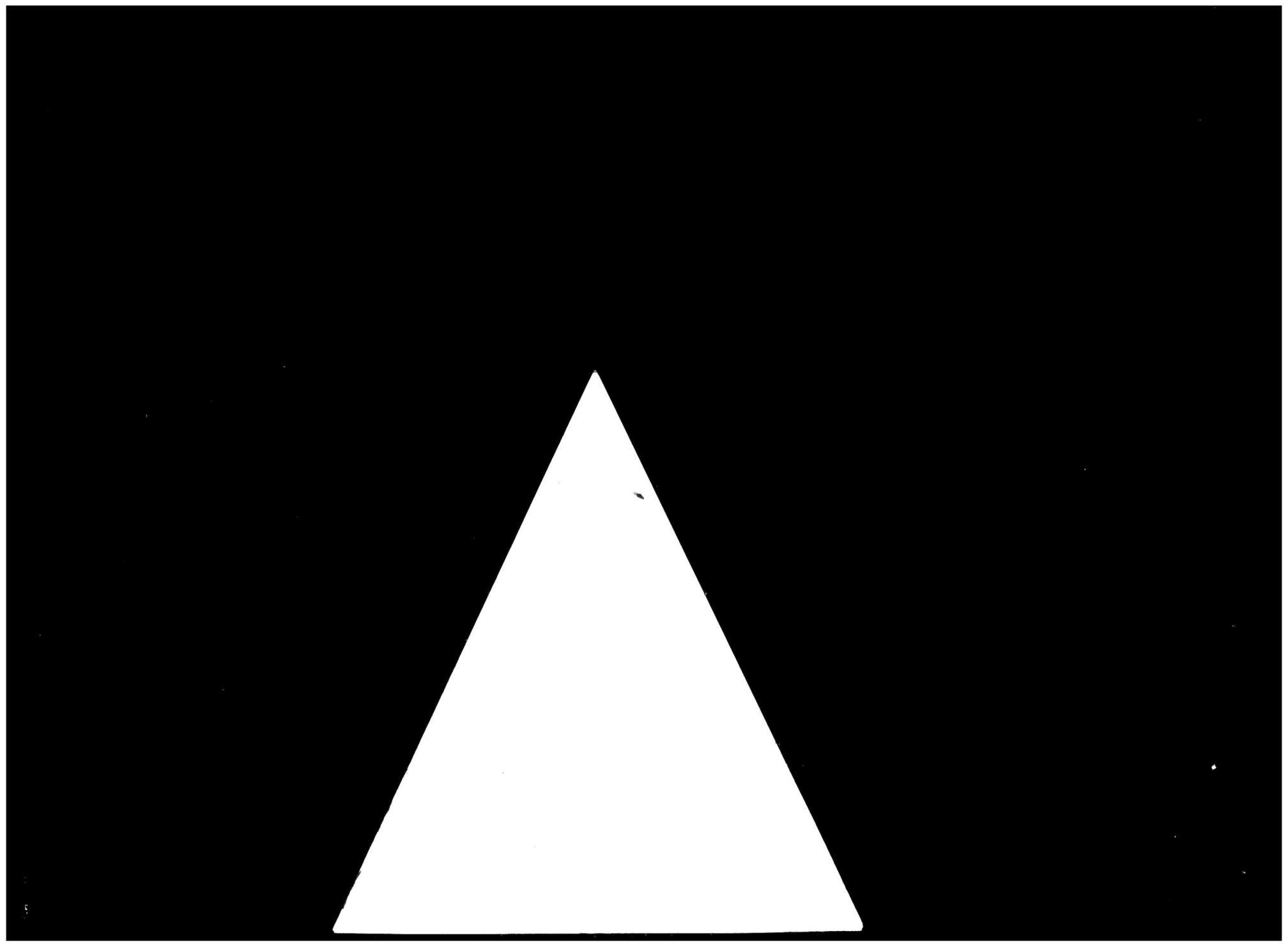
John Awtrey
Ordinary Cobb County.

Affix your Seal here

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

NOTE.—Affidavit should not be attested before January 1st, 1904.

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



Stell, John B.
Cobb Co

C. F. No.

INDIGENT PENSION,

~~1900.~~
1901

Name J. B. Stell

County Cobb

Co A 12 Ga

Approved 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

8/21-1907

Power of Attorney.

STATE OF GEORGIA,
County. }

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

Witness my hand and seal, this _____ day of _____ 1900.

at _____ by _____

Executed in presence of

_____ [L. S.]

Power of Attorney.

STATE OF GEORGIA,

_____ County.

I, _____ hereby authorize

_____ of _____

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

at _____ by _____

Witness my hand and seal, this _____ day of _____ 1900.

_____ [L. S.]

Executed in presence of

_____

_____

Stell, John B.
Cobb
C. F. No.

INDIGENT PENSION,

1900.

Name J B Stell

County Cobb

Approved Co A 12 Ga 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

8-31-1907

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office) Woodstock Cherokee County Ga. I am in Cobb County, Ga.
2. How long and since when have you been a resident of this State? all My Life
3. When and where were you born? Gwinnett County Ga August 12th 1845
4. When and where and in what company and regiment did you enlist or serve? Stone Mountain DeKalb County Ga Co A 12th Ga Battalion Artillery enlisted April 28th 1862
5. How long did you remain in such company and regiment? Two years and Seven Months

Every Question MUST be Answered.

6. When and where was your company and regiment surrendered and discharged? Was Captured 23 day of September 1864 at Fisher Hill Va Imprisoned at Fair Lobelt Maryland
7. Were you present with your company and regiment when it was surrendered? I Captured
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was captured and was on hand at the time of the surrender
9. How much can you earn (gross) per annum by your own exertions or labor? a hard on this
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"?
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I am Lame Rheumatism ever since they Was a Yong Man I am Older cannot work more that one third of my time I am Sixty Five Years old
13. What property, real or personal, or income, do you possess, and its gross value? None
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? Land None 1900
15. In what County did you reside during those years, and what property did you then return for taxation? Cobb County What land I had good about Ten Dollars
16. How were you supported during the years 1898 and 1899? My Boys held all that When able
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About ten Dollars the remainder would Draw from the Children
18. What was your employment during 1898 and 1899? What pay did you receive in each year?
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have Wife, is all the Children My family that I have no homestead
20. Are you receiving any pension? If so, what amount and for what disability? I am not
21. Have you ever made an application for pension before? I have not
22. How many applications have you ever made and under what class? None

Sworn to and subscribed before me this the 30th day of August 1900.

John Lindsey Ordinary

of Cobb County.

J B Stell Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Haralson COUNTY.

J H Wells of said State and County, having been presented as a witness in support of the application of John B Stell for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? J H Wells Buckley Haralson Co Ga
2. Are you acquainted with John B Stell, the applicant; if so, how long have you known him? All my life - 65 good
3. Where does he reside, and how long and since when has he been a resident of this State? Cobb County Ga Been Ga all his life
4. When, where and in what company and regiment did he enlist, and how do you know? April 1862 - Stone Mtn Ga - Co A - 12th Ga Bat -
5. Were you a member of the same company and regiment? Yes -
6. How long did he perform regular military duty? 3 years
7. When and where was his command surrendered? State of Ga - April 1865
8. Were you present when it surrendered? No
9. Was applicant present? No -
10. If he was not present, where was he? He was captured in 1864 and Paroled at Point Lookout in 1865 When did he leave his command? 1865 For what cause? Captured By what authority he left? Captured How do you know all of this? I was with him till a little after 1864. He was with me when I left. I was informed by the Yankees that he was taken prisoner soon after that.
11. What property, effects or income has the applicant? (Give your means of knowledge.) No thing Except Home hold goods
12. What property, effects or income did the applicant possess in 1898, 1897, 1898 and 1899, and what disposition, if any, did he make of same? No thing But home goods
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? No thing He has owned any prop
14. What is the applicant's occupation and physical condition? Farmer Quite feeble
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes - On acct of disease
16. How was he supported during the years 1898 and 1899? By his children almost Entirely
17. What portion of his support for these two years was derived from his own labor or income? Not more than 1/4 at outside
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He suffers Rheumatism General Broken down in health
19. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 26 day of Aug 1900. J H Wells Witness.

Thos A Huckabee Ordinary.

I certify that J H Wells is trustworthy & his statements are entitled to full faith & credit. Thos A Huckabee Ordinary

in Notary's Office of Cobb

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me Chas N. Field MD and C. O. Fowler MD, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully J B. Stell, applicant for pension under Section 1264, Code, and after such personal examination say that his precise physical condition is as follows:

He has Chronic Rheumatism of hips & knees which causes him much to walk at times but other times he can walk. But is otherwise constitutionally & the condition for is Permanent. He also has valvular heart disease owing to which he is considered to retain some physical infirmity and is permanent

They further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 30th day of August 1900. Chas N. Field M.D. C. O. Fowler M.D.

John Awtrey Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I, John Awtrey, Ordinary in and for said County, hereby certify that the applicant J B Stell resides in said County, and has been a bona fide resident of this State since the 1st day of Jany, 1864 and that the witnesses, viz: L. N. McCluskey, Chas. N. Field MD & C. O Fowler are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1898 Dollars of property, and in 1899 Nothing 1900 - without Dollars of property.

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

Witness my hand and seal of office, this 30th day of August 1900.

John Awtrey Ordinary,
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J B Stell hereby authorize
John Autrey of

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

Witness my hand and seal, this 6 day of Jan 1903
J B Stell [L. S.]

Executed in presence of
J H Lamb

(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 124.

No. 545

INDIGENT
SOLDIER'S PENSION
1902.

Name J B Stell
County Cobb
Co. A Regiment 12 Ga Batt

WARRANT ISSUED
1/13 1902

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J B Stell hereby authorize
John Autrey of

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

Witness my hand and seal, this 7 day of Jan 1902.
J B Stell [L. S.]

Executed in presence of
J H Lamb

Stell, J. B.
Cobb County

(FOR THOSE ALREADY ENROLLED.)
CODE SECTION 124.

No. 545

INDIGENT
SOLDIER'S PENSION
1902.

Name J B Stell
County Cobb
Co. A Regiment 12 Ga Batt

WARRANT ISSUED
1/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

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

Cobb

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J B Stell of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1836; that he is 67 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of in Company 4, of 12 th Regiment Ga Batt of ; that his physical condition is as follows:

that his property consists of the following items

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of County been allowed a pension for the year 1902

Sworn to and subscribed before me, this the 6 day of Jan 1902. J B Stell
H M Atkinson Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 6 day of Jan 1902.

Affix your seal here

H M Atkinson
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J B Stell of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1835; that he is 66 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 2 Yrs in Company A, of 2 th Regiment Ga Battalion of Artillery; that his physical condition is as follows: Owing to Age Infirmity and Poverty Deponent is unable to Support Himself

that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb Enrolled county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 7th day of Jan 1902. J B Stell
John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 7th day of Jan 1902.

Affix your seal here

John Awtrey
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, J. B. Stell hereby authorize John Awtry of Cobb Co. to receive and receipt for the pension allowed, and request that he remit same to at by

WITNESS my hand and seal, this 18th day of January 1905.

J B x Stell [L. S.]
Mark

Executed in the presence of

Stell, J. B.
Cobb Co.
(FOR THOSE ALREADY ENROLLED.)
No. 768

INDIGENT
SOLDIER'S PENSION
1904.

Name J. B. Stell
County Cobb
Co. A Regiment Sa. Artillery

WARRANT ISSUED
1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Only

Geo. W. Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, J. B. Stell hereby authorize John Awtry of Cobb Co. to receive and receipt for the pension allowed, and request that he remit same to at by

WITNESS my hand and seal, this 18th day of January 1905.

J B x Stell [L. S.]
Mark

Executed in the presence of

Stell, John B.
Cobb Co.
(FOR THOSE ALREADY ENROLLED.)
No. 768

INDIGENT
SOLDIER'S PENSION
1905.

Name J. B. Stell
County Cobb
Co. A Regiment Sa. Artillery

WARRANT ISSUED
1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Only

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J. B. Stell of Co. F County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 2 day of Aug 1855; that he is 69 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 2 yr 6 months in Company a, of 12th Regiment of Ga. Batt. Art; that his physical condition is as follows: On account of disease kindney trouble & poverty he is unable to support himself

that his property consists of the following items: Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 4th day of Jan 1904.

J. B. Stell
John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with J. B. Stell 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 4th day of Jan 1904.

John Awtrey
Ordinary Cobb County.

Affix your Seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J B Stell of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 12 day of August 1835; that he is 69 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 2½ Years in Company a, of 12th Regiment of Ga Batt Arty; that his physical condition is as follows: Age Disease and Poverty

that his property consists of the following items: Nothing

of the value of Dollars. I am now earning, by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 18th day of January 1905.

J. B. Stell his Mark
John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with J. B. Stell 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 January 1905.

John Awtrey
Ordinary Cobb County.

Affix your Seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, J B Stell hereby authorize
John Awtrey of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 4 day of Jany 1906.

J B his x Stell [L. S.]
Mark

Executed in the presence of
J M Gann

Stell, John B.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 720

INDIGENT
SOLDIER'S PENSION
1906.

Name J B Stell
County Cobb
Co. A 12 Ga Regiment

WARRANT ISSUED
1/72 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Coley

THE FRANKLIN PRINTING AND PUBLISHING CO. GEO. W. HARRISON, MGR.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, J B Stell, hereby authorize
John Awtrey of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 15 day of Jany 1907.

J B his x Stell [L. S.]
Mark

Executed in presence of
J M Gann

Stell, John B.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 660

INDIGENT
SOLDIER'S PENSION
1907.

Name J B Stell
County Cobb
Co. A 12 Ga Regiment

WARRANT ISSUED
JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Cobb County.

Personally appears J B Stell of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company A, of 12 Ga Regiment of ____; that his physical condition is as follows: Infirmity & Poverty

that his property consists of the following items: ____

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 3 day of Jany 1906. J B his X Stell mark

John Awtry Ordinary.

State of Georgia,

Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with J B Stell 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 3 day of Jany 1906.

John Awtry Ordinary Cobb County.

Affix your seal here

POWER OF ATTORNEY

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears J B Stell of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company A, of 12 Ga Regiment of Ga Battn C.T.; that his physical condition is as follows: Age & Infirmity

that his property consists of the following items: ____

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 15 day of Jany 1907. J B his X Stell mark

John Awtry Ordinary.

State of Georgia,

Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with J B Stell 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 Jany 1907.

John Awtry Ordinary Cobb County.

Affix your seal here

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

Ordinary _____ County.

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

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

I have knowed John B. Stall for the last thirty years and for the last three years he has not been able to work more than one third of him time. Could not lein when it not for his Boys and all that they can do to lein

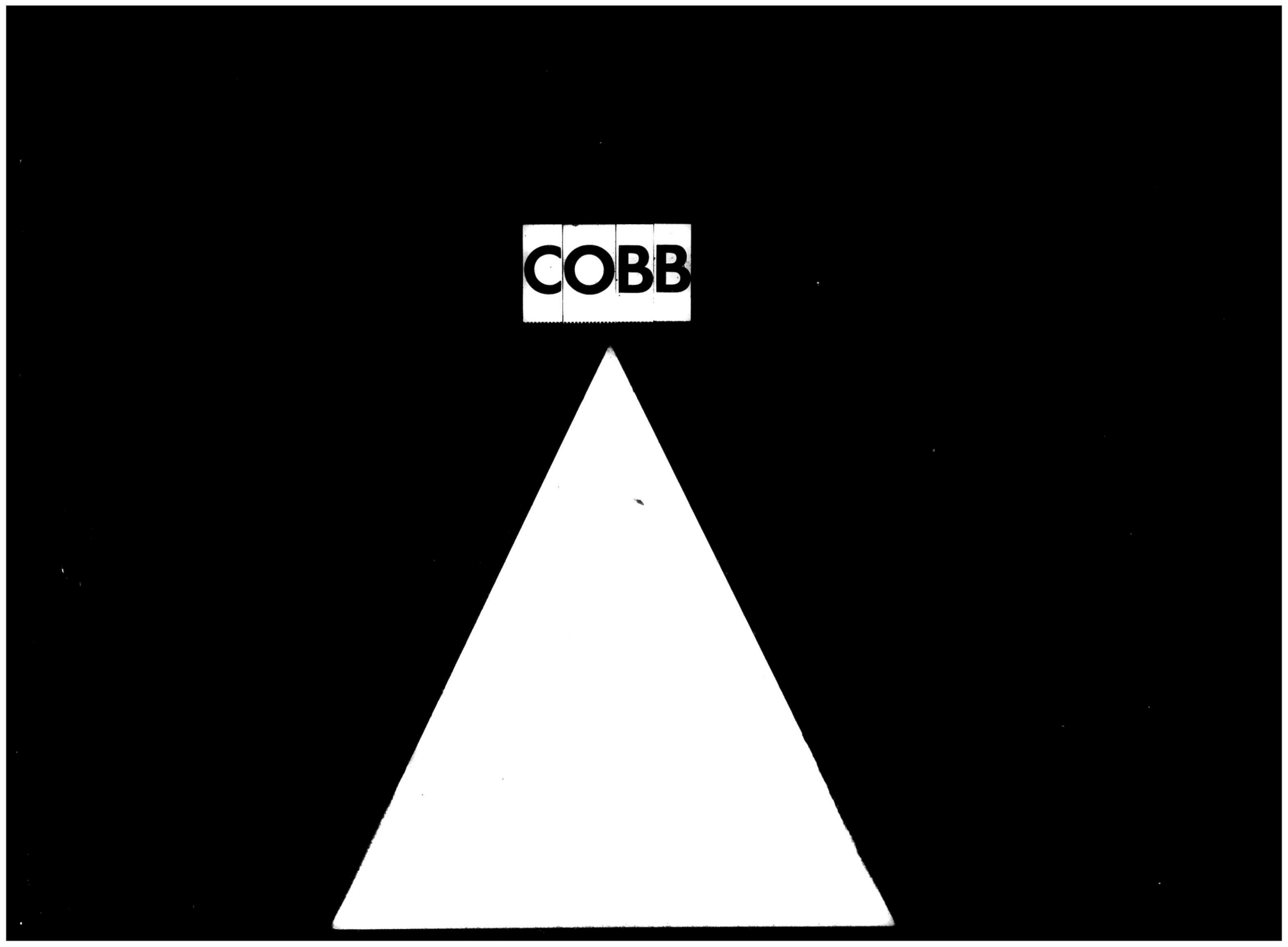
This August 28th 1901 S. R. McClesky

Cartigen of Cobb County

Sworn to and subscribed before me this August 28th, 1901—
John Awtry, Ordinary.

I Certify that S. R. McClesky is a bona fide resident of Cobb County, a gentleman of high standing and trustworthy character, whose evidence is worthy of full faith and credit.

John Awtry,
Ordinary
Cobb County, Ga.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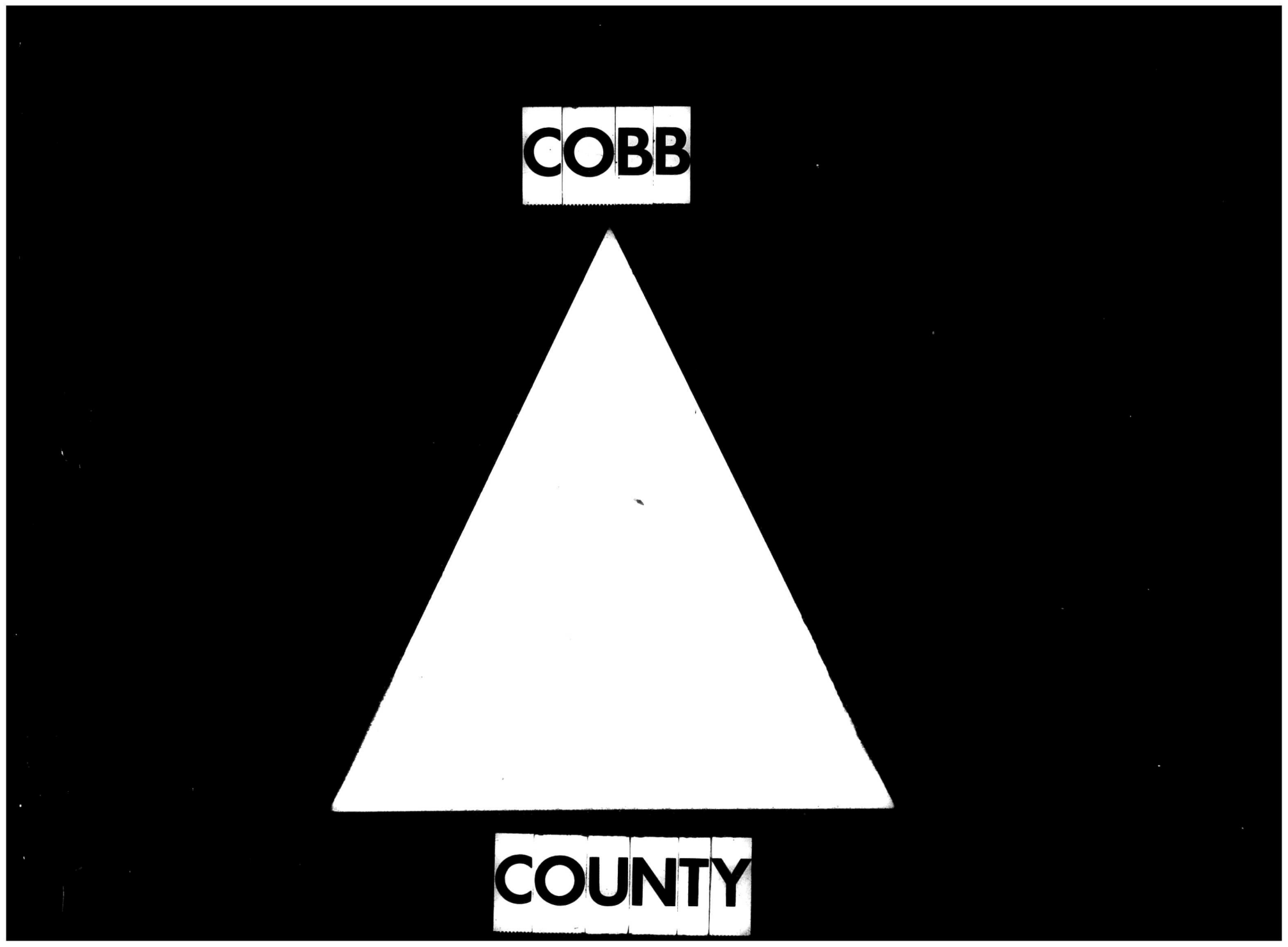
COBB
COUNTY

THE END

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ARCHIVES AND HISTORY

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

Title RIDDLING, MARTIN V. THRU STELL, JOHN B.

COBB COUNTY COBB COUNTY

Volume	Number
GCP-97	2886139-2886139-97

I CERTIFY I WAS THE OPERATOR WHO PHOTOGRAPHED THIS FILM. IN ATLANTA, GEORGIA, August 31, 1962.

J. P. Surles
Operator

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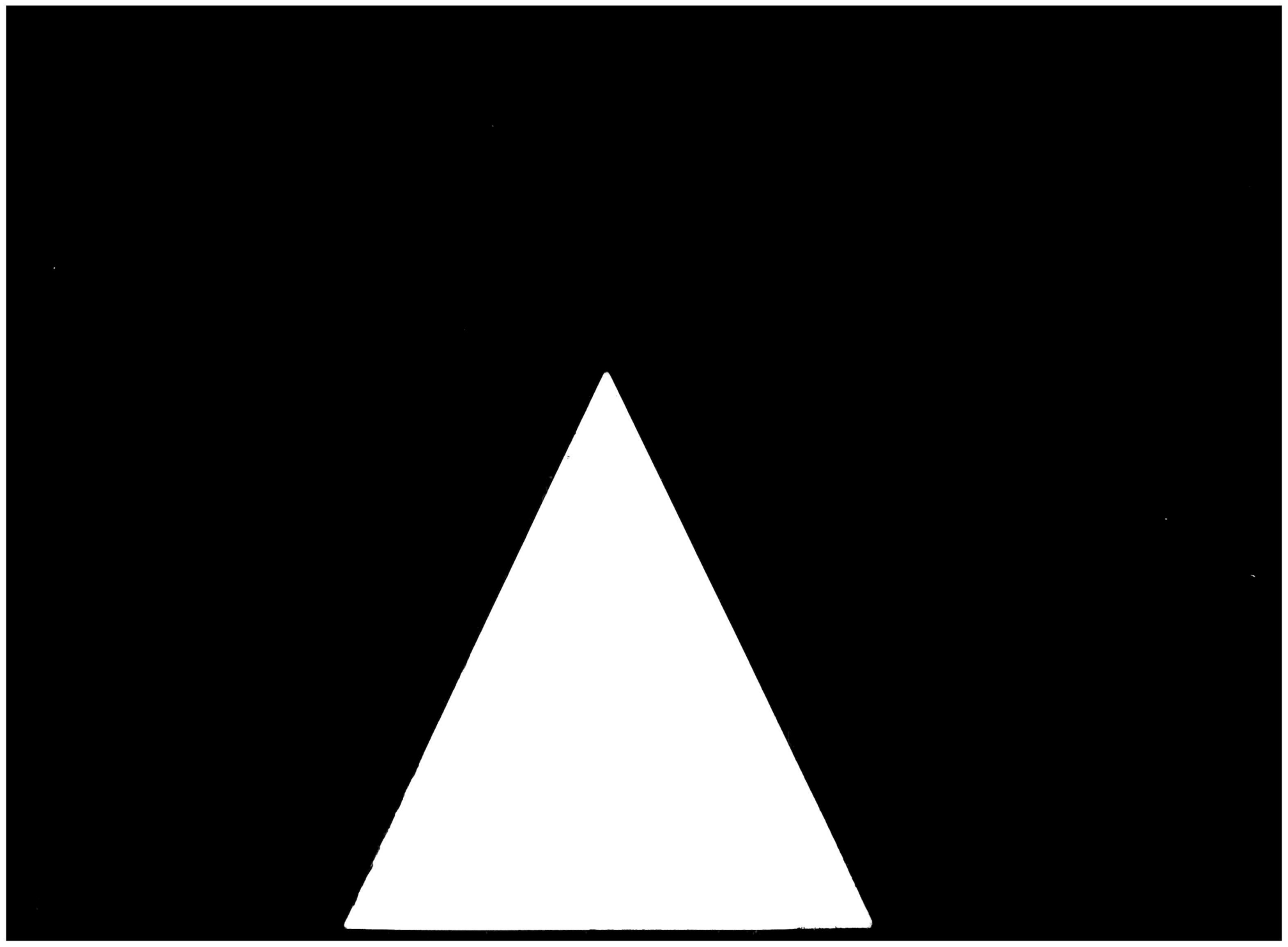
MANN FILM LABORATORIES

DATE



Scroggins N. J. (Mrs)
Cobb County

No. 3736

Widow's Pension, 1898.

PAID TO
Mrs. N. J. Scroggins
OF
Cobb County.
Widow of Geo. C. Scroggins

RICHARD JOHNSON,
Commissioner of Pensions.

Warrant Issued,
3/10 1898
AND HANDED TO
J. M. Scroggins

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/13/97

3/8.98

Pension Dept 3/11 1897.
Testimony by physicians who treated applicants husband during the course of the disease, with which he died, would be advantageous —
See the notes —
Rich Johnson
Com of Pensions

See additional Affidavits as to Physicians

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb COUNTY.

I, Mrs N. J. Scroggins hereby authorize J. M. Scroggins of Mobleton Ga to receive and receipt for the pension allowed and request that he remit same to me by Ga Tenn

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12 day of Feby 1897.

N. J. Scroggins [L. S.]

Executed in the presence of
J. M. Stone
Ony.

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Mrs. N. J. Scroggins, hereby authorize J. M. Scroggins of Mableton Ga. to receive and receipt for the pension allowed and request that he remit same to me by him by

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12th day of Feby 1897.

N. J. Scroggins [L. S.]

Executed in the presence of
J. H. Stowe
Ordy.

Form No. 1.

Affidavit to be Made by the Widow.

STATE OF GEORGIA,
COUNTY OF Cobb

In person came before me, the undersigned Ordinary in and for the County of Cobb Mrs. Nancy J. Scroggins, who being sworn according to law, says under oath that she is the widow of Geo. L. Scroggins, who was a soldier in the service of the Confederate States, and served as a member of Company F, of the 4th Ga. Regiment of Georgia Volunteers; that he enlisted in said services on or about the 4th day of March 1862, and was in the Confederate Army up to Aug. 21 1864. That while in the Army, he was on the 16th day of Oct 1862, (See Note No. 1) [illegible]

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the 10th day of January 1866, and that she was born in Georgia and has resided in Georgia continuously since the Jan. 21 day of 1876; that Georgia is her home, and was such on the 23rd 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, 1897, and herewith tenders the proof of her right to receive the pension granted by said Act.

Sworn to and subscribed before me, this the 12th day of Feby 1897.
J. H. Stowe Ordinary.

N. J. Scroggins.
Post Office, Mableton Ga.

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

NOTE 2.—The Ordinary will see that ALL blank spaces are filled before the affidavits are signed.

The instructions as set out in the notes MUST be Observed.

Form No. 3 3/11 1897.
Testimony by physicians
who treat applicant
husband during the
cause of the disease, with
which he died, much
to advantage —
See note —
Rich Arthur
Cobb Co Physician

See additional affidavits
as to illness

Scroggins N. J. (Mrs.)
Cobb County

No. 3736

Widow's Pension, 1897.

PAID TO
Mrs. N. J. Scroggins
OF
Cobb County.
Widow of Geo. L. Scroggins

RICHARD JOHNSON, *Commissioner of Pensions.*

Warrant Issued, 3/10, 1898
AND HANDED TO
J. M. Scroggins

J. W. HARRISON, STATE PRINTER, ATLANTA.

2/13/97

3/5 98

Georgia
Douglas County } I W. D. Anderson Ordinary in and for said County, of the County of Douglas, State of Georgia, hereby certify that I am acquainted with W. A. Howell, G. H. Mosley and W. S. Tucker whose testimony Nancy J. Driggers, peticants in the foregoing application for pension are known to me to be truthful witnesses, entitled to full faith and credit as such and that the full text of the affidavit was read to and understood by them before same was signed, I am fully satisfied that this claim is made in good faith and 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 11th day of July 1897.

W. D. Anderson
Ordinary

Form No.

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

STATE OF GEORGIA, } I, J. H. Stone Ordinary
COUNTY OF Cobb } in and for said County of Cobb

State of Georgia, hereby certify that I am acquainted with Mrs. N. J. Driggers 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 yet lived out of the State since that date. I also certify that the witnesses, to-wit: ....., ...

and ....., whose testimony she presents to sustain her claim, are *known to me to be truthful witnesses*, entitled to full faith and credit as such, and that the full text of the affidavit was read to and understood by them before same was signed. I am fully satisfied that this claim is made in good faith, and 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 17 day of July 1897.

{SEAL}

J. H. Stone
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 cantracted 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.

No pension can be paid for previous year.

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 service, 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.**

If the husband died since the war testimony by physicians must be produced.

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

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

If proofs must be made out of the State, the witnesses must be sworn before a *Judge of a Court of Record under Seal*, and the witnesses must be certified to as reliable, and that their signatures are genuine.

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

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

Widows whose husbands enlisted from another State or served in other Commands than Georgia Cammands are not entitled to pensions unless they were born in Georgia and can make proof of that fact.

By order of the Governor.

RICH'D JOHNSON,
Commissioner of Pensions

Form No. 2.

Affidavit For Three Witnesses.

STATE OF GEORGIA, } In person came before me, the undersigned Ordinary in
COUNTY OF [illegible] } and for said County, witnesses W. A. Howell
W. Sylvester Hester and C. A. Mosley (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, FROM THEIR OWN PERSONAL KWNOLEDGE, Mrs. N. J. Scroggins, now a resident of the County of Cobb, State of Georgia, is the widow of George G. Scroggins who was a soldier in Company "C" of the 34th Regiment of Georgia Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 4th day of March 1862. That while in said service or by reason of said service in the Army, he died on the 24 day of May 1873, from the following cause: While enlisted in said Regiment & Company and while in line of duty as a soldier contracted chronic diarrhea at the City of Corinth in the State of Mississippi about the 15th day of April 1862. Said Scroggins was sent to Lauderdale Springs Hospital and returned to his Command at Tupelo in the Month of June and obtained furlough on account of disease and was returned back to hospital at Lauderdale Springs and lingered there from time to time to December 3rd 1862 at which time he was discharged at Knoxville Tennessee. Said Scroggins contracted his disease after the elapse of 12 months and was never able to do but little duty during the remainder of the war and lingered with his disease until the 24th day of May 1873 at which time he died with Consumption.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were said soldier was in the same company and regiment with him in the war and lived neighbors to him while at home, up to the time of his death, and have known applicant for many years.

We further swear that she became the wife of said soldier on the 10th day of January 1856, and so remained to his death, since then she has not again married, and that she resided in said State of Georgia on the 23d of December, 1890, and that she has so continued to reside up to this date.

We further swear that we have no personal interest in the pension asked for.

Sworn to and subscribed before me, this the 11th day of July 1897. } W. A. Howell
W. S. Hester
C. A. Mosley
Ordinary.

NOTE 1.—Witnesses must not testify about things they may believe, but confine their statements to such facts as they personally know.

NOTE 2.—If the husband died after the war of wounds or disease state fully and particularly how you, as witnesses, know the service as a soldier was the immediate cause of his death.

NOTE 3.—All blank spaces must be filled when signed.

Form No. .

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

STATE OF GEORGIA, } I, J. H. Stone Ordinary
COUNTY OF Cobb } in and for said County of Cobb
State of Georgia, hereby certify that I am acquainted with Mrs. N. J. Scroggins 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 yet lived out of the State since that date. I also certify that the witnesses, to-wit: [illegible], and [illegible], whose testimony she presents to sustain her claim, are *known to me to be truthful witnesses*, entitled to full faith and credit as such, and that the full text of the affidavit was read to and understood by them before same was signed. I am fully satisfied that this claim is made in good faith, and 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 12th day of July 1897.

{SEAL}

J. H. Stone
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 cantracted 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.

No pension can be paid for previous year.

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 service, 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.**

If the husband died since the war testimony by physicians must be produced.

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

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

If proofs must be made out of the State, the witnesses must be sworn before a *Judge of a Court of Record under Seal*, and the witnesses must be certified to as reliable, and that their signatures are genuine.

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

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

Widows whose husbands enlisted from another State or served in other Commands than Georgia Cammands are not entitled to pensions unless they were born in Georgia and can make proof of that fact.

By order of the Governor.

RICH'D JOHNSON,
Commissioner of Pensions

POWER OF ATTORNEY.

State of Georgia,
Cobb County.

I, Mrs. N. J. Scroggins hereby authorize J. M. Stone of Marietta Ga.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st day of Feby. 1899.

N. J. Scroggins [L. S.]

Executed in presence of

Scroggins, N. J. Mrs
Cobb County

For Those Heretofore Paid.

1899.

NO. 2163

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO Mrs. N. J. Scroggins

OF Cobb County

Widow of Chas. B. Scroggins

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

1899.

AND HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb **County.**

I, N. J. Scroggins hereby authorize J. M. Stone of Marietta, Ga.

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 9th day of February 1900.

N J Scroggins [L. S.]

Executed in presence of

T. J. Hamby

Scroggins, N. J. (Mrs)
Cobb County

To Those Heretofore Paid.

1900.

NO. 2775

WIDOW'S PENSION,

For year ending February 16th, 1900.

PAID TO Mrs. N. J. Scroggins

OF Cobb County,

Widow of Chas. B. Scroggins

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

Feb 16 1900,

AND HANDED TO

GEO. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. N. J. Scroggin

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Jany. 31st 1836 That she is the Widow of George C. Scroggins who was a soldier in Company K of the 41st Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of Mch. 4th 1862 and served in the Army up to August 28th 1864 That he lost his life on the 24th day of May 1878 (State here full particulars of the husband's death, when, where and from what cause.) That while in the Army the deceased husband Contracted a lung trouble or Consumption and died from said disease on May 24th 1878.

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

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

Sworn to and subscribed before me, this 1st day of Feby 1899. J. M. Stone Ordinary.

N. J. Scroggins Post-Office Mableton Ga

State of Georgia, Cobb County. } I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. N. J. Scroggins who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 31st day of Jany. 1836

Given under my official signature and seal this the 1st day of Feby 1899. J. M. Stone

{ Official Seal. }

Ordinary of Cobb County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. N. J. Scroggins

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since January 31st 1836. That she is the Widow of George C. Scroggins who was a soldier in Company K of the 41st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 4th 1862 and served in the Army up to August 28th 1864 That he lost his life on the 24th day of May 1878 (State here particulars of the husband's death, when, where and from what cause) That while in the army the deceased husband contracted a lung trouble or consumption and died from said disease on May 24th 1878

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

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

Sworn to and subscribed before me, this 9th day of Feby 1900. J. M. Stone Ordinary.

N J Scroggins Post Office Mableton, Ga.

State of Georgia, Cobb County. } I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. N. J. Scroggins, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 31 day of January 1836

Given under my official signature and seal, this the 9th day of Feby 1900. J. M. Stone

{ Official Seal. }

Ordinary of Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, N J Scroggins hereby authorize John Awtrey of Marietta to receive and receipt for the pension paid hereon and request that he remit same to me at Marietta

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10th day of January 1901.

N. J. Scroggins [L. S.]

Executed in presence of

Jas M Gann

Scroggins, N. J. Mrs
Cobb Co

To Those Heretofore Paid.

1901.

No. 147

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO Mrs. N J Scroggins OF Cobb County.

Widow of George C Scroggins

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT ISSUED Jan 18 1901,

AND HANDED TO Gwtrey

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, N C Scroggins, hereby authorize John Awtrey of to receive and receipt for the pension paid hereon, and request that he remit same to at

In Witness Whereof, I have hereunto set my hand and seal, this 9th day of Jan 1902.

N J his x mark Scroggins [L. S.]

Executed in presence of

J M Gann

Scroggins, (Mrs.) N. J.
Cobb County

To Those Heretofore Paid.

1902.

No. 252

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO Mrs. N C Scroggins OF Cobb County,

Widow of

Co. Regiment

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT ISSUED 1/16 1902

AND HANDED TO Ordy

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

FORM No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. N J Scroggins

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Jan 1st 1896. That she is the Widow of George W Scroggins who was a soldier in Company K of the 41st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 4th 1862, and served in the Army up to August 28th 1864. That he lost his life on the 24th day of March 1878 (State here particulars of the husband's death, when, where and from what cause) That while in the service the deceased Husband Contracted a severe trouble or Consumption and died from said disease on May 24th 1878

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

I have been allowed a pension as a resident of Cobb County for the year ending February 15th, 1 , and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 14th day of Jany 1901. John Awtrey Ordinary. } N. J. Scroggins Post Office

State of Georgia, Cobb County. } I John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. N J Scroggins, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 14th day of Jany 1901.

John Awtrey
Ordinary of Cobb County.

{ Official Seal. }

FORM No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. N J Scroggins

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Jan 1896. That she is the Widow of George W Scroggins who was a soldier in Company K of the 41st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 4th 1862, and served in the Army up to August 28th 1864. That he lost his life on the 24th day of March 1878 (State here particulars of the husband's death, when, where and from what cause) That while in the Army the deceased Husband Contracted a lung trouble or Consumption and died from said disease on May the 24th 1878

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

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

Sworn to and subscribed before me, this day of 1902. , Ordinary. } N J Scroggins Post-Office Marietta

State of Georgia, Cobb County. } I John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. N J Scroggins, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereself to be, and that she has continuously resided in this State since the day of 18

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

{ Official Seal. }

Ordinary of County.

NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, N. J. Scroggins, hereby authorize
John Autry of
to receive and receipt for the pension paid hereon, and request that he remit same to
at

In Witness Whereof, I have hereunto set my hand and seal, this
day of 1903.

N. J. Scroggins [L. S.]

Executed in presence of
J. M. Gann

Scroggins, N. J. (Mrs)
Cobb County

To Those Heretofore Paid.

1903.

No. 226

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO
Mrs. N. J. Scroggins
OF
Cobb County,
Widow of J. B. Scroggins
Co. K Regiment 4th

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/23 1903.
AND HANDED TO
Cody

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

Widows Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, N. J. Scroggins hereby authorize
John Autry of
to receive and receipt for the pension paid hereon, and request that he remit same to
at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 18
day of January 1904.

N. J. his X Mark Scroggins [L. S.]

Executed in presence of
James M Gann

Scroggins, N. J. (Mrs)
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. 225

WIDOW'S PENSION

FOR
YEAR ENDING DECEMBER 31, 1904.
PAID TO
Mrs. N. J. Scroggins
OF
Cobb County,
Widow of J. B. Scroggins
Co. K Regiment 4th

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/21 1904,
AND HANDED TO
Cody

Geo. W. Harrison, State Printer, Atlanta.

FORM No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. N J Scroggins

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb, State of Georgia, and that she has RESIDED in said State continuously ever since Jan 1836. That she is the Widow of George C Scroggins who was a soldier in Company K of the 41 Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 186 2 and served in the Army up to Augt 186 4. That he lost his life on the 24 day of May 18 78 (State here particulars of the husband's death, when, where and from what cause.) That While in the Army the deceased Husband Contracted a Lung Bowle or Consumption and died from said Disease May 1878

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

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

Sworn to and subscribed before me, this day of Jan 1903. John Awtrey, Ordinary. } N J Scroggins Post-Office

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. N J Scroggins, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the day of Jan 1903.

{ Official Seal. }

John Awtrey
Ordinary of Cobb County.

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

FORM No. 1.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. N J Scroggins

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb, State of Georgia, and that she has RESIDED in said State continuously ever since 1836. That she is the Widow of Geo C Scroggins who was a soldier in Company K of the 41 Regiment of Geo Volunteers, that he enlisted in said regiment on or about the month of March 4 186 2, and served in the Army up to Aug 28 186 4. That he lost his life on the day of May 18 78 (State here particulars of the husband's death, when, where and from what cause.) That While in the Army the deceased Husband Contracted a Lung Bowle or Consumption and died from said disease

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 1879

I have been paid a pension as a resident of Cobb County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 18 day of Jany 1904. John Awtrey, Ordinary. } N J (her mark) Scroggins Post Office

State of Georgia, Cobb County. } I John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. N J Scroggins, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 18 day of Jany 1904.

{ Official Seal }

John Awtrey
Ordinary of Cobb County

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, N J Scroggins, hereby authorize John Awtrey of

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

at

In Witness Whereof, I have hereunto set my hand and seal, this 16 day of Jany 1905.

N. J. Scroggins [L. S.]

Executed in presence of

J M Gann

Scroggins N. J. Mrs
Cobb County

To Those Heretofore Paid.

1905.

No. 260

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO Mrs N J Scroggins OF Cobb County,

Widow of

Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/23 1905.

AND HANDED TO only

The Franklin Printing and Publishing Co., Atlanta, Geo. W. Harrison, Manager, for State Printer.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, N J Scroggins, hereby authorize John Awtrey of

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

at

In Witness Whereof, I have hereunto set my hand and seal, this 15 day of Jany 1906.

N J his x mark Scroggins [L. S.]

Executed in presence of

J M Gann

Scroggins N. J. (Mrs)
Cobb Co.

To Those Heretofore Paid.

1906.

No. 182

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO Mrs N J Scroggins OF Cobb County,

Widow of Geo C Scroggins

Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/22 1906,

AND HANDED TO only

The Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. N J Scroggins

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Jan 1836. That she is the Widow of Geo C Scroggins who was a soldier in Company K of the 41 Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to August 1864. That he lost his life on the 24 day of May 1878. *(State here particulars of the husband's death, when, where and from what cause.)* Died in the army deceased Husband Contracted a Lung Trouble and died from same 1878

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

I have been paid a pension as a resident of Cobb County for the year ending December 31, 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this 16 day of Jany 1905. John Awtrey, Ordinary. } N J Scroggins Post-Office

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. N J Scroggins, Who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 16 day of Jany 1905.

Official Seal

John Awtrey, Ordinary of Cobb County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. N J Scroggins

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. That she is the Widow of George C Scroggins who was a soldier in Company K of the 41 Ga Regiment of Volunteers, that he enlisted in said regiment on or about the month of 186 and served in the Army up to 186. That he lost his life on the day of 18. *(State here particulars of the husband's death, when, where and from what cause.)* Died of Disease Contracted

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

I have been paid a pension as a resident of Cobb County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 15 day of Jany 1906. John Awtrey, Ordinary. } N J Scroggins Post Office

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. N J Scroggins, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 15 day of Jany 1906.

Official Seal

John Awtrey, Ordinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, N J Scroggins hereby authorize John Aubrey to receive and receipt for the pension paid hereon, and request that he remit same to _____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this 7 day of Jany 1907.

N J Scroggins [L. S.]
Mass

Executed in presence of
J M Gann

Scroggins, N. J. (Mrs.)
Cobb County
To Those Heretofore Paid

1907.

No. 162

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO
Mrs. N J Scroggins
OF
Cobb County,
Widow of G C Scroggins
Co. K Regiment 41st Ga.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/21 1907,
AND HANDED TO
C

Geo W. Harrison, State Printer, Atlanta.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb } Personally comes Mrs. M. J. Scroggins

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Jany 1st 1894. That she is the Widow of Geo. C. Scroggins who was a soldier in Company K of the 4th ST Regiment of Ga. Volounteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to 1865. That he lost his life on the day of 1878. (*State here particulars of the husband's death, when, where and from what cause.*)

Died of disease rec'd in service

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

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

Sworn to and subscribed before me this 7 day of Jany 1907.
John Awtrey Ordinary.

M J Scroggins
Marna
Post Office

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

Given under my official signature and seal, this the 7 day of Jany 1907.

Official Seal

John Awtrey
Ordinary of Cobb County.

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

State of Georgia } In person appeared
Cobb County } before the undersigned

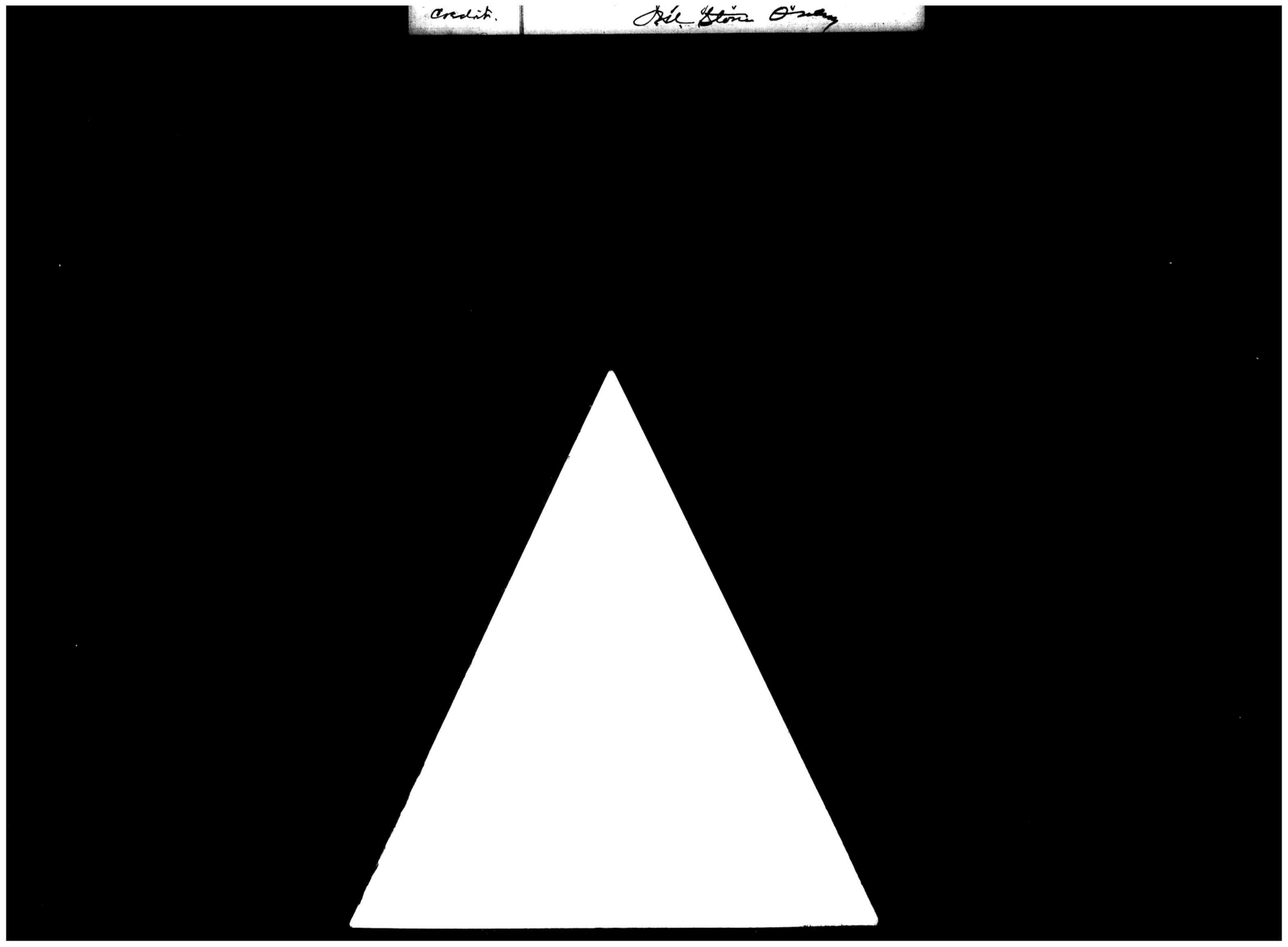
who after being duly sworn says that they knew Geo. C. Scroggins from the close of the war up until the time of his death. When he returned home from the war he was suffering with bronchitis or lung trouble he never recovered from said disease. he often had hemorrages from the lungs. and in 1878 he died from the immediate effect of said lung trouble.
Dr A Reynold and ~~Old~~ Dr Harden and young Dr Chas Harden were the only Drs that attended him during his sickness from the close of the war up to his death and all of them are dead

Sworn to and subscribed before me this ~~June~~ Feby 28th 1898

J. M. Stone

John T. Pace
J. H. Howell
G. N. Daniell

J. T. Pace, J. H. Howell & G. N. Daniell Only
an as witnesses worthy of full faith and credit.
J. M. Stone Only



Scroggs, John A. Cobb Co.

No. 1423

INDIGENT PENSION,

1900.

1901

Name John A. Scroggs

County Cobb

Co D - 24 Ga

Approved 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

2/26-1902
1/17/03

Pension Office July 29-1902.

Applicant's tax returns shows him to be the owner of property of a salable value, ample for present support if disposed of-not indigent in that sense that the law would authorize the grant of a pension.

J.W.Lindsey,

Com. Of Pensions.

[illegible] Confirm [illegible] having [illegible] not [illegible] [illegible] with [illegible] the [illegible] of a Pension

J.W. Lindsey

Amended

Power of Attorney.

STATE OF GEORGIA, County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1900.

[L. S.]

Executed in presence of

Power of Attorney.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

_____ of _____

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

at _____ by _____

Witness my hand and seal, this _____ day of _____ 1900.

_____ [L. S.]

Executed in presence of

_____

_____

Pension Office July 29-1902.

Applicant's tax returns shows his to be the owner of property of a salable value, ample for present support if disposed of-not indigent in that sense that the law would authorize the grant of a pension.

J. F. Lindsey,

Com. of Pensions.

Allowed

INDIGENT PENSION.

1900.

No. 1901

Name John A. Scroggs

County Cobb Ga

Approved _____ 1900.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

2/26-1902

1/11 38

Scroggs Cobb Co.

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

John A Scroggs of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (give State, County and post office) John A Scroggs Cobb County Ga
2. How long and since when have you been a resident of this State? Forty years & more ever since 84
3. When and where were you born? 1837 in Pickens Co Ga
4. When and where and in what company and regiment did you enlist or serve? August 1861. Co B 24th Ga Vols Kenesaw Ga
5. How long did you remain in such company and regiment? until April 6th 1865
6. When and where was your company and regiment surrendered and discharged? April 6th near Appomattox C H was then ordered to Point Lookout and remained there to the 23rd June when I was paroled
7. Were you present with your company and regiment when it was surrendered? Yes
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was present
9. How much can you earn (gross) per annum by your own exertions or labor? 75.00
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Age and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? For several years
13. What property, real or personal, or income, do you possess, and its gross value? One horse about $60.00
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? About the same as above
15. In what County did you reside during those years, and what property did you then return for taxation? Cobb County About the same as above
16. How were you supported during the years 1898 and 1899? By my labor
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? One hundred Dollars. About 75
18. What was your employment during 1898 and 1899? What pay did you receive in each year? Farming What I got of my little crop that I cultivated
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Yes. Wife & 2 daughters, by their own labor No
20. Are you receiving any pension? If so, what amount and for what disability? No
21. Have you ever made an application for pension before? No
22. How many applications have you ever made and under what class? None

Every Question MUST be Answered.

Sworn to and subscribed before me this the 26th day of November 1900. John A Scroggs Applicant.

John Ashley Ordinary,

of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, }
Cobb COUNTY. }

N. M. Scroggs, of said State and County, having been presented as a witness in support of the application of John A. Scroggs for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? N. M. Scroggs, Acworth, Cobb County, Ga.
2. Are you acquainted with John A. Scroggs, the applicant; if so, how long have you known him? All his life.
3. Where does he reside, and how long and since when has he been a resident of this State? In Cobb County, Ga. Has resided in this State since 1855.
4. When, where and in what company and regiment did he enlist, and how do you know? He enlisted in Co. D. 24th Ga. Regt. August 24th 1861, at Atlanta, Ga.
5. Were you a member of the same company and regiment? Yes.
6. How long did he perform regular military duty? About 3 years & 10 months
7. When and where was his command surrendered? At Appomattox, Va. April 9th 1865.
8. Were you present when it surrendered? No.
9. Was applicant present? No. He was captured April 6th 1865.
10. If he was not present, where was he? He was a prisoner at Point Lookout
When did he leave his command? April 6th 1865 For what cause? Capture.
By what authority he left? A prisoner — How do you know all of this? I was a member of same Co.
11. What property, effects or income has the applicant? (Give your means of knowledge.) He owns a horse and some household goods. Nothing else.
12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? About the same he possesses now.
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? None
14. What is the applicant's occupation and physical condition? He is a farmer — He is 64 years old, and physically worn out and broken down
15. Is the applicant unable to support himself by labor of any sort, if so, why? I think he is, on account of being old and worn out, and broken in health generally.
16. How was he supported during the years 1899 and 1900? By what he could do himself, and the assistance of two grown daughters, who work in the field
17. What portion of his support for these two years was derived from his own labor or income? About half as near as I [illegible] statement.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He is 64 years old and generally broken in health. He is disabled in his feet and legs, which practically disabes him from manual labor.
19. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this the 31st day of August 1900.
John Awtry, Ordinary.

N M Scroggs
Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, }
Cobb COUNTY. }

Personally came before me Drs M. C. Humphries and Huston B. Terry, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully John A. Scroggs, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Physically disabled from Rheumatism & general breaking down of system resulting from old age. Not able by manual labor to support himself family.

They further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 31st day of Aug 1900.
John Awtry, Ordinary.

M C Humphries M.D.
Huston B Terry M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, }
Cobb COUNTY. }

I, John Awtry, Ordinary in and for said County, hereby certify that the applicant John A. Scroggs resides in said County, and has been a bona fide resident of this State since the 1st day of Jany 1894 and that the witnesses, viz: N M Scroggs, M C Humphries M.D & H B Terry M.D are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1900 190 Dollars of property, and in 1901 170 Dollars of property.

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

Witness my Hand and seal of office, this 25th day of July 1901.
John Awtry, Ordinary,
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, John A Scruggs hereby authorize John Autry of Cobb County to receive and receipt for the pension allowed, and request that he remit same to _____ at _____

by _____

WITNESS my hand and seal, this 3 day of Jany 1906.

_____ [L. S.]

Executed in the presence of John A. Scruggs
J M Gann

CODE SECTION 1254
(FOR THOSE ALREADY ENROLLED.)

No. 729

INDIGENT
SOLDIER'S PENSION
1906.

Name J A Scruggs
County Cobb
Co. D 24th Regiment

WARRANT ISSUED
1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cobb

THE FRANKLIN PRINTING AND PUBLISHING CO., GEO. W. HARRISON, MGR.

Scruggs John A.
Cobb Co

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Jno A Scruggs, hereby authorize John Autry of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____

by _____

WITNESS my hand and seal, this 8 day of Jany 1907.

John A Scruggs [L. S.]

Executed in presence of
J M Gann

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 729

INDIGENT
SOLDIER'S PENSION
1907.

Name John A Scruggs
County Cobb
Co. D 24 Regiment

WARRANT ISSUED
JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears J A Scroggs of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18__; that he is 68 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 4 yrs in Company D, of 24th Regiment of _____; that his physical condition is as follows: age & poverty

that his property consists of the following items: Forty dollars of property

of the value of Forty Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 3 day of January 1906. John A Scroggs

John Awtrey Ordinary.

State of Georgia,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with John A. Scroggs 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 3 day of January 1906.

John Awtrey
Ordinary Cobb County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears Jno A Scroggs of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18__; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company D, of 24th Regiment of _____; that his physical condition is as follows: age & poverty

that his property consists of the following items: Nothing

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of _____ County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 8 day of Jany 1907. John A Scroggs

John Awtrey Ordinary.

State of Georgia,
Cobb County.

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

Given under my official signature and seal this 8 day of Jany 1907.

John Awtrey
Ordinary Cobb County.

Affix your seal here

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

to be used in connection with former application on file-

POWER OF ATTORNEY.

STATE OF GEORGIA,
COUNTY.

I, ... hereby authorize ..... of ..... to receive and receipt for the pension allowed and request that he remit same to ..... at ..... by .....

Witness my hand and seal, this ..... day of ..... 190 ..... [L. S.]

Executed in presence of

Scroggs, John A.

No. 50

INDIGENT PENSION.

1906

Name John A. Scroggs
County Cobb
Co. D. 24th Ga. Regt.
Approved ..... 190 .....

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

94/05

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Cobb COUNTY.

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

1. What is your name and where do you reside? (Give State County and post-office).
John A. Scroggs, Acworth, Cobb County, Ga.

2. How long and since when have you been a resident of this State?
Since 1850-

3. When and where were you born? Jefferson County, Tenn. Sept. 1st 1837.

4. When and where and in what company and regiment did you enlist or serve?
Hiawassee Ga. Co. D. 24th Ga. August 1861-

5. How long did you remain in such company and regiment?
Till My Capture, April 6th 1865.

6. When and where was your company and regiment surrendered and discharged? All my brigade was Captured April 6th 1865, near Danville, Va.

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

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

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

10. What has been your occupation since 1865? Farming.

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Age, Infirmity & poverty.

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I am in my 68th year and have been gradually failing in health and strength for several years- I suffer with catarrh, also with kidney trouble, and am now completely worn out.

13. What property, real and personal, or income, do you possess, and its gross value? One horse worth about 40 dollars- & wagon worth ten dollars-

14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? +03 +04- I had two horses and fairly good farming outfit, but through sickness of my wife and my own growing debility had to dispose of all excepts what is [illegible] above-

15. In what County did you reside during those years, and what property did you then return for taxation?
Cobb County - Returned as above.

16. How were you supported during the years 1899, 1900, 1901 and 1902? +03-04- By my two Spinster daughters mainly-

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I Contributed very little- Dont know what it cost.

18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year?
Farming on rented land as long as able-

19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Two daughters- aged 35 + 39- They have no homestead- Have two milk cows, which is all the means of support both for them and me-

20. Are you receiving any pension? If so, what amount and for what disability? None-

21. Have you ever made an application for pension before? One- Now on file in office

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

Sworn to and subscribed before me this the 28th day of July 1905.

John A. Scroggs
Applicant.

John Hartley Ordinary,
of Cobb County.

Every Question MUST Be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb COUNTY.

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

1. What is your name and where do you reside? Orlando Awtey, Acworth, Ga.

2. Are you acquainted with John A. Scroggs, the applicant; if so, how long have you known him? Yes - Known him since 1883,

3. Where does he reside, and how long and since when has he been a resident of this State? Has lived in Cobb County since 1883 - dont Know how long in the State.

4. When, where and in what company and regiment did he enlist and how do you know? dont know as to this

5. Were you a member of the same company and regiment? No

6. How long did he perform regular military duty? dont Know

7. When and where was his command surrendered? " "

8. Were you present when it surrendered? No

9. Was applicant present? dont Know.

10. If he was not present, where was he? " "

When did he leave his command? " " For what cause? dont Know

By what authority he left? " " How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge.) Think he has only one sorry horse & old wagon - Have sold him Goods every year since 1883

12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? Has never had any property except a little stock & small income from own & daughters labor on farm

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? Think he has sold a horse, dont know to whom -

14. What is the applicant's occupation and physical condition? Occupation farming - Is simply decrepit from old age, & chronic catarrhal trouble,

15. Is the applicant unable to support himself by labor of any sort; if so, why? The old man can work a little, but would not think him physically able to support himself

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? Partly by own labor & partly by the labor of his two daughters -

17. What portion of his support for these four years was derived from his own labor or income? Cant tell as to that, Possibly one half -

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? General infirmity from old age & chronic Catarrh -

19. Who composes family? What property have they? Children's age and their earning capacity? Himself & two daughters - one cow each, think - dont Know 35 to 40 years old -

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

Sworn to and subscribed before me, this the 5th day of Sept. 1905.

Orlando Awtey, Witness.

John Awtey Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me N. B. Terry and W. C. Humphries, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully John A. Scroggs, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: General Infirmity & break-down incident to old age also Catarrhal Condition of ear causing violent & almost constant headache, Lumbago & irritation at neck of bladder.

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

Sworn to and subscribed before me, this the 5th day of Sept. 1905.

John Awtey Ordinary.

N. B. Terry M.D.
W. C. Humphries M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I, John Awtey Ordinary, in and for said County, hereby certify that the applicant John A. Scroggs resides in said County, and has been a bona fide resident of this State since the 1st day of January 1904 and that the witnesses, viz.: Orlando Awtey are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Cobb County shows that applicant returned for taxation in his name in 1902 Dollars of property, and in 1903 Dollars of property; in 1904 145 Dollars of property; in 1905 125 Dollars of property.

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

Witness my hand and seal of office, this 5th day of Sept. 1905

John Awtey Ordinary,
of Cobb County.

NOTE.

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

State of Georgia }
Towns County }

Personally appeared before the undersigned Ordinary in and for said county Richard F. Wheeler. of said State and county. well known to me to be of trustworthy Character and that the statement made by him is entitled to full faith and credit. who being sworn. deposes and says under oath that he is well acquainted with John. A. Scroggs. whose application for pension is hereto attached.

deponent says under oath that John. A. Scroggs served in Company D. 24 Ga regiment of Ga Volunteers. I further certify that applicant was with his command up till the 6th of April 1865 when our regiment was Captured and Carried back to point look out and he never got home until July of same year - we personally know above stated facts. we were with him in the army. and have known him eversince he was Captured. and I have no interest in the recovery of a pension by him.

R. F. his + mark Wheeler

Sworn to and subscribed before me this Sept 13th 1901

C. C. Burch.

Ordinary. of Towns Co. Ga.

COBB COURT OF ORDINARY.
MARIETTA, GA.
JOHN AWTREY, JUDGE PROBATE.

Amendment, Sept 17th, 1903.

Georgia, Cobb County.

Personally Comes J. A. Scroggs, applicant for pension under Section 1254 Code of 1895, and amends his application heretofore made, and says that in 1902 he returned for taxation $155.00 and in 1903 he returned $140.00. That of the above amounts nothing belongs to Applicant but one old horse worth about 40 or 50 dollars. The other property, Consisting of two Cows ~~and~~ a Sewing machine and other personal property belongs to Applicant's two Spinster daughters, and was given in for taxes by Applicant for their Convenience -

Applicant is now 66 years old, and is in a much more fuble Condition than when the original application was made -

Applicant now has no family except said two daughters, and they require said property for their support -

John A. Scroggs

Sworn to and subscribed before me this Sept. 17th, 1903.

John Awtrey, Ordinary.

COBB COURT OF ORDINARY.
MARIETTA, GA.
JOHN AWTREY, JUDGE PROBATE

Georgia, Cobb County.

I, John Awtrey, Ordinary of said County, certify that the tax digest of Cobb County show that J. A. Scroggs returned for taxes in 1902 $155.00 and in 1903 $140.00. I am satisfied the statements made by applicants as to his property are true. I have known applicant and his daughters for many years. He is a highly honorable and very conscientious man. I do not believe there is a more worthy pensioner in this County.

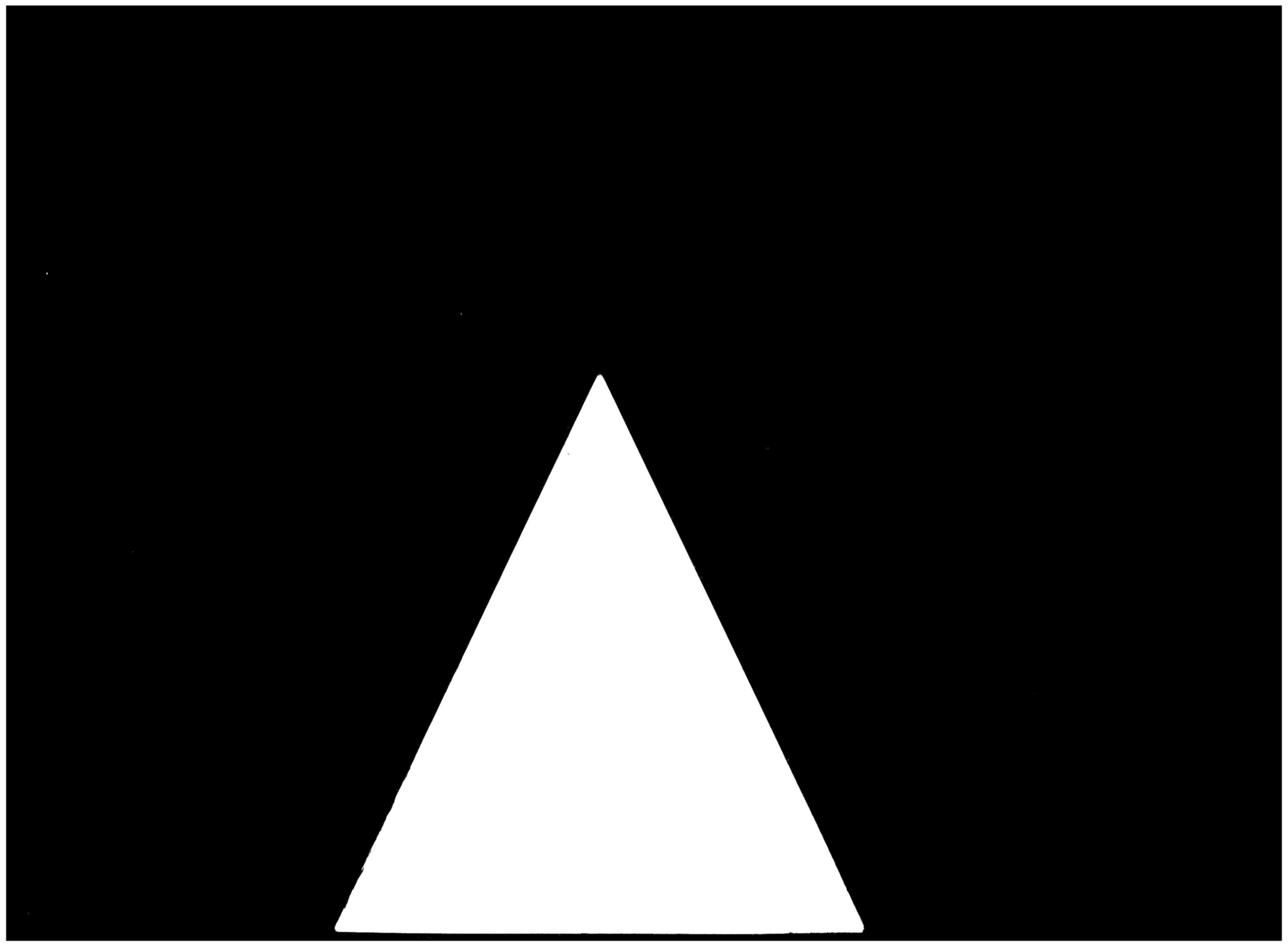
This September 17th, 1903.

John Awtrey,
Ordinary

COBB COURT OF ORDINARY.
MARIETTA, GA.
JOHN AWTREY, JUDGE PROBATE.

Hon. J. M. Lindsey,
Dear Sir:

This application is made as supplementary to one already of file in office, as per your direction to me verbally. This man is one of the best men I know and I hope you can allow the claim.



Scroggy, Newton, N.M.
Cobb Co
O.K. No. 1901

INDIGENT PENSION,

1900.

Name N. M. Scroggs

County Cobb

Co. D. 24 - Ga

Approved _____ 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

5/29-1901
8/31-1901
1/29-1900

Pensions office 8/1-190
It is not clear that applicant was with his Command when it was surrendered - as stated - nor does the testimony of witness show that he was - must state & prove this clearly

J. W. Lindsey
Com of Pensions

Pensions Office --6--25--1901.

Application amended is p proper but he must prove it by a witness like any other material fact.

J. W. Lindsey,

Com. Of Pensions.

Appl amended is proper - but he must prove it by a witness like any other material fact.

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

I, _____, hereby authorize _____ of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____

Witness my hand and seal this _____ day of _____ 1900.

Executed in presence of _____ (L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

I, , hereby authorize

of

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

at by

Witness my hand and seal this day of 1900.

Executed in presence of } (L. S.)

Newton Office 8/1-190
It is not Clear the Applicant was with his Command when the Injury occurred - as he may have received it Whilst Cooking or Waiting on Some other Member of the Mess - Must Call & prove this Clearly
Ord Lindsay Com Pensions

Pensions Office --6--25--1901.

Application amended as to property. It he must prove by a witness like any other material fact.

J. W. Lindsey,
Com. of Pensions.

Geo. W. Harrison, State Printer, Atlanta.

Boroggs Newton Co Ga

Ga. No. 121

INDIGENT PENSION, 1900.

Name W. M. Scroggs

County Co. Ga.

Approved 1900.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

1129-1901

Questions for Applicant.

Every Question Must Be Answered.

STATE OF GEORGIA,
Cobb County. }

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

1. What is your name and where do you reside? (give State, County and post office) Newton W Scroggs Acworth Cobb County Georgia
2. How long and since when have you been a resident of this State? Forty Four years
3. When and where were you born? Dec 31 1841 Morristown Jefferson Co Tenn.
4. When and where and in what company and regiment did you enlist or serve? ~~August 24 1861~~ Atlanta Georgia Co. D. 24th Ga Regt Inft
5. How long did you remain in such company and regiment? Three Years and Six Months
6. For how long a period did you discharge regular military duty? For 3 Yrs and 6 months
7. When, where and under what circumstances were you discharged from service? April 9th 1865 at Appomatox Va Thro Surrender of Gen Lees Army
8. What is your present occupation? Farmer
9. How much can you earn (gross) per annum by your own exertions or labor? $25 or $30
10. What has been your occupation since 1865? Farmer
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Second
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? Gun Shot wound in right, When myself & my right leg and right Very painful and both can only drag my right leg and side by side I can not walk
13. What property, effects or income do you possess, and its gross value? $50.00 $60. No income
14. What property, effects or income did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, did you make of same? 1894 Owned two mules two of the Head Cattle which I usually keep on hand in my inability to make living by my labor till 1899 had ~~about~~ $100. ~~about~~ ~~about~~ ~~about~~

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb COUNTY.

Charles T. Smith & J. A. Scroggs, of said State and County, having been presented as a witness in support of the application of Newton M. Scroggs for pension under Section 1254, Code; and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Charles T. Smith near Acworth Georgia

2. Are you acquainted with N. M. Scroggs, the applicant; if so how long have you known him? Forty years or more

3. Where does he reside, and how long and since when has he been a resident of this State? Near Acworth Cobb County Georgia

4. When, where and in what company and regiment did he enlist, and how do you know? August 1861 Atlanta Ga Company D 24th Ga Regiment I belonged to same Company

5. Were you a member of the same company and regiment? I was.

6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Continued with his Co. and Regiment till surrender at Appomaddox Va except he was wounded and got furlough and came for some time

7. What property, effects or income has the applicant? (Give your means of knowledge.) Very little property or effects and no income except what little he earns by his own labor, which is very little

8. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? He had a horse or mule and cow or two but all has been consumed but a small mule.

9. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? He sold a mule to pay some indebtedness to Mr Awtry

10. What is the applicant's occupation and physical condition? Farmer. He has failed very much in the last year or two and seems to broke down don't think him able earn his living by work

11. Is the applicant unable to support himself by labor of any sort, if so, why? I think he is unable to support himself by any sort of labor because he seems to be diseased I the wound he got in war affects him

12. How was he supported during the years 1898 and 1899? By what he made on the by his labor know of nothing else

13. What portion of his support for these two years was derived from his own labor or income? Don't know of any other source what he made

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He has been failing in strength and physical [illegible] for several years till he has no property and unable to work for a living.

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

Sworn to and subscribed before me, this the 13 day of Jany 1900.

C. T. Smith Witness.

J. M. Stone Ordinary. Wm A Scroggs

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me W. C. Humphries M.D. and C. O. Fowler M.D., both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully _____, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Was shot in right thigh as result has neuralgic pains in sciatic nerve rendering lip at times almost useless also has chronic cystitis and sever bronchial cough. His condition has badly impaired his health. They further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the 13th day of Jany 1900.

W. C. Humphries M.D.

J. M. Stone Ordinary. C. O. Fowler M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I, J. M. Stone, Ordinary in and for said County, hereby certify that the applicant N. M. Scroggs resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 1856 and that the witnesses, viz: Chas. T. Smith, J. A. Scroggs, Orlando Awtrey, W. C. Humphries M.D. & C. O. Fowler M.D. are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1898 Nothing Dollars of property, and in 1899 Nothing Dollars of property.

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

Witness my hand and seal of office, this 15th day of January 1900.

J. M. Stone Ordinary,
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, N. M. Scroggs hereby authorize John Awtry of

to receive and receipt for the pension allowed and request that he remit same to me at his office

by hand

Witness my hand and seal, this 1 day of Jan 1902.

N. M. Scroggs [L. S.]

Executed in presence of

[illegible]

Scroggs, N. M.
Cobb Co. Ga.

(FOR THOSE ALREADY ENROLLED.)

No. 5/6

INDIGENT

SOLDIER'S PENSION

1902.

Name N. M. Scroggs

County Cobb

Co. D Regiment 24th

WARRANT ISSUED

1/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Cady

Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, N. M. Scroggs hereby authorize John Awtry of

to receive and receipt for the pension allowed and request that he remit same to me at his office

by hand

Witness my hand and seal, this 3rd day of Jany 1903.

N. M. Scroggs. [L. S.]

Executed in presence of

Scroggs N. M.
Cobb County

CODE SECTION 1254.

(FOR THOSE ALREADY ENROLLED.)

No. 5/6

INDIGENT

SOLDIER'S PENSION

1903.

Name N. M. Scroggs

County Cobb

Co. D 24th Regiment Ga. Vols

WARRANT ISSUED

1/23 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Cady

Geo. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears N. M Scroggs of Cobb County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1853; that he is 60 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 3½ Years in Company D, of 24th Regiment of Ga. Vols. ____; that his physical condition is as follows: Owing to Age Infirmity and Poverty he is unable to Support himself at any Avocation of life

that his property consists of the following items Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb county been allowed a pension for the year 1 Enrolling

Sworn to and subscribed before me, this the 1 day of Jan 1902. N M Scroggs

John Awtrey Ordinary.

STATE OF GEORGIA,

Cobb County.

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

Given under my official signature and seal, this 1st day of Jan 1902.

John Awtrey

Ordinary Cobb County.

Affix your seal here

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears N M Scroggs of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1853; that he is 61 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 3½ yrs in Company D, of 24th Regiment of Ga. Vols ____; that his physical condition is as follows: From infirmity & poverty he cannot support himself.

that his property consists of the following items: Nothing

of the value of ____ Dollars. that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cobb county been allowed a pension for the year 1902

Sworn to and subscribed before me, this the 3 day of Jan 1903. N M Scroggs

John Awtrey Ordinary.

STATE OF GEORGIA,

Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with N M Scroggs 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 3 day of Jan 1903.

John Awtrey

Ordinary Cobb County.

Affix your Seal here

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, N M Scroggs hereby authorize
John Awtrey of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 5th day of Jany 1904.

N M his Scroggs mark [L. S.]

Executed in presence of

Scroggs N. M.
Cobb Co

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 4[illegible]

INDIGENT
SOLDIER'S PENSION
1904.

Name N M Scroggs
County Cobb
Co. 24th Regiment Ga.
Vols.

WARRANT ISSUED
1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
only

Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, N M Scroggs hereby authorize
John Awtrey of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 24 day of Jany 1905.

N M his Scroggs mark [L. S.]

Executed in the presence of
J M Gamm

Scroggs N. M.
Cobb Co

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 764

INDIGENT
SOLDIER'S PENSION
1905.

Name N M Scroggs
County Cobb
Co. 15 Regiment 24th

WARRANT ISSUED
JAN 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
0

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears N M Scroggs of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18[illegible]; that he is 61 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 3½ Years in Company D, of 24 th Regiment of Ga. Vols; that his physical condition is as follows: Age Infirmity & Poverty is unable to support himself

that his property consists of the following items: Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 5th day of Aug 1904. N M (his mark) Scroggs

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 5th day of Aug 1904.

John Awtrey
Ordinary Cobb County.

Affix your Seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears N M Scroggs of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1863; that he is 63 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 3½ years in Company D, of 24 th Regiment of Ga. Vols; that his physical condition is as follows: Age Infirmity and Poverty

that his property consists of the following items: Nothing

of the value of ____ Dollars. I am now earning, by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 4 day of Aug 1905. N M (his mark) Scroggs

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 4 day of Aug 1905.

John Awtrey
Ordinary Cobb County.

Affix your Seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, N M Scroggs hereby authorize John Awtrey of to receive and receipt for the pension allowed, and request that he remit same to me at his office by

WITNESS my hand and seal, this 3 day of Jany 1906.

N M Scroggs [L. S.]
Mark

Executed in the presence of
J M Gann

CODE SECTION 1254
(FOR THOSE ALREADY ENROLLED.)

No. 721

INDIGENT
SOLDIER'S PENSION
1906.

Name N M Scroggs
County Cobb
Co. D 24 Regiment Ga Vols.

WARRANT ISSUED
1/12 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cdy

THE FRANKLIN PRINTING AND PUBLISHING CO., GEO. W. HARRISON, MGR.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, John Awtrey, hereby authorize John Awtrey of to receive and receipt for the pension allowed, and request that he remit same to at by

WITNESS my hand and seal, this 8 day of Jany 1907.

N M Scroggs [L. S.]

Executed in presence of
J M Gann

Scroggs, N. M.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 661

INDIGENT
SOLDIER'S PENSION
1907.

Name N M Scroggs
County Cobb
Co. D 24 Regiment

WARRANT ISSUED
JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears W M Scroggs of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company D, of 24th Regiment of ____; that his physical condition is as follows: Infirmity & Poverty

that his property consists of the following items: ____

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 3 day of January 1906.

John Awtrey Ordinary.

W M Scroggs

State of Georgia,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with W M Scroggs 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 3 day of January 1906.

John Awtrey
Ordinary Cobb County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Cobb County.

Personally appears W M Scroggs of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company D, of 24th Regiment of ____; that his physical condition is as follows: age & Infirmity

that his property consists of the following items: ____

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 8 day of January 1907.

John Awtrey Ordinary. W M Scroggs

State of Georgia,
Cobb County.

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

Given under my official signature and seal this 8 day of January 1907.

John Awtrey
Ordinary Cobb County.

Affix your seal here

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

OFFICE OF

JOHN AWTREY

ORDINARY, COBB COUNTY.

Marietta, Ga., August 23rd, 1901.

Georgia, Cobb County.

Personally came before me, John Awtrey Ordinary of said County, John A. Scroggs, a resident of said County, who being duly sworn deposes and says ~~that~~ in addition to what he has already stated, That he personally knows that the applicant, W M Scroggs, was a member of Co. D. 24 Regt. Ga. Vols. That he served as a private in said Co. from August 24th 1861 until he was wounded at the battle of Cedar Creek Va. on October 19th, 1864. That said applicant was then furloughed by the war department for 90 days. That at the expiration of furlough it was extended by W. L. Sutton enrolling officer for Towns County Ga. and that before the extension had expired Lee's army had surrendered April 9th 1865. Deponent ~~that~~ that applicant was then paroled at Kingston Ga. by Gen Blair about May 1865.

Deponent further states that applicant was with his Command constantly from his enlistment Aug. 24th 1861 until he was wounded in October 1864. That he was never absent from his Command either with or without leave until wounded.

Sworn to and subscribed before me this August 23rd, 1901.

John Awtrey, Ordinary.

John A. Scroggs

(over)

OFFICE OF

JOHN AWTREY

ORDINARY, COBB COUNTY.

Marietta, Ga., August 23rd, 1901.

Personally appeared before me W M Scroggs, applicant for pension under Code section 1254, and amends his original application as follows, to wit:

Under question No. 7 on original application he is made to say that he surrendered with his Command at Appomattox April 9th 1865. This was an error of the attorney in writing applicant's testimony, and was not understood by applicant at the time. The following are the facts: Applicant was wounded Oct. 19th 1864 at battle of Cedar Creek Va., and on Nov. 21st 1864 was furloughed by the war department and went home 90 days. When the furlough expired he was not recovered sufficiently to return to army, so his furlough was extended by W. L. Sutton, enrolling officer for Towns County, under the advice of Dr. D. W. Killian. Before the extension expired Lee's army surrendered. Applicant was then paroled at Kingston, Ga. by Gen. Blair, about May 1865.

W. M. Scroggs

Sworn to and subscribed before me this August 23rd, 1901.

John Awtrey, Ordinary.

(over)

Georgia - Cobb County -

I certify that John A. Scroggs, witness for N.M. Scroggs, is a bona fide resident of Cobb County, a gentleman personally known to me to be of high character and standing, and both he and the applicant are entirely trustworthy and their evidence is worthy of full faith and credit.

John Awtrey
Ordinary Cobb
County -

PHENIX INSURANCE COMPANY.
H. C. STOCKDELL, GENERAL AGENT.
ATLANTA, GA.

Agency 1

Georgia Cobb County.

Orlando Awtrey of said State and County having been presented as a witness in support of the application of N. M. Scroggs for Pension under Section 1274 Code and after being duly sworn, deposes as follows:

That he has known applicant for ten or more Years, that he had dealings with Him Selling him Supplies and Goods, That he knows that the applicant has been falling behind with his accounts Year by Year and would dispose of Something of his property to pay to his debts that he the deponent have a Mule and swapped a Mare for a small Mule the difference going to his Credit. till Now he has no property of any Consequence. In the Meantime he bought on Contract for a Piece of Land failed to pay for it and had to give it up. His health at the Same time failed him and he is now unable to work and support himself and has No Means to draw on. Orlando Awtrey.

Sworn to and subscribed before me
Jany 13 1900. J.R. Stone Notary.

W. C. HUMPHRIES,
—PHYSICIAN AND SURGEON.—

ACWORTH, GA., Aug 17th 1901

To whom it may Concern.
This certifies that I have personally known Mr. N. M. Scroggs for 10 or 12 years & know him to be an honest, upright & industrious man & willing to make a living for himself & family if his physical Condition would permit. Owing to old age weakened eyesight & physical infirmities he is not at present able to make a living by manual Labor.

Sworn to and Subscribed before me
this Aug 23rd 1901.

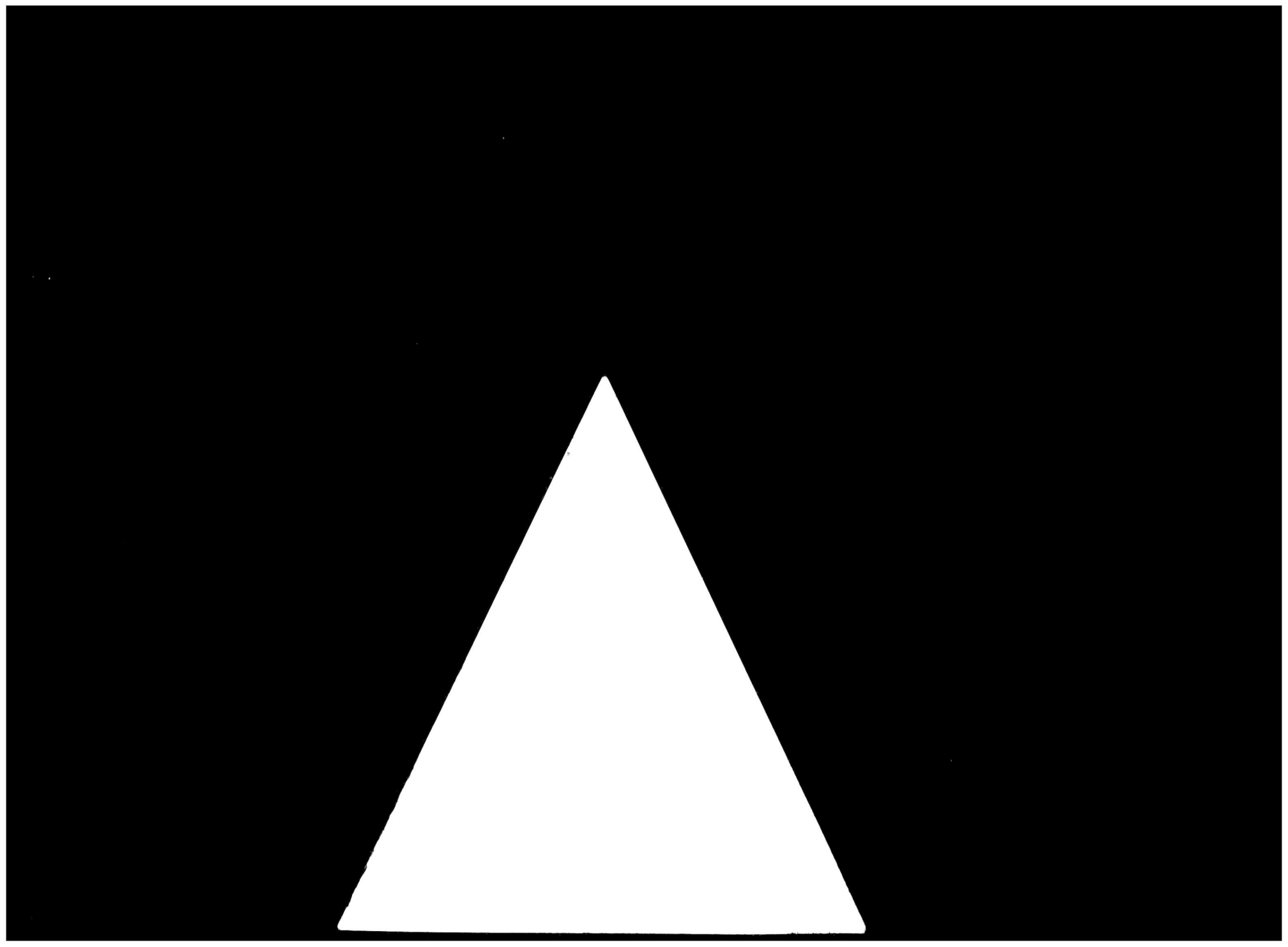
W C Humphries M.D.

John Awtry,
Ordinary Cobb County,
Ga.

Georgia, Cobb County —

I Certify that W.B. Hudspeth is a practicing Physician of said County, of good standing and his evidence is worthy of full faith and credit

John Awtry
Ordinary
Cobb County Ga.



POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, B. L. Seagrovs hereby authorize J. M. Stone ~~[illegible]~~ of Marietta Ga to receive and receipt for the pension allowed and request that he remit same to me ~~[illegible]~~ J. M. Stone at by

Witness my hand and seal this 6th day of April 1895.

Executed in presence of ~~[illegible]~~ G M Fleming

B. L. his x mark Seagrovs

Prison or Order

Attorney
Rich Johnson
No. 3 Sec
Seagrovs B. L.
Cobb Ga.

INDIGENT PENSION

1895.

Name B. L. Seagrovs

County Cobb

Ground

Jany 11 1896 1895

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Judge Stone

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

J. M. Stone B. L. Seagraves hereby authorize
of Marietta Ga
to receive and receipt for the pension allowed and request that he remit same to me
at by J. M. Stone

Witness my hand and seal this 6th day of April 1895.

Executed in presence of
J. M. Stone
[illegible]

B. L. his x mark Seagraves

Pd 1/11 filing

Pension No. 3472
Application No. [illegible]
Certificate No. [illegible]

INDIGENT PENSION
1895.

Name B. L. Seagraves
County Cobb
Ground Jan 1 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT ISSUED TO
Judge Stone

Geo. W. Harmon, State Printer, Atlanta.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office) B L Seagraves I Cobb County Ga Acworth Ga.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? 62 years
3. When and where were you born? 62 at Muchenson Ga Ga
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate army
5. When and where did you enlist? 1863 at Decatur Ga
6. In what company and regiment did you enlist? 7th Marion Bn
7. How long did you remain in that company and regiment? At 18 Months
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? I did
9. For how long a period did you discharge regular military duty? 18 months
10. When, where and under what circumstances were you discharged from service? I was discharged at Savanah Ga in the fall 1864 on account of bad health
11. What is your present occupation? farming
12. How much can you earn per annum by your own exertions or labor? Nothing
13. What has been your occupation since 1865? farming
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? Cant support my family by labor or income
15. What is your present physical condition and how long have you been in such condition? Crippled and Disabled from the effects of Lung fever & Rheumatism Caught while in the service of the C S A and have been so for 20 years
16. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Infirmity
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? for two & half years I have been Crippled & disabled from the effects of Lung fever & Rheumatism & I do my Cooking
18. What property, effects or income do you possess? Non
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? Non
20. In what County did you reside during those years and what property did you then return for taxation? Cobb Non
21. How were you supported during the years 1893 and 1894? by my Children
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I did not keep an account of Expenditures worthy
23. What was your employment during 1893 and 1894? What pay did you receive in each year? Non
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? my wife is living 5 Children 3 Boys 30 25 and 15 Girls 18 & 12 Non except what they earn Non or rented land

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?

No

Sworn to and subscribed before me this the 6th day of April 1895. J. M. Stone Ordinary of Cobb County.

B. L. Seagraves his mark Applicant.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, County.

W. D. Wright of Cobb Co. Ga. of said State and County, having been presented as a witness in support of the application of B. L. Seagraves for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W. D. Wright
2. Are you acquainted with B. L. Seagraves, the applicant, if so how long have you known him? I have known him 35 years
3. Where does he reside, and how long has he been a resident of this State? In Cobb Co. all his life
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I do. He served in Confederate army I served with him
5. When, where and in what company and regiment did he enlist? He enlisted in the Militia of said State & Co. & was mustered into service
6. Were you a member of the same company and regiment? I was.
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? He served about 18 months & was discharged the latter part of 1864
8. What property, effects or income has the applicant? (Give your means of knowledge.) Have lived near & adjacent for several years can't know any thing about his pecuniary or wealth
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? 1 Cow & Calf worth $15. — No income has Cow & calf yet
10. What is the applicant's occupation and physical condition? Farmer when he can work — he is physically disable on account of disease, infirmity and age to do work of any kind
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is not on account of Physical disability.
12. How was he supported during the years 1893 and 1894? By his Son.
13. What portion of his support for these two years was derived from his own labor or income? Very little from Labor — None from income
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is he reports 62 yrs. of age — Quite feeble and infirm by disease and not able to make a living
15. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this the 6th day of April 1895. J. M. Stone Ordinary of Chisholm County

W. D. Wright Applicant's witness

Ans to Nos. 9. 10. 11. 12. 13. 14 & 15

Discontinued as Ordinary on the 6th of April 1895 — J. M. Stone Ordinary Cobb Co. Ga.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, Cobb County.

Personally came before me W. D. Wright M. D. and W. M. Kemp M. D, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully B. L. Seagraves, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

the first Applicant badly debilitated. A consumptive in the 3rd Stage. Has hemorrhage from the Lungs on an average Once a Month

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 6th day of April 1895. J. M. Stone Ord.

W. D. Wright M. D.
W. M. Kemp M. D

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Cobb County.

I, J. M. Stone, Ordinary in and for said County, hereby certify that the applicant B. L. Seagraves resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: W. D. Gardner W. D. Wright M. D. and W. M. Kemp M. D. are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1893, $50, dollars of property, and in 1894, $75, dollars of property.

Witness my hand and seal of office, this 6th day of April 1895.

J. M. Stone Ordinary of Cobb Cofinty.

NOTE.

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

not able to make a living

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

Sworn to and subscribed before me, this the 3d day of April 1895.

J. Martha Harlin
Applicant

A. C. Comb Ordinary of Cherokee County

J. I. Gaulin Witness
as to nos. 9. 10. 11. 12. 13. 14 & 15

County

NOTE.

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

Enl.
May 13. 1862.
Rec'd [illegible] present on
rolls for Nov 1, 1863,
[illegible] on file.
[illegible]

Ulmer enlisted
Aug 8 1862 & reported
[illegible] on rolls
[illegible] Nov. 1863.
[illegible]

Seay, A. B. Cobb Co.
Oct 1917

No.

E [illegible]

Confederate Soldier's Application.

UNDER ACT 1910.

County Cobb

Name A. B. Seay

Company E

Regiment 9th Battalion Artillery

Approved

Not in files

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

11-1-1916

Enl. May 13. 1862.
Retired Furlough
Feb 10 for 20 days
Last on roll
Feb 28 1863

Witness enlisted
Aug. 8. 1862 & reported
present on rolls
July - Nov. 1863.
Jan. 1864

A B Seay, Co. B. Cobb Co.

Confederate Soldier's Application.

UNDER ACT 1910.

No.

County Cobb

Name A B Seay

Company B

Regiment 9th Battalion

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS P BYRD, State Printer, Atlanta

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Cobb County.

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

1. What is your name and where do you reside? (Give County and Post-office) A.B. Seay Marietta Cobb County Ga

2. How long and since when have you been a continuous resident citizen of this State? All my life

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) May 1862 Atlanta, Co. B. Hughes Artillery 9th Batt

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) until April 9 1865 almost 3 years

6. When and where was your Company and Regiment surrendered or discharged from the Service? April 7 1865 Appomattox Va

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were. I was present

a. Where was your Command when you left it? Appomattox Court House Virginia

b. When did you leave the Command? April 9 1865

c. For what cause did you leave? Lee Surrendered

d. By whose authority did you leave? Gen Lee

e. For how long was your leave granted? In what way? Indefinately

f. Why did you not return to your Command after leave expired? ———

g. In what way were you prevented? ———

h. What effort did you make to return? ———

i. Were you captured during the war? No

j. If so, when, and where? In what prison were you held and when were you released? ———

9. What property of every description was owned, in the use, possession and control of yourself and its cash value on the 4 Nov. 1908? (Make list by items and value, and where situated.)

103 Acres land Valued 1300.00
2 Poor mules " 125.00
1 Cow 25.00

10. What property of any kind have you disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? 40 Acres of land sold to J I Seay to pay a debt I owed, price $600.00

11. What property of any description of any kind, and of any value now owned and in the use possession and control of yourself and its cash value? (Make itemized list).

63 Acres of land value $1950.00
2 old Mules on 20 years old 100.00
1 Cow 25.00 H.H. Furniture 150.00

12. What annual or monthly income or earnings of yourself and the source derived have you? None except rents of place

13. Are you drawing a pension of any amount from this State or the United States?

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 3rd day of October 1916

A B Seay

Ordinary of Cobb County.

STATE OF GEORGIA,
Gwinnett Cobb County.

G A Seay of said State and County is hereby presented as a witness in support of the application of A B Seay for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside?
G A Seay, Gwinnett Co. P.O. Stone Mountain

2. How long and since when have you known A B Seay the applicant?
all my life

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Marietta Cobb County Ga.
for more than 60 years to my knowledge

4. When, where and in what Company and Regiment did A B Seay enlist during the war from 1861 to 1865? (Give date and place) May 1862, Atlanta Ga Co. E 9th Ga Cavalry

5. How did you obtain your information of this Service?
I was in same Co. & Battalion

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) until April 9 1865 — Nearly 3 years

7. When and where was his Command surrendered or discharged (give date and place)
April 9 1865. Appomattox Va.

8. Were you personally present at the Surrender? Yes

9. If not, where were you and how came you there? I was present

10. Was the applicant personally present with his Command at surrender? Yes

11. If not where was he and how came him there? He was present

12. When did he leave his Command? April 9 1865 Where was his Command when he left it? Appomattox for what cause did he leave? Co Surrendered
By whose authority did he leave Gen Lee and how long was he granted leave? Indefinite discharge How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)
I was with Applicant during this Service

13. In what way was he prevented from returning to his Command?
How do you know?

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

15. Was applicant captured as a prisoner No If so, when and where?
In what prison was he held? and when released

Sworn to and subscribed before me, this the 9th day of Oct 1916
G G Robinson Ordinary,
of Gwinnett County.

G A Seay

Cobb County.

Personally before me comes J D Fagan & J K Gresham who on oath says that they are freeholders residing in said County and we know A B Seay the applicant for pension and we know the property that is now in the use, possession and control of himself and of its cash value to wit: (Make List by items and value.)

60 acres of land	value	$1200.00	
2 old Mules	"	100.00	
1 Cow		25.00	H. H. Goods $50.00

1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908? (State it fully by items.) 40 acres of land sold.
2. When and to whom was it sold or given to? J J Seay
3. What was the price paid or stated to be paid? $600.00
4. What relation is the party to applicant? Son
5. What disposition was made of the proceeds of the sale? Pay debt
6. Was the disposition of this property made in good faith and full values? Yes
or was it made to obtain a pension? No

Sworn to and subscribed before me, this the 12th day of Oct 1916
J M Gann Ordinary,
of Cobb County.
J D Fagan
J K Gresham

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I J M Gann Ordinary of said County, certify that I know the applicant A B Seay for Pension is the person he represents himself to be and resides in said County. That I also know the witness swearing to the service and J D Fagan and J K Gresham who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of Cobb shows that the value for tax is in 1908 $1240 for 1909 $1245 for 1910 $1355 for 1911 $1400 for 1912 $1275 for 1913 $1240 for 1914 $1795 for 1915 $1145 1916 — 1145

Sworn under my hand and official seal of office this day of 191
J M Gann Ordinary,
of Cobb County.

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

Georgia Gwinnett County.
I G.G.Robinson, ordinary for said county, certify that I know G.A. Seay, the subscribing witness, that he is a bonifide resident and citizen of this Gwinnett county and that he is trustworthy, truthful and his statement is entitled to full faith and credit.
Given under my hand and seal of office
This 9th day of October 1916.
G.G. Robinson
Ordinary Gwinnett County, Georgia

Sworn to and subscribed before me, this the 9th day of Oct 1916

G G Robinson Ordinary,

of Gwinnett County.

and his statement is entitled to full faith and credit.

Given under my hand and seal of office

This 9th day of October 1916.

G G Robinson

Ordinary Gwinnett County, Georgia

Geary I. B.
Coff County
Disapproved 1931

CONFEDERATE SOLDIER'S APPLICATION

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

County COBB
Name I.B.SEAY
Company D,
Regiment 4th.Ga.Reserves.
Approved

Sent for WP 2-4-31

JOHN W. CLARK,
Commissioner of Pensions.

2-4-1931 e

Ordinary's Certificate

STATE OF GEORGIA,

Cobb COUNTY.

I, J. M. Gaine, Ordinary of said County, certify that I know I. B. Seay the applicant for pension; that he is the person he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know Alex Malle, the witness, who swears to the service; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 3 day of February 1931.

J. M. Gaine Ordinary.

(SEAL OF ORDINARY.) of Cobb County

Instructions:

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

Seay I. B.
Cobb County
Disapproved 1931

CONFEDERATE SOLDIER'S APPLICATION

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

County COBB
Name I.B. SEAY
Company D,
Regiment 4th.Ga.Reserves.
Approved

Sent for W.P. 2-4-31

JOHN W. CLARK,
Commissioner of Pensions.

2-4-1931 C

Ordinary's Certificate

STATE OF GEORGIA,
Cobb COUNTY.

I, J. M. Gaine, Ordinary of said County, certify that I know I. B. Seay the applicant for pension; that he is the person he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know Alec Mable, the witness, who swears to the service; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 3 day of February 1931.

J. M. Gaine Ordinary.

(SEAL OF ORDINARY.) of Cobb County

Instructions:

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

APPLICATION FOR PENSION BY A SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,
Cobb COUNTY.

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

1. What is your name and where do you reside? (Give County and Post Office) I. B. Seay Temporarily East Point, Ga. 317 Pine Street

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

3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State from 1861 to 1865? Organized Militia

4. When and where, and in what Company and Regiment did you enlist? (State the arm and class of service, and give name of Colonel and Captain.) August 1861, Atlanta Ga. 4th Ga. Reserves Co. D — T. J. Lowe Capt.

5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge.) Six Months January 4-1864

6. When and where was your Company and Regiment ~~surrendered or~~ discharged from the Service? Atlanta - January 4-1864

7. Were you personally present with your Command when it was ~~surrendered or~~ discharged? Yes

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

a. Where was your Command when you left it? Atlanta — Disbanded Left Command at age of 17 years

b. When did you leave the Command? January 4-1864

c. For what cause did you leave? Disbanded — Served 6 months

d. By whose authority did you leave? —

e. For how long was your leave of absence granted? In what way? —

f. Why did you not return to your Command after leave expired? —

g. In what way were you prevented? —

h. What effort did you make to return? —

i. Were you captured by the enemy at any time? No

j. If so, when, and where? In what prison were you held and when were you released? —

9. Are you drawing a pension of any amount from this State or the United States? No

10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was it not allowed? Yes — For reason I did not join Regular Army. But at age of 17 was too young

Sworn to and subscribed before me this the 3 day of February 1931.

I. B. Seay Applicant.

J. M. Gaine, Ordinary
of Cobb County
(SEAL OF ORDINARY.)

D
4 Ga Reserves went out
May 1864

Questions of Witness as to Service

STATE OF GEORGIA,

Cobb COUNTY.

Alex Mable of said State and County is hereby presented as a witness in support of the application of I. B. Seay for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? Alex Mable Marietta, Route 4

2. How long and since when have you known I. B. Seay the applicant? Since Childhood

3. Where does he now reside, and since when has he been, continuously, a bona fide resident of this State, and how do you know? All life — Personally acquainted — Cobb County

4. When, where and in what Company and Regiment did I. B. Seay enlist? (Give date and place) August 1863 Atlanta Co. D 4th Ga Reserves

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

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) August 1863 to January 1864

7. When and where was his Command ~~surrendered or discharged~~ Disbanded? (Give date and place.) January 4 - 1864 - Atlanta

8. Were you personally present when it was surrendered? Yes

9. If not, where were you? — and how came you there? —

10. Was the applicant personally present with his Command when it was ~~surrendered~~ Disbanded? Yes

11. If not, where was he? — and how came him there? —

12. When, where and for what cause did he leave his Command? (Give date.) —

By whose authority did he leave his Command? —

and how long was he granted leave? — How do you know all that you have stated to be true? If of your own knowledge, state clearly and specifically Was in same Command and have been from Childhood

13. In what way, if you know of your own knowledge, was he prevented from returning to his Command? (State clearly and specifically.) Command Disbanded Age under 20

14. What effort did he make to return to his Command and how do you know this? Reserves Disbanded - No effort made to Return

15. Was applicant captured as a prisoner? No if so, when and where? — in what prison was he held? — and when released? —

Sworn to and subscribed before me, this the 3 day of February, 1931.

J. M. Gaines, Ordinary of Cobb County

(SEAL OF ORDINARY.)

Alex Mable
Witness.

On Roll 1919

Co. D 4 Ga Reserves, Inf.

Sworn to and subscribed before me, this the 3 day of February, 1931.

J. M. Garn, Ordinary of Cobb County

(SEAL OF ORDINARY.)

Witness.

On Roll 1919

Co. D 4 Ga Reserves, Inf.

March 7, 1931.

Hon. J. M. Garn,
Ordinary of Cobb County,
Marietta, Ga.

My dear Judge:

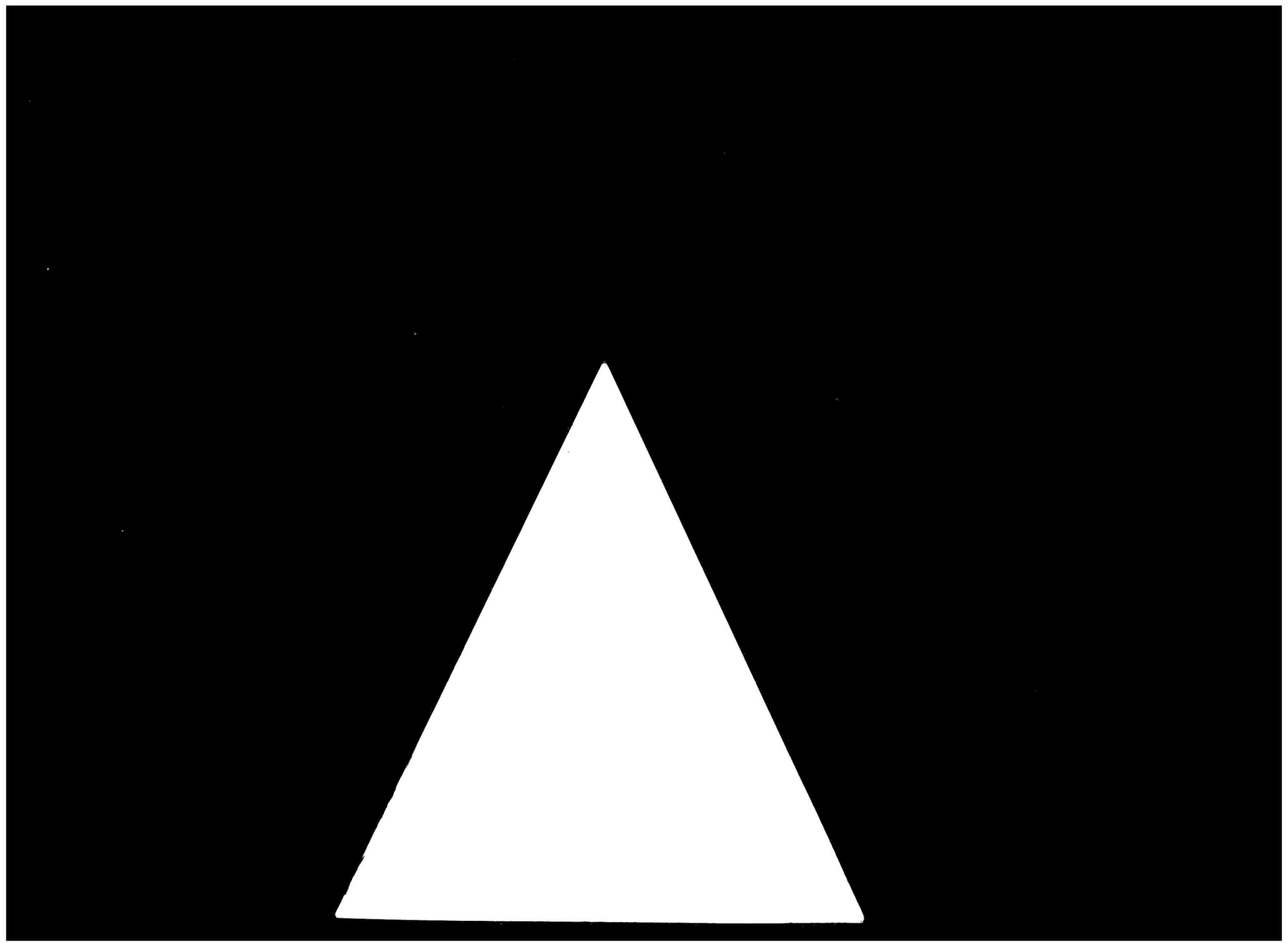
I have not been able to approve the application of Mr. I. B. Seay as a member of Co. D, 4th Georgia Reserves for the reason that this Company went out in May, 1864, and Mr. Seay claims that the command to which he belonged was disbanded at Atlanta, January 4, 1864, and that he was too young at 17 years to re-enlist.

With kind regards,

Very truly yours,

Commissioner of Pensions

A



Segars, J. H.

No. Cobb Co

INDIGENT PENSION

1898.

Name J. H. Segars

County Ga

Approved 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/28.98

POWER OF ATTORNEY.

STATE OF GEORGIA, } Cobb Co. COUNTY.

I, J. H. Segars hereby authorize J. H. Sim of Cobb Co. to receive and receipt for the pension allowed and request that he remit same to Me at by Sim

Witness my hand and seal this 21st day of Jany 1898.

Executed in presence of } J. H. Segars [L.S.]

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb COUNTY.

I, J. H. Segars hereby authorize (M. Stone of Cobb Co.) to receive and receipt for the pension allowed and request that he remit same to Me at _____ by him

Witness my hand and seal this 21st day of Jany 1898.

Executed in presence of } J H Segars [L.S.]

Segars, J. H.
No. Cobb Co

INDIGENT PENSION

1898.

Name J. H. Segars
County Cobb

Approved _____ 1898.

RICHARD JOHNSON, Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/28.98

Questions for Applicant.

STATE OF GEORGIA, Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office.) J H Segars Reside at Smyrna Ga
2. How long and since when have you been a resident of this State? 90 years
3. When and where were you born? Walton Co Ga 1828
4. When and where and in what company and regiment did you enlist or serve? In June 1862 Co A Atlanta Ga 9th Ga Balation of Artillery Ladies Artillery
5. How long did you remain in such company and regiment? Until the close of the war, was captured and confined in Person at Camp Douglass and remained there until the close of the war
6. For how long a period did you discharge regular military duty? until I was captured
7. When, where and under what circumstances were you discharged from service? was discharged at close of the war from person at Camp Douglass Ill
8. What is your present occupation? Farmer
9. How much can you earn (gross) per annum by your own exertions or labor? Twenty Dolls
10. What has been your occupation since 1865? Miller and farmer
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? age infirmity & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? For the past five years applicant is unable to do manual labor
13. What property, effects or income do you possess and its gross value? None
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897 and what disposition, if any, did you make of same? Did not own no property in the years 1894 1895 1896 & 1897
15. In what County did you reside during those years and what property did you then return for taxation? Cobb Co and Cartow Co Returned no property
16. How were you supported during the years 1896 and 1897? Applicant attended to a little grist mill and in that way made a support but at present is unable to do the work of a miller
17. How much did your support cost for each of those years and what portion did you contribute thereto by your own labor or income? about 50 dollars I did all
18. What was your employment during 1896 and 1897? What pay did you receive in each year? I was a miller and recd 4 the proceeds of the mill
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? have a family No children except those that are married - No Homestead
20. Are you receiving any pension, if so, what amount and for what disability? None

Sworn to and subscribed before me this the 17 day of Jany 1898. } J H Segars Applicant.

J. M. Stone Ordinary.

of Cobb County.

Every Question MUST be Answered

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb County.

T. E. Legg & G B Eidson of said State and County, having been presented as a witness in support of the application of J K Segars for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? T. E. Legg & G B Eidson Kirkle near Smyrna Cobb Co Ga
2. Are you acquainted with J K Segars, the applicant, if so how long have you known him? Yes about 40 years
3. Where does he reside, and how long and since when has he been a resident of this State? Persons in Cobb Co Ga and has been resident of this State we since we have known him
4. When, where and in what company and regiment did he enlist, and how do you know? in June 1862 C & 9th Ga Batallion Eufaula Artillery at Pillatka Fla
5. Were you a member of the same company and regiment? We were
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? He was a faithful soldier and did regular service until he was captured and confined in prison at Camp Douglas Ill and remained there until he with us was exchanged
7. What property, effects or income has the applicant? (Give your means of knowledge.) None that we know of. he lives near us and is a poor man with the aid of his son who takes care of him
8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? None that we know of.
9. Has he conveyed away any of his property in the last three years, if so, what was it and to whom? None
10. What is the applicant's occupation and physical condition? Farmer & Miller He is an old man 70 yrs of age and is unable to make a support at his own exertions
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is. as stated in answers to questions 9 & 10 is old and infirm and unable to work
12. How was he supported during the years 1896 and 1897? affiants cant say. but are informed and believe that he obtained a small portion of the proceeds of the mill as long as he was able
13. What portion of his support for these two years was derived from his own labor or income? affiants cant say See answers to Question 12
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is 70 yrs of age is old and infirm & cannot make a living at any sort of manual labor in our judgment
15. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 17 day of Jany 1898.
T. E. Legg
G B Eidson Witness.
Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me John H Simpson M.D. and E J Estes M.D., both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully J K Segars, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

He is 70 years old and very infirm; on account of poor eye sight & infirmity due to old age is unable to do any of the work to which he has been accustomed in making his living

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the 17 day of Jan 1898.
Jno H Simpson M.D.
E J Estes M.D.
Ordinary.

ORDINARYS' CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, W H Stone, Ordinary in and for said County, hereby certify that the applicant J K Segars resides in said County, and has been a bona fide resident of this State since the Civil War to his life 1899 and that the witnesses, viz.: T. E. Legg G B Eidson Jno H. Simpson M.D. & E J Estes M.D. are of trust worthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1896 none in Pickens Co Dollars of property, and in 1897 Nothing Dollars of property.

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

Witness my hand and seal of office, this 20th day of Jany 1898.
W H Stone Ordinary
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, J. H. Segars, hereby authorize J. M. Stone of Marietta Ga to receive and receipt for the pension allowed, and request that he remit same to me in

by him

Witness my hand and seal this 14 day of Jany. 1899.

Executed in presence of

J. H. Segars (L. S.)

Pay to F. J. Hamby
Jany 20/99 J. M. Stone

INDIGENT
SOLDIER'S PENSION,
1899.

Name J. H. Segars
County Cobb

WARRANT ISSUED
1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
F. J. Hamby

Geo. W. Harrison, State Printer, Atlanta.

CODE SEC. 1264.
(For Those Already Enrolled.)

No. 2515

Segars, J. H.
Cobb Co.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, J. H. Segars, hereby authorize J. M. Stone of Marietta Ga to receive and receipt for the pension allowed, and request that he remit same to me

by him

Witness my hand and seal, this 19 day of Jany 1900.

J. H. Segars [L. S.]

Executed in presence of

F. J. Hamby

CODE SEC. 1264.
(For Those Already Enrolled.)

No. D6440

INDIGENT
SOLDIER'S PENSION,
1900.

Name J. H. Segars
County Cobb

WARRANT ISSUED
Jan 26 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Self

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. H. Segars of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 31st day of Jany 1828 that he is 70 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 yrs in Company A, of 9 th ~~Regiment of~~ Battalion Ga Vols. Artillery; that his physical condition is as follows: On account of age infirmity and poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of ——— Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Cobb county been ~~allowed a pension for the year~~ enrolled as a pensioner 189

Sworn to and subscribed before me, this, the 14th day of Jany 1899. J. H. Segars

J. M. Stone Ordinary. Smyrna Ga

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 14th day of Jany 1899.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. H. Segars of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 31st day of January 1828; that he is 71 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 years in Company A, of 9 th ~~Regiment of~~ Batt. Artilery Ga. Vols.; that his physical condition is as follows: On account of age, infirmity and poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of ——— Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cobb county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the 15th day of January 1900. J. H. Segars

J. M. Stone Ordinary. Marietta Ga

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 15th day of January 1900.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J H Segars hereby authorize John Autrey of Marietta to receive and receipt for the pension allowed and request that he remit same to at Marietta by [illegible]

Witness my hand and seal, this 7th day of January 1901.

[L. S.]

J H Segars

Executed in presence of
J M Gann

(For Those Already Enrolled.)

No. 242

INDIGENT
SOLDIER'S PENSION.
1901.

Name J H Segars
County Cobb

WARRANT ISSUED
Jan 10 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Autry

Gen. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J H Segars hereby authorize John Autrey of Marietta to receive and receipt for the pension allowed and request that he remit same to at by

Witness my hand and seal, this 3 day of Jany 1902.

J. H. Segars [L. S.]

Executed in presence of
J M Gann

Segars, J. H.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 586

INDIGENT
SOLDIER'S PENSION
1902.

Name J H Segars
County Cobb
Co. A Regiment 9th Batt

WARRANT ISSUED
1/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Gen. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,)
Cobb County.)

Personally appears J N Segars of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 31 day of Jan 1828 that he is 73 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 years in Company A, of 9 th Battallion Regiment of Ga Vols ; that his physical condition is as follows: On account of age and infirmity & poverty he is unable to support himself

that his property consists of the following items

Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Cobb county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the 7th day of January 1901 J H Segars

Ordinary.

STATE OF GEORGIA,)
Cobb County.)

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

Given under my official signature and seal, this 7th day of January 1901. John Awtrey

Ordinary Cobb County.

Affix your seal here

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,)
Cobb County.)

Personally appears J N Segars of Cobb County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 31 day of January 1828; that he is 73 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 Years in Company A, of 9 th Batallion of Ga Vols Artillery ; that his physical condition is as follows: On account of age Infirmity and poverty he is unable to support himself

that his property consists of the following items

Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb county been allowed a pension for the year 1

Sworn to and subscribed before me, this the day of 1902. J. H. Segars

Ordinary.

STATE OF GEORGIA,)
Cobb County.)

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

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

Affix your seal here

Ordinary. County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. H. Segars hereby authorize
John Mothey of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this day of June 1903.

[L. S.]

Executed in presence of J. H. Segars

Segars, J. H.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 504

INDIGENT
SOLDIER'S PENSION
1903.

Name J. H. Segars
County Cobb
Co. A Regiment 9 Batten,

WARRANT ISSUED
1/23 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordy

Geo. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. H. Segars hereby authorize
John Mothey of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this day of January 1904.

J. H. Segars [L. S.]

Executed in presence of

Segars, J. H.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 642

INDIGENT
SOLDIER'S PENSION
1904.

Name J. H. Segars
County Cobb
Co. A Regiment 9 Battalion
Ga Volunt

WARRANT ISSUED
1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
only

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J H Segars of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 31 day of Jan 1828; that he is 74 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 yrs in Company A, of 9th Regiment of Ga. Vols. Artillery; that his physical condition is as follows: from age & poverty he cannot earn support

that his property consists of the following items: Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cobb county been allowed a pension for the year 1 J H Segars

Sworn to and subscribed before me, this the 16 day of Jan 1903.
John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 16 day of Jan 1903.

Affix your Seal here

John Awtrey
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J H Segars of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 31 day of Jan 1828; that he is 76 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 3 yrs in Company A, of 9th Regiment of Ga. Vols. Artillery; that his physical condition is as follows: [illegible] and poverty he is unable to support himself

that his property consists of the following items: Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1903. J H Segars

Sworn to and subscribed before me, this the 4 day of Jan 1904.
John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 4 day of Jan 1904.

Affix your Seal here.

John Awtrey
Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, J. H. Segars hereby authorize
John A. Wiley of

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

at

by

WITNESS my hand and seal, this 6 day of Jany 1905.

J. H. Segars [L. S.]

Executed in the presence of

M. Gann

Segars, J. H.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 5-7

INDIGENT
SOLDIER'S PENSION
1905.

Name J. H. Segars
County Cobb
Co. 4th Regiment
WARRANT ISSUED 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no date

Segars, J. H.
Cobb County

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, J. H. Segars hereby authorize
John A. Wiley of

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

at

by

WITNESS my hand and seal, this 8 day of Jany 1906.

J. H. Segars [L. S.]

Executed in the presence of

M. Gann

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 1-3

INDIGENT
SOLDIER'S PENSION
1906.

Name J. H. Segars
County Cobb
Co. Eighth Regiment
WARRANT ISSUED 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

THE FRANKLIN PRINTING AND PUBLISHING CO., GEO. W. HARRISON, MGR.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J H Segaro of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 1828; that he is 76 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 years in Company A, of 9th ~~Regiment~~ Battalion of Ga. Vols. Artillery; that his physical condition is as follows: Infirmity age and poverty

that his property consists of the following items: Nothing

of the value of _____ Dollars. I am now earning, by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

J H Segaro

Sworn to and subscribed before me, this the 7 day of Jany 1905.

John A Wiley Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 7 day of Jany 1905.

John A Wiley
Ordinary Cobb County.

Affix your Seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears J H Segaro of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18__; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of A. 9th Battn. ~~Ga. Vol. Artillery~~ in Company ~~Ga. Vol. Artillery~~ of ~~_____ Regiment~~ of Ga Vols Art; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items: _____

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

J H Segaro

Sworn to and subscribed before me, this the 3 day of Jany 1906.

John A Wiley Ordinary.

State of Georgia,
Cobb County.

I, John A Wiley Ordinary of said County, do certify that I am well acquainted with J H Segaro 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~~ 3 day of Jany 1906.

John A Wiley
Ordinary Cobb County.

Affix your seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, H Segars, hereby authorize John Newbry of

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

at

by

WITNESS my hand and seal, this 3 day of [illegible] 1907.

J H Segars [L. S.]

Executed in presence of

[illegible]

Segars, J. H.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 654

INDIGENT
SOLDIER'S PENSION
1907.

Name J H Segars
County Cobb
Co. Leydon Regiment Cavalry

WARRANT ISSUED

JAN 21 1907.

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,
Cobb County.

Co A 9th Bottle Iso Vale Art

Personally appears J H Segars of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18__; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company Lodens Artillery, of _____ th Regiment of _____; that his physical condition is as follows: Infirmity age & poverty

that his property consists of the following items: _____

of the value of Nothing Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 3 day of January 1907.

J H Segars

John Hedrey Ordinary.

State of Georgia,
Cobb County.

I, John Hedrey Ordinary of said County, do certify that I am well acquainted with J H Segars 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 3 day of Jany 1907.

John Hedrey
Ordinary Cobb County.

Affix your seal here

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

Segars, J. H.

Cobb County

No._____

1919

Application for Pension Due Deceased Soldier

UNDER ACT 1891

To be paid his Widow or Dependent Children

BY

Mrs. Matilda Segars

Widow of J. H. Segars

of Cobb County

Co._____ Regt._____ Vols.

Approved and paid

_____, 191____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Died Feb. 2, 1919

GEORGIA, _____ County.

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

Witness my hand this _____ day of _____, 19____.

Attested before me:

_____

_____

_____

County

I, _____, Ordinary of said county, do certify that I personally know _____, the applicant, and that she is the lawful widow of _____, and was on the _____ Pension Roll of said _____ county, and was paid a Pension from _____ county for 19____, and at the time of his death on the _____ day of _____ 191____, there was due to him and unpaid his Pension of _____ Dollars from the State of Georgia, and I know _____, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this _____ day of _____, 191____.

_____ Ordinary,

_____ County.

Application for Pension Due Deceased Soldier

To Be Paid to His Widow or Dependent Children

UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA, Cobb **County**

Personally before me comes Mrs. Matildia Segars, of said county, after being duly sworn, on oath says that she is the widow of J.H. Segars who was duly enrolled as a Indigent Pensioner from the county of Cobb and was paid a Pension of Eighty Dollars from Cobb county for 1918, and that the said J.H. Segars died in Baldwin county on the 2nd day of February, 1919, and at the time of his death a Pension of $90.00 was due him from Cobb county and unpaid for 1919.

Applicant further swears that she married the said J.H. Segars on the 31st day of January 1895, in Cherokee county and State of Ga, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 7 day of March, 1919.

J.M. Gann, Ordinary.
Cobb County.

Mrs. Matilda (L. S.)
Segars.

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Cobb **County**

Personally before me comes Ola Gibson, who on oath says that he knew J.H. Segars while in life and that he knows Mrs. Matildia Segars the above applicant; that he knows that the said J.H. Segars and Matildia Segars were in due form of law married in the county of Cherokee in the State of Ga on the day of , 18, and that they resided together as husband and wife from date of marriage to the day of his death on the 2nd day of February, 1919, and I now know that she is his dependent widow.

Sworn to and subscribed before me this 7 day of March, 1919.

J.M. Gann, Ordinary.
Cobb County.

Ola Gibson

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

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

Sell. W. John A.
Mil County
No. 2129
(To Fulton Co 1898)

INDIGENT PENSION

1897.

Name John A. Sellers

County Cobb

Approved [illegible] 1897.

WARRANT HANDED TO

Applicant.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/22 97

POWER OF ATTORNEY.

STATE OF GEORGIA, _____ County. }

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal this _____ day of _____ 1897.

Executed in presence of _____ }

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ County.

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal this _____ day of _____ 1897.

Executed in presence of

_____

_____

Del. to Fulton Co. Nov. 1897

No. 21729

To Fulton Co 1897

INDIGENT PENSION

1897.

Name John A Sellars

County Cobb

Approved 1897.

WARRANT HANDED TO

G. W. Ballenger, Jr.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/22/97

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

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

Every Question MUST be Answered.

1. What is your name and where do you reside? (give State, County and post office) John A. Sellars Marietta Cobb County Georgia –
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? In Troup County Ga – about 60 years –
3. When and where were you born? 1836 in Troup Co Ga
4. When and where and in what company and regiment did you enlist or serve August 14th 1861. at Columbus Ga in Co "6" 17th Ga Regt –
5. How long did you remain in such company and regiment? August 14th 1861 to May 1st 1865 –
6. For how long a period did you discharge regular military duty? 3 years 8 1/2 months –
7. When, where and under what circumstances where you discharged from service? Surrendered to US Cavalry at Macon Ga April 20th 1865 – and was Paroled by Officer of same May 1st 1865 –
8. What is your present occupation? None
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? Clerk when I could work
11. Upon which of the following grounds do you base your application for pension, viz.: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Second
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? Suffered with pain in Head from 1865 to 1894 then dead bone developed near top of head, Operated on in 1894 taking out 2 to 2 1/2 square inches of bone. Wound Continued to discharge pus matter – My Condition, quite feeble & it takes but little exertion to prostrate me
13. What property, effects or income do you possess and its gross value? None –
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? None
15. In what County did you reside during those years and what property did you then return for taxation? Troup – Fulton and Cobb No Property –
16. How were you supported during the years 1895 and 1896? By my Friends –
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I do not Know – Friends Charges Nothing
18. What was your employment during 1895 and 1896? What pay did you receive in each year? No Employment – Received No Pay
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? No Family –
20. Are you receiving any pension, if so what amount and for what disability? No

Sworn to and subscribed before me this the 19th day of May 1897.

John A Sellars
Applicant.

Ordinary.

of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA.
Fulton County.

L C Keef, of said State and County, having been presented as a witness in support of the application of John A Sellers for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? L C Keef in Atlanta Fulton Co Ga
2. Are you acquainted with John A Sellers, the applicant, is of how long have you known him? Thirty seven Years
3. Where does he reside, and how long has he been a resident of this State? at Marietta Ga. Also ago
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Yes. I served with him in Virginia in Co C. 17th Ga Regiment
5. When, where and in what company and regiment did he enlist? in Aug 1861 Columbus Ga. Co C 17th Georgia Regiment
6. Were you a member of the same company and regiment? Yes
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? He served from August 1861 to May 1865. I know he was a good & faithful soldier. no better in the Army, Captured at Macon Ga April 1865
8. What property, effects or income has the applicant? (Give your means of knowledge.) None to my Knowledge
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? He had none to my Knowledge
10. What is the applicant's occupation and physicial condition? No occupation very poor physical Condition
11. Is the applicant unable to support himself by labor of any sort, if so, why? No he is not strong enough or healthy enough
12. How was he supported during the years 1895 and 1896? By his friends
13. What portion of his support for these two years was derived from his own labor or income? None
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He has not been a well man for 10 Years, and has not earned anything since 1891. on account of bad health.
15. What interest have you in the recovery of a pension by this applicant? None whatever

Sworn to and subscribed before me, this the 21 day of Jany 1897.

L C Keef Witness.

T. J. Lowery Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me C. J. Nolan and Gilbert Tennent, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully John A. Sellers, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows: Has a fine set of healthy teeth & stomach & bowels. Has shortness of breath & pain in the left side of the Pectoral performed three years ago for a disease of the Pleura three years ago. Has had rheumatism & protracted chills & fever. Has had disease of the heart & is not able to do labor of any kind. His muscular strength is totally impaired & he is entirely unfitted for Physical labor. Either of which produces a settling disease & prolongs.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 19 day of Jany 1897.

J M Stone Ordinary.

C. J. Nolan, M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J M Stone, Ordinary in and for said County, hereby certify that the applicant John A. Sellers resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: C. J. Nolan M. D. and Gilbert Tennent are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1895, Nothing dollars of property, and in 1896, Nothing dollars of property.

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

Witness my hand and seal of office. this 21st day of Jany 1897.

J M Stone Ordinary of Cobb County.

NOTE.

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

. . J. M. STONE, . .

Ordinary and Judge Probate.

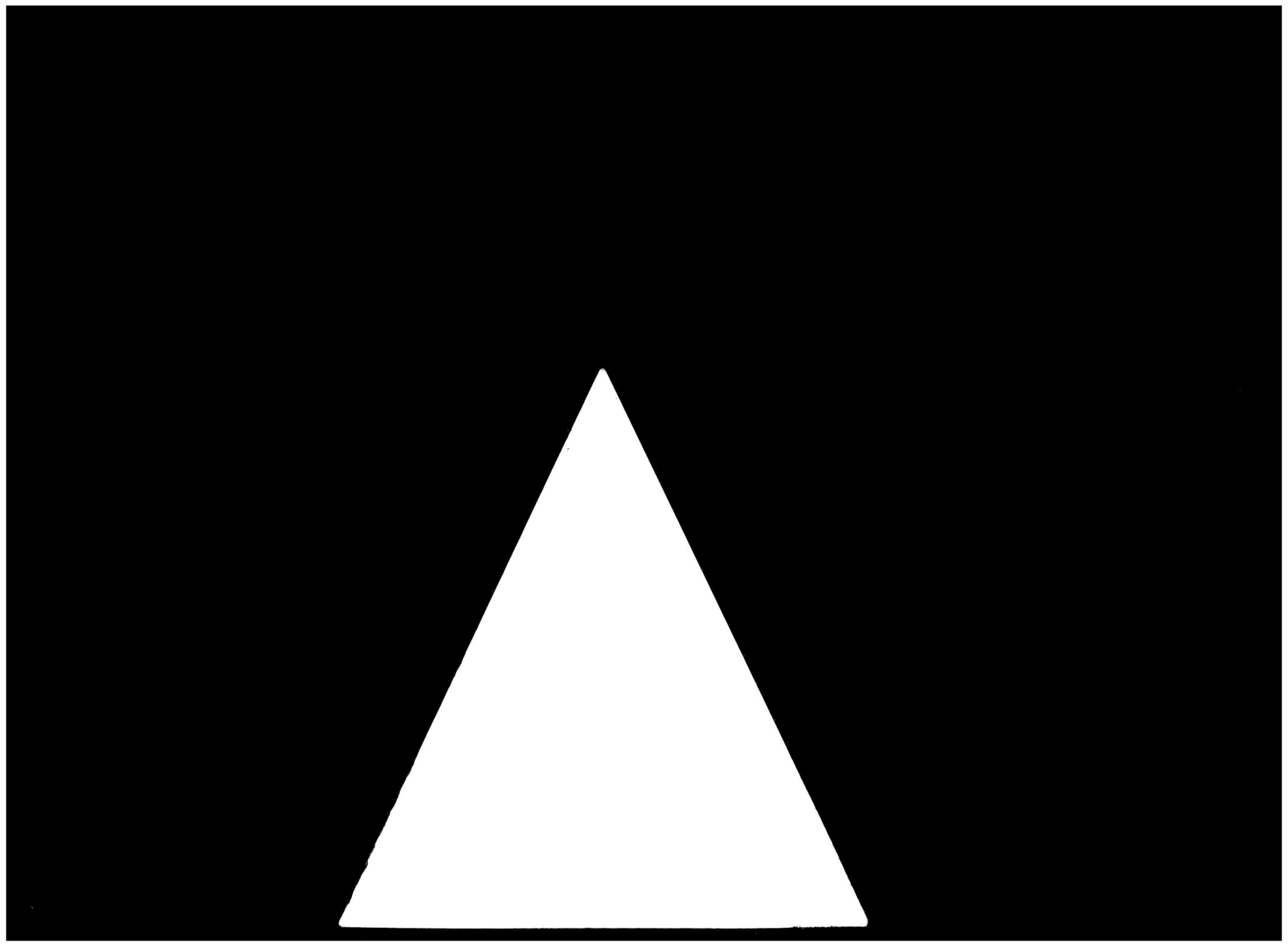
OFFICE OF ORDINARY,

COBB COUNTY, GA.

Marietta, Ga., Jan'y 31 1907

Richard Johnson
Pension Comr.
Atlanta Ga.—

Dear Sir:— I herewith enclose a pension application for John A. Sellers of this County and town. I have known Mr. Sellers for about two years—he is a nice gentleman and I believe deserves legally a pension—he is not disposed to intrude but as a matter of necessity asks for it and will appreciate the assistance if it can be legally granted to him. J. M. Stone Ord



Ordinary's Certificate

STATE OF GEORGIA,
Cobb COUNTY.

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

Sworn under my hand and official seal of office this day of October 1919

(SEAL) J M Garner Ordinary,
Cobb County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Setze E J Mrs
Oct 1920
No. Cobb Co

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Cobb
Name Mrs E J Setze
Widow of E J Setze
Company Ga Battalion Cadets
Regiment
Approved

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Ordinary's Certificate

STATE OF ~~GEORGIA~~,
Cobb COUNTY.

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

Sworn under my hand and official seal of office this [illegible] day of October 1919

(SEAL) J M Garner Ordinary,
Cobb County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Setze E J (Mrs) Apr 1920
No. Cobb Co

Widow's Pension
Under Act 1910—as Amended by Act of 1919.

County Cobb
Name Mrs E J Setze
Widow of E J Setze
Company Ga Battalion Cadets
Regiment
Approved

J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co., State Printers, Atlanta.
10/30-1919

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

Questions for Applicant

STATE OF ~~GEORGIA~~ Tennessee,
~~Cobb~~ Cobb COUNTY.

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

1. What is your name, and where do you reside? Mrs. E J Setze Marietta Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? 77 years Since Feby 1842
3. When, where and to whom were you married? Nov. 17th 1857 - Marietta Georgia Dr. Eugene J Setze
a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) In May 1864 At Marietta Ga - Georgia Battalion Cadets - Surgeon
5. When and where did the commands of your husband surrender or discharge from the army? May 20th 865 - Augusta Georgia
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes
7. If he was not present state clearly where he was? —
8. Where was his command when he left? —
a. For what cause did he leave his command? —
b. By whose authority did he leave his command? —
c. For how long was he granted leave of absence? —
e. What was his physical condition when he left his command? good
f. What effort did he make to return to his command? —
g. In what way was he prevented from going back to Command —
h. Was he captured by the enemy at any time? No
i. If so, when and where captured and where held as a prisoner, and when and for what cause released? —
j. When and where did your first husband die? May 30th 1907 Marietta
k. Were you residing together when he died? Yes
l. If not, how long had you resided apart? —
m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No
If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me this the 25 day of Oct 1919 Mrs E J Setze

J M Garner Ordinary
of Cobb County.

(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF ~~GEORGIA~~ Tennessee
Hamilton COUNTY

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

1. What is your name and where do you reside? W P McClatchey Chattanooga Tennessee

2. How long and since when have you known ~~Mrs~~ E. J. Seitze applicant? Since January 1862 to ~~the present~~

3. How long and since when has she continuously resided in this State? (Give date.) All her life

4. When and to whom was she married? Dr E. J. Seitze How do you know?

5. How long and since when did you know ~~Dr~~ E. J. Seitze her husband? Since 1862

6. When and where did Dr Seitze the husband of applicant, die? at Marietta Ga. Don't recollect date about [illegible]

7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes

8. If not, how long did they live apart before his death? Were they divorced? No

9. When, where and in what Company and Regiment, did Dr E. J. Seitze enlist? In May 1864 at Marietta Ga Georgia Battalion Cadets

10. Were you a member of the same Company? Yes

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Up to the surrender of Gen J. E. Johnston

12. When and where did his Command surrender, and was discharged? Augusta Ga May 20th 1865

13. Were you personally present when it was surrendered? No If not, where were you I had been transferred and how came you there? a short time before to Field Transportation Department Army of Tenn

14. Was the husband of applicant personally present at surrender? Yes If not where was he? When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? And how long was he granted leave? How do you know all this? It was my duty to look after supplies, and I know from the reports of officers made to our department.

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the 24 day of Oct 1919 W P McClatchey

Chas E Watson Cash Cor Cor ~~Ordinary~~
of Hamilton County.
(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,
Spalding COUNTY.

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

1. What is your name and where do you reside? W. E. H. Searcy. I reside at Griffin Ga

2. How long and since when have you known Mrs. E. J. Setze applicant? Have known of her since Feb 1862

3. How long and since when has she continuously resided in this State? (Give date.) Have known of her here since Feb 1862

4. When and to whom was she married? Nov 17 1857 How do you know? By reputation found her married in 1862

5. How long and since when did you know Dr. E. J. Setze her husband? Since Feb 1862

6. When and where did Dr. E. J. Setze the husband of applicant, die? Dont know: but enquired after him in Marietta & this said he was dead —

7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes

8. If not, how long did they live apart before his death? No

Were they divorced? No

9. When, where and in what Company and Regiment did Dr. E. J. Setze enlist? In May 1864, at Marietta Ga — Battalion of Cadets from Geo Mil Inst Wayne's Division Hardee's Corps Tobacco & Hoods Army

10. Were you a member of the same Company? Yes, Same Battalion

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Over a year

12. When and where did his Command surrender, and was discharged? At Augusta Ga in May 1865 — While we were defending the Confederate Arsenals Having evacuated Savannah after its surrender

13. Were you personally present when it was surrendered? Yes If not, where were you and how came you there?

14. Was the husband of applicant personally present at surrender? Yes If not where was he? — When, where and for what cause did he leave Command? (Give date.) — By whose authority did he leave his Command? — And how long was he granted leave? — How do you know all this? I was Orderly Sergent of Co A Bt of Cadets, & had charge of the sick Calls & reported to the Dr Daily personally — for nearly a year — I was promoted to Quarter master Sergt

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? —

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? —

Sworn to and subscribed before me this the 22 day of Nov 1917

J. A. Dunn Ordinary of Spalding County.

(SEAL)

W. E. H. Searcy
Late Quarter Master Sergt
Non Commission Staff —
Battalion of Georgia
Cadets —

J. A. Drury Ordinary
of Spalding County.
(SEAL)

Date Quarter Mast. Dept
Non Commission Staff —
Battalion of Georgia
Cadets —

SEWELL C.T. - Cobb County
OK for 1915
[illegible]
11/11-1914

No. .....

Confederate Soldier's Application.

UNDER ACT 1910.

County Cobb

Name C. T. Sewell

Company B.

Regiment Phillipps Legion

Approved .....

Wr filed Rosta

J. W. LINDSEY,
Commissioner of Pensions.

Office

CHAS. P. BYRD, State Printer, Atlanta.

10/31/1914

SEWELL, G.T. - Co. H, 63rd Georgia Infantry

No. 4

Confederate Soldier's Application.

UNDER ACT 1910.

County Cobb

Name G. T. Sewell

Company C

Regiment Phillips Legion

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

1/2/1914

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Cobb County.

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

1. What is your name and where do you reside? (Give County and Post-office) G. T. Sewell

2. How long and since when have you been a continuous resident citizen of this State? All my life 80 years

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Spring of 1862 Co. H. Phillips Legion Cavalry Col. McAnulty

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) until April 26 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? Greensborough N.C. April 26 1865

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were I was present

a. Where was your Command when you left it? Greensborough N.C.

b. When did you leave the Command? April 26 1865

c. For what cause did you leave? War was over

d. By whose authority did you leave? Joseph E Johnson

e. For how long was your leave granted? In what way?

f. Why did you not return to your Command after leave expired?

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war? No

j. If so, when, and where? In what prison were you held and when were you released?

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) Wife has Mortgage 320 acres $1200. I own 40 acres Value $60. Horse Furniture $150. One Cow & 2 yearlings Value $40. Mary wife received her property from her father

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemised list). Same property I had in 1908 Rent of 7 acres

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? Rent of 7 acres House lot in all $120

13. Are you drawing a pension of any amount from this State or the United States? No

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 6th day of October 1914

J. W. Brown Ordinary

of Cobb County.

G. T. Sewell
mark

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Cobb County.

John Tate of said State and County is hereby presented as a witness in support of the application of C. J. Sewell for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? John Tate Cobb County Ga
2. How long and since when have you known C. J. Sewell the applicant? Near 50 Years
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Marietta Cobb County Ga
4. When, where and in what Company and Regiment did C. J. Sewell enlist during war from 1861 to 1865? (Give date and place). I first knew him in Lemans 1862
5. How did you obtain your information of this Service? I was in the same Battalion and saw him daily on the Service
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Nearly 3 years. or until April 26 1865
7. When and where was his Command surrendered or discharged (give date and place) Greensboro N. C. April 26/1865
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there? I was present
10. Was the applicant personally present with his Command at surrender? Yes
11. If not where was he and how came him there? He was present
12. When did he leave his Command? At April 26/65 Where was his Command when he left it? Greensboro N.C. for what cause did he leave? War was over By whose authority did he leave ——— and how long was he granted leave? ——— How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I belonged to Same Battalion and worked Same
13. In what way was he prevented from returning to his Command? ——— How do you know? ———
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner No If so, when and where? ——— In what prison was he held? ——— and when released ———

Sworn to and subscribed before me, this the 6 day of October 1914
J. M. Gann Ordinary,
of Cobb County.

John Tate

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
Cobb County.

Personally before me comes ——— who on oath says that they are freeholders residing in said County and we know ——— the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.) His home 120 acres of land mostly cleared Value $1200 Personal Property Value $40 Cash Value $100 2 Horses Value $150 One Cow 2 yearling Value $40

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) None
2. When and to whom was it sold or given to? ———
3. What was the price paid or stated to be paid? ———
4. What relation is the party to applicant? ———
5. What disposition was made of the proceeds of the sale? ———
6. Was the disposition of this property made in good faith and full values? ——— or was it made to obtain a pension? ———

Sworn to and subscribed before me, this the 6 day of October 1914
J. M. Gann Ordinary,
of Cobb County.

W. A. Barfield
J. B. Barfield

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

J. M. Gann Ordinary of said County, certify that I know the applicant C. J. Sewell for Pension is the person he represents himself to be and resides in said County. That I also know John Tate the witness swearing to the service and W. A. Barfield & J. B. Barfield who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of Cobb shows that C. J. Sewell and wife value for tax is in 1908 $1425 for 1909 $——— for 1910 $——— for 1911 $1465 for 1912 $1465 for 1913 $1965

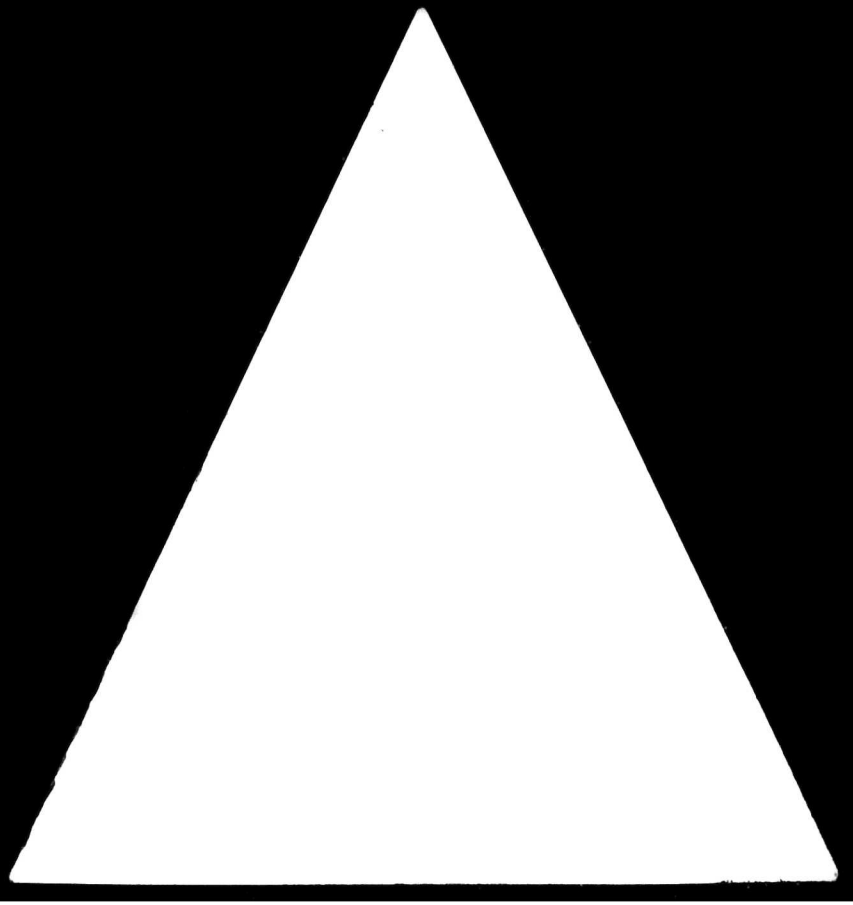
Sworn under my hand and official seal of office this 30 day of Oct 1914
J. M. Gann Ordinary,
of Cobb County.

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

day of 191

J. M. Gaines Ordinary,

of Cobb County.



Sewell, Mrs. Sgt. C.
Cobb County
Disappd'd 5/27-1909

1896.

No. .....

Widow's Pension.

For year ending February 15, 1896.

PAID TO

Mrs. C. T. Sewell

OF

Cobb County.

Widow of J. A. Sewell

Warrant Issued,

..... 1896.

AND HANDED TO

1/12/09

Pension Office
May 27-1909
It is not shown
the husband of
Applicant do the Pres
the need of the Seal
[illegible]
in [illegible]
[illegible]
[illegible]

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
..... COUNTY.

I, ... hereby authorize .....
of ..... to receive and receipt for the pension allowed and
request that he remit same to ..... at .....
by .....

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this .....
day of ..... 1908.

..... [L. S.]

Executed in the presence of

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize _____

of _____ to receive and receipt for the pension allowed and

request that he remit same to _____ at _____

by _____

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

day of _____ 1908.

_____ [L. S.]

Executed in the presence of

_____

Sewell Mrs. F. C.
Cobb County
Disappr'd 5/15/1909

1896.

No. _____

Widow's Pension.

For year ending February 15, 1896.

PAID TO

Mrs. C. T. Sewell

OF

Cobb County.

Widow of I. A. Sewell

Warrant Issued, _____ 1896.

AND HANDED TO

1/12/09

Form No. 1.

AFFIDAVIT TO BE MADE BY THE WIDOW.

STATE OF GEORGIA,

COUNTY OF Cobb

THE INSTRUCTIONS AS SET OUT IN THE NOTES, MUST BE OBSERVED.

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

Mrs. T. C. Sewell, who being sworn according to law, says under oath that she is the widow of Isaac A. Sewell, who was a soldier in the service of the Confederate States, and served as a member of Company B, of the Phillips Legion Regiment of Ga Volunteers; that he enlisted in said service on or about the _____ day of January 1862, and was in the Confederate Army up to April 1865. That while in the Army, he on the In the Spring of 1862, (See Note No. 1) in Atlanta, Ga. he contracted measles, that disabled him from service for several months. In July of 1862 he rejoined his command on the Coast at Camp Elzie. Soon afterwards the command was sent on to Virginia. After reaching Virginia he relapsed with measles, and his health was wholly undermined. He was eventually sent to hospital as a nurse, and stayed till close of war. After the war he returned home broken in health and never recovered. He was in bad health all his after life and finally died as a result of the disease contracted in the service, on June 5th 1907.

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 _____ th day of _____ 1859, and that she has resided in Georgia continuously since the _____ day of _____ 1859; 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, 1908, and herewith tenders the proof of her right to receive the pension granted by said Act.

Sworn to and subscribed before me, this the 14 day of Nov. 1908.

T. C. Sewell

John Dwtny
Ordinary.

Post Office, Smyrna.

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

NOTE 2.—The Ordinary will see that ALL blank spaces are filled before the affidavits are signed.

Form No. 2.

Affidavit for Three Witnesses.

STATE OF GEORGIA, } In person came before me, the undersigned Ordinary in and
COUNTY OF ..... } for said County, witnesses .....

and .....(each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, FROM THEIR OWN PERSONAL KNOWLEDGE, Mrs. ....., now a resident of the County of ..... State of Georgia, is the widow of .....who was a soldier in Company ..... of the ..... Regiment of ..... Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the ..... day of ..... 186..... That while in said service or by reason of said service in the Army, he lost his life as follows: .....

Our opportunity for knowing the facts stated in reference to death of applicant's husband were .....

We further swear that Mrs. .....was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resided in said State of Georgia on the 23d of December, 1890, and that she has so continued to reside up to this date.

We further swear that we have no personal interest in the pension asked for.

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

.....
Ordinary.

NOTE 1.—Witnesses must not testify about things they may believe, but confine their statements to such facts as they personally know.

NOTE 2.—If the husband died after the war of wounds or disease, state fully and particularly how you, as witnesses, know the service as a soldier was the immediate cause of his death.

NOTE 3.—All blank spaces must be filled when signed.

Form No. 3.

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

STATE OF GEORGIA, } I, John Dunlap Ordinary
COUNTY OF Cobb } in and for said County of Cobb

State of Georgia, hereby certify that I am acquainted with Mrs. T. C. Sewell 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, to-wit: C. T. Sewell, J. A. Anderson and A. S. Barker, whose testimony she presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith and credit as such, and that the full text of the affidavit was read to and understood by them before same was signed. I am fully satisfied that this claim is made in good faith, and 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 14 day of Nov. 1908.

[SEAL] John Dunlap 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.

No pension can be paid for previous years.

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.**

If the husband died since the war testimony by physicians must be produced.

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

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

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

If proofs must be made out of the State, the witnesses must be sworn before a **Judge of a Court of Record under Seal,** and the witnesses must be certified to as reliable, and that their signatures are genuine.

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

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

Widows whose husbands enlisted from another State or served in other Commands than Georgia Commands are not entitled to pensions unless they were born in Georgia and can make proof of that fact.

By order of the Governor.

RICH'D JOHNSON,
Sec. Ex. Department.

Form No. 2.

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA,
Cobb County.

Personally appears before me, the undersigned Ordinary in and for said County, J A G Anderson C T Sewell and A S Coker personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say under oath, that they are personally and well acquainted with J A Sewell whose application is herewith presented for a pension, that he has resided in this State continuously since the day of 1860, that he served in Company B of the Phillipps Legion Regiment of Hampton's Brigade, and from our personal knowledge he, while in line of duty, was injured by the service as follows: (*give full statement, and tell in your own language when, where, and how the injury happened, or the disease was contracted, and to what extent applicant is disabled from work as a direct result thereof. If he does any labor or can do any, state what.*)

He had bladder trouble, and he had sores or risings all over his body. On account of which he was relieved from active service and sent to Hospital to act as a nurse as far as able. He was a faithful and good soldier, allways at his post as long as he was able. After the war he never recovered from his trouble contracted in the war up to time of his death

[illegible] at he [illegible] measles and the war [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] with measles + was [illegible] [illegible] [illegible] never [illegible] [illegible] [illegible] [illegible]

Where was applicant's command surrendered? Appomattox

Was he with it? Were all of you present? Yes

If not, where was he? He had been detailed as a hospital nurse a short time before the surrender on account of his health

Where were you all? I was present at surrender

How do you know the facts you state to be true? I was with him in the war and knew him until his death

We personally know above stated facts. We were with him in the army and have known him ever since.

He was honorably discharged or retired from the service on At close of war. day of 186 . Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 18 We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this 14 day of Nov. 1908
John Awtry
Ordinary.

John A G Anderson
C. T. Sewell
A. S. Coker

Note 1.—The Ordinary will see that the full text of the affidavit is understood by the witnesses, and that they are legally qualified to the same.
2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.
3.—All blank spaces must be filled when signed.
4.—Three witnesses are required.

Form No. 3.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA,
Cobb County.

Personally comes before me John Awtry Ordinary of said County, W. M. Kemp M.D. and , both known to me as reputable physicians of said County, who, being severally sworn, say on oath, that they have carefully examined and after such personal examination, say that the present condition of applicant is as follows: I attended J. A. Sewell in his last illness. He had albumenuria. Was stricken with paralysis and lived about clear months and had a second stroke from which he died

and that such condition is permanent. Said condition arises from the following facts: Cause was unknown.

We have treated applicant professionally for One years, and his condition, as above stated, does arise from hereditary or congenital causes, or from vicious or intemperate habits.

Sworn to and subscribed before me, this 14 day of Nov. 1908
John Awtry
Ordinary.

W. M. Kemp M.D.
Gilbert [illegible] M.D.

Note 1.—*State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state its location, character and present condition. If from disease, give its nature and character, and its causes or origin, as understood by affiants.*
Note 2.—The physicians will be careful to fill every blank space in oath.

Form 4

STATE OF GEORGIA.
County.

I, , Ordinary of said County, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and he is disabled, as he claims*, and I know he is the individual he represents himself to be, and that he resides in this County and has been a bona fide resident since the day of 18

I also certify that the witnesses, to-wit:

and are persons of respectability, that their statements are worthy of full credit and belief, *and that the full text of the affidavit was read to and understood by them before they signed the same.*

Given under my official signature and seal, this day of 190

Ordinary County.

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

AFFIDAVIT OF THREE WITNESSES.

STATE OF GEORGIA, COUNTY OF COBB. } In person came before me, the undersigned Ordinar in and for said county, witnesses A.S. Barker, John A.G. Anderson, and L.W. Fowler, (each known to said attesting officer as truthful, reliable and reputable citizens), who severally say under oath, that, FROM THEIR OWN PERSONAL KNOWLEDGE, Mrs. Theresa C. Sewell, now a resident of the county of Cobb State of Georgia, is the widow of Isaac A. Sewell who was a soldier in Company B of Phillips Legion and afterwards of Phillips Legion Cavalry regiment of Georgia volunteers. The said soldier enlisted in the service of the Confederate States, (or the Georgia State Troops), on or about the 29th day of April 1862. That while in said service or by reason of said service in the Army, he died on the 5th day of July 1907, from the following causes: He was Stricken with Severe type of Black Measels in May 1862 and after he became convalescent had a relapse. He never fully regained his health but continued to serve. He was sent to the hospital several times from this cause. He served until [illegible] and surrendered [illegible] in April 1865. He was more or less feeble from this cause until his death, which occurred on the 5th of July 1907 and Knew he was never a sound man after this illness from Measels.

Our opportunity for knowing the facts stated in reference to the death, applicant's husband were that We were in the Service with him in the Same Company & Knew of his Service in the Phillips Legion Cavalry until the Surrender & Knew him up to his death. & Knew said husband from a Soldier as man & boy Since prior to the war between the States

We further swear that she became the wife of said soldier husband on the ___ day of ___, 18__, and so remained until his death, since then she has not again married, and that she resided in said State of Georgia continuously ~~since the ___ day of~~ all her life.

We further swear that we have no interest in the pension asked for.

A.S. Barker
John A.G. Anderson
L.W. Fowler

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

J.M. Gann
Ordinary Cobb County.

AFFIDAVIT TO BE MADE BY THE WIDOW.

STATE OF GEORGIA, COUNTY OF COBB.

In person came before me, the undersigned Ordinary in and for the County of Cobb, Mrs. Theresa C. Sewell, who being sworn according to law, says that she is the widow of Isaac A. Sewell who was a soldier in the service of the Confederate States, or Georgia State Troops, and served as a member of Company B, of the Phillips Legion Regiment, Georgia Volunteers; That he enlisted in said service, on or about the 29th day of April 1862, and was in the Army of the Confederate States up to 26th of April 1865. That while in the Army he was on the Summer of 1862 day of ___ 186__ He was Stricken with a Severe type of black Measles and after apparent recovery he had a relapse. He never entirely recovered but continued to serve as best he could until the close of the war. He had frequent returns of the effects of this disease and was sent several times to the hospital during his service in the army. His death which occurred on the 5th day of July 1907 caused from the disease thus contracted and from the effects of which he was ever afterwards a Sufferer — and from the effects of which he at last died

Deponent further sewars 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 20 day of December 1860, and that she was born in the State of Georgia, and has resided in the State of Georgia continuously since the 14th day of February 1833; that Georgia is her home, and was such on the 14th day of February 1933 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 the Acts of the General Assembly of Georgia, approved ___, ___, ___, for the pension year ending ___, ___, and herewith tenders the proof of her right to receive the pension granted by said Act.

Theresa C Sewell

Sworn to and subscribed before me, this the 21 day of October 1913.

J.M. Gann
Ordinary of Cobb County.

Georgia
Cobb County } I J. M. Gann Ordinary of said County Certify that the Records of this Office including Book of Marriage Licenses, were destroyed by the Federal Army during Shermans Campaign in this State in 1864.

J M Gann
Ordy

Marietta Ga Nov 2nd 1915

My dear Judge - Yours rec^d Stating you enclosed papers of Mr Massey and Mrs Sewell. I find Massey papers but you overlooked the Sewell paper - Please send by return mail & I will make Corrections & see you on Friday Morning - Best wishes to the entire household -

Sincerely Yr Friend
Thos B. Irwin

Marietta Ga Nov 3rd 1915

My dear Judge: I wrote you that I did not find Mrs Sewell's application enclosed with the Massey paper & hoped to have heard from you so that I could return them tomorrow in person - but have not heard from you. Please send it so that I can do what we is needed so that I can go down on Tuesday -

Your Friend
Thos B. Irwin

Sewell. Theresa C.
Sewell Solomon Cobb Co.
Oct 1914
Widows Pension -

Mrs L. Sewell
Cobb County
Company B. Phillips Legion
B. Phillips Legion

11/1/15

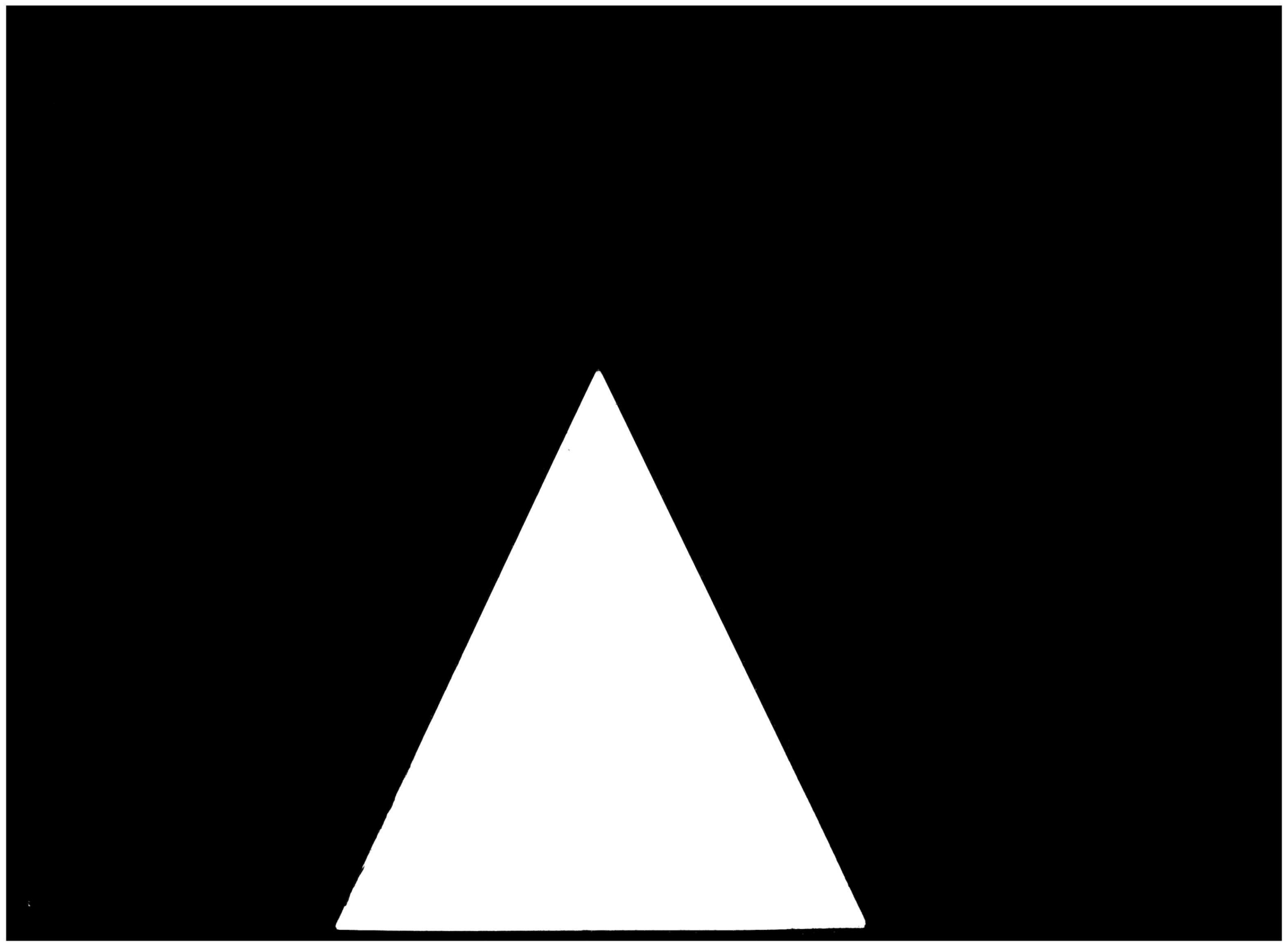
CERTIFICATE OF THE ORDINARY OF THE THE COUNTY OF APPLICANT'S RESIDENCE.

State of Georgia,
County of Cobb.

I, J. M. Gann, Ordinary in and for the County of Cobb, State of Georgia, hereby certify that I am acquainted with Mrs. Frances C. Sewell the applicant for a pension in this case, and know from my own knowledge, that she resides in this county, and that she has resided in the State of Georgia since the before the civil war day of up to date, and has not lived out of the State since that date. I do certify that the witnesses A. S. Coker John A. G. Anderson, and L. W. Fowler, whose testimony she presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith and credit as such, and that the full text of the affidavit was tead to and understood by them before the same was signed. 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 my the seal of my office, this the 27th day of October, 1915.

J. M. Gann
Ordinary of Cobb County.



Sewell C. William M.
Cobb Co.
Sewell William M.
No. 2

INDIGENT PENSION

1897.

Name W. M. Sewell

County Cobb

Approved Sept 1 1900 1897.
Nov 1901

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/18/1900 1/30/97
9/4/97 - 3/13/99

Pension Office 5/11 1897
Proofs of infirmity are not full enough
Richd Johnson
Com of Pensions

Pension Office 8/1 1898
The amending proofs do not make a clear case of infirmity - Witnesses are required who speak from personal knowledge - Only sworn testimony can be considered - Richd Johnson
Com of Pensions

Pension Office 7/11 1899
Not entitled -
Richd Johnson
Com of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

I, W. M. Sewell hereby authorize J. M. Stone of Marietta Ga to receive and receipt for the pension allowed and request that he remit same to J. M. Stone at by J. M. Stone

Witness my hand and seal this 15th day of Jan 1897.

Executed in presence of
W. N. Edwards } W. M. Sewell

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Wm M. Sewell hereby authorize
Wm M Stone of Marietta Ga
to receive and receipt for the pension allowed and request that he remit same to Same
at by Same

Witness my hand and seal this 14 day of Jan 1897.

Executed in presence of
H. A. Culberson
Wm M Sewell

Pension Office 5/11/1897
Your application
not sufficient
Clerk Pensions

Pension Office 8/11/1897
The annuity you
do not make you a
case of infirmity -
Witness are required
who shall from personal
knowledge testify
to the nature and extent
of your disability.
Clerk of Pensions

Pension Office 2/11/1898
Your application
returned
Clerk of Pensions

Every Question MUST be Answered.

Questions for Applicant.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office) William Sewell Cobb Co Ga
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Cobb Co all my life
3. When and where were you born? in Cobb Co Ga 1842
4. When and where and in what company and regiment did you enlist or serve in May 1861 in 7th Ga Regiment Co K
5. How long did you remain in such company and regiment? 4 years
6. For how long a period did you discharge regular military duty? 4 years
7. When, where and under what circumstances where you discharged from service? Surrendered with Gen Lee
8. What is your present occupation? Farmer
9. How much can you earn (gross) per annum by your own exertions or labor? $250.00
10. What has been your occupation since 1865? Farmer
11. Upon which of the following grounds do you base your application for pension, viz,: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Infirmity
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? Cut & drawn sick Paid to Leave Cobb Co unless they was
13. What property, effects or income do you possess and its gross value? Non
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? Non
15. In what County did you reside during those years and what property did you then return for taxation? in Cobb Co Non
16. How were you supported during the years 1895 and 1896? by my family
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? about $60.00 I contributed at $25.00 per year
18. What was your employment during 1895 and 1896? What pay did you receive for each year? Farmer
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have wife & 7 children on 20 acres they have all property
20. Are you receiving any pension, if so what amount and for what disability? —

Sworn to and subscribed before me this the 16 day of Jan 1897.
W. M. Stone Ordinary.
of Cobb County.

Wm M Sewell
Applicant

Sewell Wm. M.
Co K 7 Ga Cav
Pension Office

INDIGENT PENSION
1897.

Name Wm M Sewell
County Cobb

Approved Jan 19 1897.
Dr 1897

ERO 4 1.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/18/1897 - 1/30/97
9/4/97 - 3/13/97

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me, Robt R. Murray and C. Vaughan, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully William M Sewell, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows: That he is disabled from Rheumatism from doing more than one fourth days work We have treated him for Rheumatism for four or five years

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 19 day of Jan 1897. Robt R. Murray
J. H. Stone Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J. H. Stone, Ordinary in and for said County, hereby certify that the applicant, W. M. Sewell resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: W A McElwreath, J W Rakestraw, W N Edwards, Robt R Murray & C Vaughan are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1895, Nothing dollars of property, and in 1896, Nothing dollars of property.

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

Witness my hand and seal of office, this 19 day of Jany 1897.
J. H. Stone Ordinary
of Cobb County.

NOTE.

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

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb County.

W A McElwreath, J W Rakestraw and W N Edwards, of said State and County, having been presented as a witness in support of the application of William Sewell for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W A McElwreath Cobb Co Ga J W Rakestraw and W N Edwards of Cobb Co Ga
2. Are you acquainted with W M Sewell, the applicant, is of how long have you known him? Yes Since 1861
3. Where does he reside, and how long has he been a resident of this State? Cobb County 1860, never lived out of the State
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? I served with him in the Army
5. When, where and in what company and regiment did he enlist? enlisted at Powder Springs Ga May 1861, Co. D 7th Geo Regt.
6. Were you a member of the same company and regiment? I was
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Served faithfully four years, and surrendered at Appomattox Va.
8. What property, effects or income has the applicant? (Give your means of knowledge.) Has No property — We are neighbors to him
9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same? Nothing but a Cow — She went to a Creditor for debt for support
10. What is the applicant's occupation and physicial condition? Farmer — We Consider him not able to do much work — he is crippled and infirm
11. Is the applicant unable to support himself by labor of any sort, if so, why? We do not believe he is — because he is Crippled in both hands and arms and is Physically infirm
12. How was he supported during the years 1895 and 1896? Partly by his work and partly by his children
13. What portion of his support for these two years was derived from his own labor or income? Very little — Not half of it
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is getting old — is Physically unable to do much work & is Crippled in both Arms and Hands and has No property nor income
15. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 19 day of Jany 1897. W A McElreath Witness. Nos 1. 2. 3. 4. 5. 6. 7. & 15
J. H. Stone Ordinary
J. W. Rakestraw
W. N. Edwards witness as to Nos 8. 9. 10. 11. 12. 13. 14.

Moon P. O.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W M Sewell hereby authorize John Autrey of Marietta to receive and receipt for the pension paid hereon and request that he remit same to by hand at to Marietta

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 15th day of 15 January 1899.

W M his Sewell Mark [L. S.]

Executed in presence of
Jos M Gorm

Sewell William M.
Cobb Co

CODE SECTION 1250.
(For These Already Enrolled.)

No. 2043

Indigent ~~INVALID~~

SOLDIER'S PENSION.
1901
1899.

Name W M Sewell
County Cobb.
Disability Indigent
Amount, 1/3 a 6 Co
1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Autrey

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Indigent blanks
Shanstal
no data

Additional Testimony 1899.

Georgia
Cobb County:

Personally appeared before me the Undersigned, John M. Stone Ordinary in and for said County F. M. Hardage who being duly sworn says, that he has been a near neighbor of Wm. M. Sewell for a number of years and is intimately acquainted with him, That he frequently sees him and is associated with him, Deponent of his personal Knowledge Knows that said William M Sewell is practically and essentially incapable of making a living by manual labor on account of his physical infirmity. Deponent says that the leaders of his hands and wrists are so contracted and drawn that that he can not hold farm implements in his hands so as to enable him to work with them. That he deponent has seen the applicant try to plow & that he could not do it on account of said infirmity = and this condition applies to the use of an axe, hoe or other implement requiring manual labor. Deponent further says that said applicant is an infirm man and incapable of manual labor.

F. M. Hardage

Sworn to and Subscribed before me this February 25th 1899.

J. M. Stone Ordy.

Ordinary's Office Cobb County. Feby 25th 1899.

I certify that F. M. Hardage is a reputable citizen and his statements are entitled to full faith and credit.

J. M. Stone
Ordy.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears W M Sewell of Cobb 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 Since 1837; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company [illegible] of 7th Regiment of Georgia Volunteers Anderson's Brigade; that whilst engaged in such military service in the State of 4 Years likely 9 days on the day of 186 , he was wounded, injured or diseased as follows:

On account of Infirmity and poverty he is unable to support himself

No property

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 Cobb County been ~~allowed~~ Enrolled ~~an invalid~~ pension of 60 00 Dollars, for the year 189 .

Sworn to and subscribed before me, this, the 15th day of January 1899. POST OFFICE

W M his Mark Sewell

John Awtrey

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,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with W M Sewell 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 21st day of Jany 1899.

Affix your seal here

John Awtrey
Ordinary Cobb County.

I have advanced five dollars on this pension —

Additional Testimony 1899

State of Georgia
Cobb County

Personally appeared before me the undersigned J. N. Moon Jr and A. C. Moore who being duly sworn say that they have a near [illegible] to Wm M. Sewell for a no. of years and are intimately acquainted with him, That they frequently see him and are associated with him.

Deponents of their personal knowledge know that said William Sewell is practically and essentially incapable of making a living by manual labor on account of his pysical condition. Deponants say that the leaders of his hands and rist are so contracted and drawn that he can not hold form implements in his hands so as to enable him to work with them. That this condition applies to the use of an axe, hoe or other implements requiring manual labor. Deponant futher say that said applicant is an infirm man and incapable of ma[illegible] labor.

Sworn to and Subscribed to before me, This March 4th 1899
J. M. Stone
Ordny

J. N. Moon Jr.
A. C. Moore

Cobb Co. Georgia:
I Certify that J. N. Moon Jr and A. C. Moore are worthy of full faith and credit as witnesses. J. M. Stone Ordy.
Mch. 4th 1899.

Georgia Paulding County.

Personally appeared before the undersigned J.D. Moore who on oath says that he has been near neighbor of Wm. M. Sewell for a number of years and is intimately acquainted with him, that he frequently sees him and is associated with him.

Deponent of his personal knowledge knows that said Wm. M. Sewell is practically and essentially incapable of making a living by manual labor, on account of his physical infirmity. Deponent says that the leaders of his hands and wrists are so contracted and drawn that he cannot hold farm implements in his hands so as to enable him to work with them. And this condition applies to the use of an ax hoe or other implement with which to do manual labor. Deponent further says that said applicant is an infirm man and incapable of manual labor.

Sworn to subscribed before me Mch 11th 1899.

A. P. Hudson Ordy. of Paulding Co. Ga.

J. D. Moore
Mark

Ordinary's Office Paulding County.

I certify that J.D. Moore whose name appears to the foregoing affaire is a reputable citizen of said county and his statements are worthy of full credit and faith.

A. P. Hudson, Ordy. of Paulding Co. Ga.

Georgia Cobb County:

In person appears W. B. Sorrells a resident of said County, who on oath says that he is a neighbor to Wm. M. Sewell this applicant for pension, and has known him for many years — he was wounded in the hands and arms by being cut up by a saw mill — he is physically disabled by rheumatism and by the wounds from the saw mill, and by disease and age so much so that he is unable to do but very little work not near a sufficiency to support himself — he has no property nor income, nor any means directly or indirectly with which to support him. I for my part had to advance to him some money to buy for him a pair of shoes and trust him to

State of Georgia, Cobb Co. } Additional Testimony 1900

Personly appeared before me the undersigned John M. Stone, Ordy. in and for said County A. C. Moore who being duly sworn says he lives in one eighth of a mile of Wm M Sewell and has known him for 5 years and is intimately acquainted with him. That he frequently see him and is associated with him.

Deponent of his personal knowledge knows that said Wm M Sewell is practically and essentially incapable of making a living by manual labor of any kind on account of his physical infirmity.

Deponent says that the tenders of his hand and rists are [illegible] that he cannot hold tools in [illegible] him to work with them.

Deponent further says that applicant is in infirm [illegible] affected with a smart ring and shortness of breath [illegible] something [illegible] at intervals and quite sudden, and so severe that he has to sit or [illegible] for some time before [illegible] go on.

Deponent further says that he knows applicant to be [illegible] a destitute condition, being almost barefooted [illegible] means for a support for the insuing [illegible] and that said applicant is in good faith and [illegible] and incapability of making [illegible] that he wishes to avail himself of a pension.

Deponent [illegible] That applicant would not [illegible] he did not feel the need [illegible] applied to such [illegible] himself.

Sworn to and subscribed before me this 13th Jany 1900 J.M. Stone Ordy

A. C. Moore

I certify that A. C. Moore is a reputable citizen and his statements are entitled to full faith and credit

J.M. Stone
Ordy.

Pay it back in littles as he may be able.

The applicant is decidedly in needy circumstances and needs help.

There is nothing hidden nor evasive about this case nor the representations made concerning it.

This mans condition is of such a nature that if the State does not allow him a pension the neighborhood will be called on to assist him.

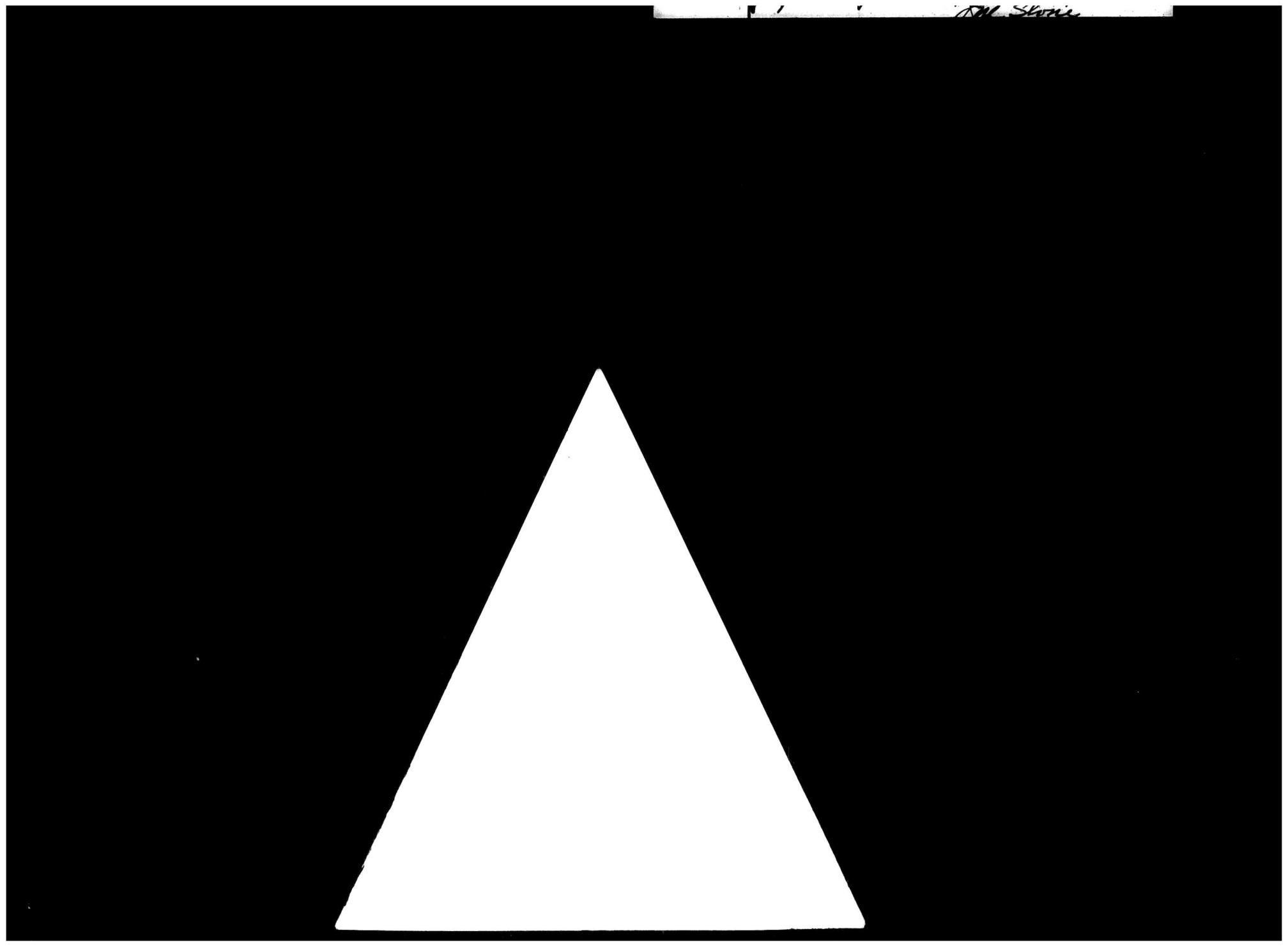
Sworn to and subscribed before me this 17th day of Jany. 1900 J.M. Stone Ordny

W. B. Sorrells

Georgia Cobb County

I certify that W. B. Sorrells is a resident of Cobb County and as a witness is worthy of full faith & credit.

J.M. Stone



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

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

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

7. No payments can be made for any past year.

W. H. HARRISON,
Clerk Ex. Dept.

Shaw, A. J.
Co. H. Co
Shaw, A. J.
1890.

No. 2657

APPLICATION FOR ALLOWANCE

FOR

Leg Amputated

Applicant, A. J. Shaw

County, Scott

Amount, 50

Date of Warrant, Mch 31

Entered on record Mch 31 1890

Acct

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

Applicant

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

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.
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4. If the 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.
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6. The Ordinaries of the several counties are specially requested to call the attention of the physicians and applicants to these points.
7. No payments can be made for any past year.

W. H. HARRISON,
Clerk Ex. Dept.

Shaw, A. J.
Cobb
Shaw

1890.

No. 2657

APPLICATION FOR ALLOWANCE

FOR

Leg disabled

Applicant, A. J. Shaw

County, Cobb

Amount, 50

Date of Warrant, Mch 31

Entered on record Mch 31 1890

Cobb

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

applicant

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

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears A. J. Shaw of Cobb county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been continuously since the 10 day of Feby 1855; 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 Miles, of Miller th Regiment of Ga Volunteers Brigade; that whilst engaged in such military service at the battle of Smithfield in the State of N. C, on the 5th day of April 1864, he was wounded as follows: He was shot through the knee by a piece of shell, the shell broke the knee bone, several large pieces of the bone came out, a large knot was left on the knee, the the leg was left crooked in the joint, is stiff, deponent is compelled to walk with a stick, the leg is substantially and essentially useless by reason of the injury - deponent was also shot through left arm and in the head -

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 thereunder, ending October 26, 1890.

Sworn to and subscribed before me this the 25 day of Mch 1890

A. J. Shaw his mark

J. J. Shaw Ordinary.

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

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA,
County.

PERSONALLY came before me of the county of State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company , of Regiment of Volunteers, and that deponent knows , and that he received the wounds (or contracted the disease) in the military service, as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said as stated by him in said affidavit. Deponent further states that said is a *bona fide* citizen of this State and resides in county.

Sworn to and subscribed before me this day of 1890.

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,
Cobb County.

PERSONALLY came before me a Justice of the Peace in Cobb county, J. H. Sauls & W. L. Richardson citizens of Cobb county, in said State, who being duly sworn, say that they are well acquainted with A. J. Shaw and *know, from having been with him in the army*, that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disabled applicant, as stated by him; the said applicant is a *bona fide* citizen of this State, and resides in Cobb county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this 29th day of March 1890.
G. W. York J.P.

J. H. Sauls
W. L. Richardson
A. O. Tolleson

NOTE.—Above affidavit *must* be made by three citizens who *personally* know of the service of applicant and can state of their *own* knowledge precisely how he is *disabled*, and what disables him.
NOTE 2.—The attesting officer must see that each witness reads, or has *read to him the affidavit he signs*.

STATE OF GEORGIA,
Cobb County.

PERSONALLY comes before me John M. Stone Ordinary of said county, Dr. A. A. Gober and E. J. Setze, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined A. J. Shaw and after such examination say that the applicant has been injured as follows:

He was injured by shell in left leg in knee joint — the bones were broken, pieces of bone came out, knee joint is stiff and leg is crooked in joint, a large knot is on knee joint — the leg is almost useless and is substantially & essentially useless — He was shot in the left arm and on top of the head and his application seems to be unintentional

Sworn to and subscribed before me, this 29 day of Mch 1890
J. M. Stone Ordinary.

E. J. Setze M.D.
A. A. Gober M.D.

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

STATE OF GEORGIA,
Cobb County.

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

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

Given under my official signature and seal, this 29th day of Mch 1890.

J. M. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

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

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

[L. S.]

Executed in the presence of us:

DIRECTION.

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

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with A. J. Shaw the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and that he is disabled, to the extent he claims*, and I know he is the individual he represents himself to be, and that he resides in this County.

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

Given under my official signature and seal, this 12th day of Feby 1891.

J. M. Stone
Ordinary Cobb County.

Shaw, A. J.
Cobb Co.

1891.
Shaw, A. J.
Cobb Co.

No. 1001

Application for Allowance

FOR THE YEAR ENDING OCTOBER 26, 1891.

FOR

Dis'd by fedy named

Applicant A. J. Shaw

County Cobb

Amount $50

Date of Warrant Feby 11/

Entered on record 7/11 1891

Mch 14/11

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

Applicant

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

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said county, do certify that I am well acquainted with A. J. Shaw 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 repesents himself to be, and that he resides in this county.

Given under my official signature and seal, this 4th day of Mch 1892

J. M. Stone
Ordinary Cobb County.

Cobb Co.
Shaw, A. J.
No. 676

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 26, 1892.

Name A. J. Shaw

County Cobb

Disability Dis'd by Dr'd

Amount, $50

Entered on record Mch 4 1892.

W. H. HARRISON,
Secretary of Executive Department.

No. 1001

AGENT.

Applicant

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears A. J. Shaw of Cobb 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 65; 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 Echols Artillery or Regiment of Ga, Volunteers 's Brigade; that whilst engaged in such military service at the battle of Smithfield in the State of N. C., on the 10th day of April 1865 he was wounded as follows: By piece shell striking left knee bone By ball in left — also by ball striking on side of head Causing Shock, And by bullet striking left arm near wrist, Crushing small bone of the arm. On account of said wounds respondent is rendered incompetent to perform the Ordinary Manual avocations of life. Walks with stick all the

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 ____ $50. dollars, for Dis to Disabilities

Sworn to and subscribed before me, this the 2 day of July 1891. — A. J. Shaw

W. L. Glover Ordy,

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, }
____ County. }

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

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

____ [L. S.]

Executed in the presence of us: }
____ }
____ }

DIRECTION.

Send money to me as follows, by ____

____ to ____ P. O.

____ County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears A. J. Shaw of Cobb 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 14th day of Feby, 18 61; 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 ____, of 2d Ga Artillery Regt Volunteers ____'s Brigade; that whilst engaged in such military service at the battle of Smithfield in the State of N. C., on the 10th day of April 1865 he was wounded as follows: By shell, grape bullets, striking top of the head, left knee & left arm. Left knee joint fractured and bones shattered — left arm was torn from the bones rendering Deponent is practically incompetent to perform the Ordinary Manual labors of life

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of $50. Dollars for Disabilities

Sworn to and subscribed before me this the 4th day of March 1892. — A. J. Shaw

W. L. Glover 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, }
____ County. }

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

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

____ [L. S.]

Executed in the presence of us: }
____ }
____ }

DIRECTION.

Send money to me as follows, by ____

____ to ____ P. O.

____ County, Georgia.

County, Georgia.

County, Georgia.

Cobb

Maimed Soldiers.

Voucher No. 2657

Amount $ 50

Paid to A. J. Shaw

For Leg dis'd.

Mch 31 1890

Included in warrant No.

issued to Treasurer.

, 18

WARRANT CLERK.

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

Applicant

Audited 18

COMPTROLLER-GENERAL

Audited 1891.

COMPTROLLER-GENERAL.

Shaw, A. J.
Cobb

1891.

Maimed Soldiers.

Voucher No. 1001

Amount $ 50.

Paid to A. J. Shaw

For Disabled by
loss of hand

Feby 17 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

No. 2657.

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga., Mch 31 1890

Mr. A. J. Shaw of the County of Cobb 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 Leg disabled

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
C. N. Hamson
CLERK EXECUTIVE DEPARTMENT.

$50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty Dollars,

per above voucher, this 31 of Mar 1890

A. J. Shaw

1891.

No. 1001

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Feby 17 1891.

Mr. A. J. Shaw of the County of Cobb 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 Dis'd by body wounds

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

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

PAID TREASURER'S OFFICE STATE OF GEORGIA

W. J. Northen
GOVERNOR.

By the Governor.
C. N. Hamson
SEC'Y EXECUTIVE DEPARTMENT.

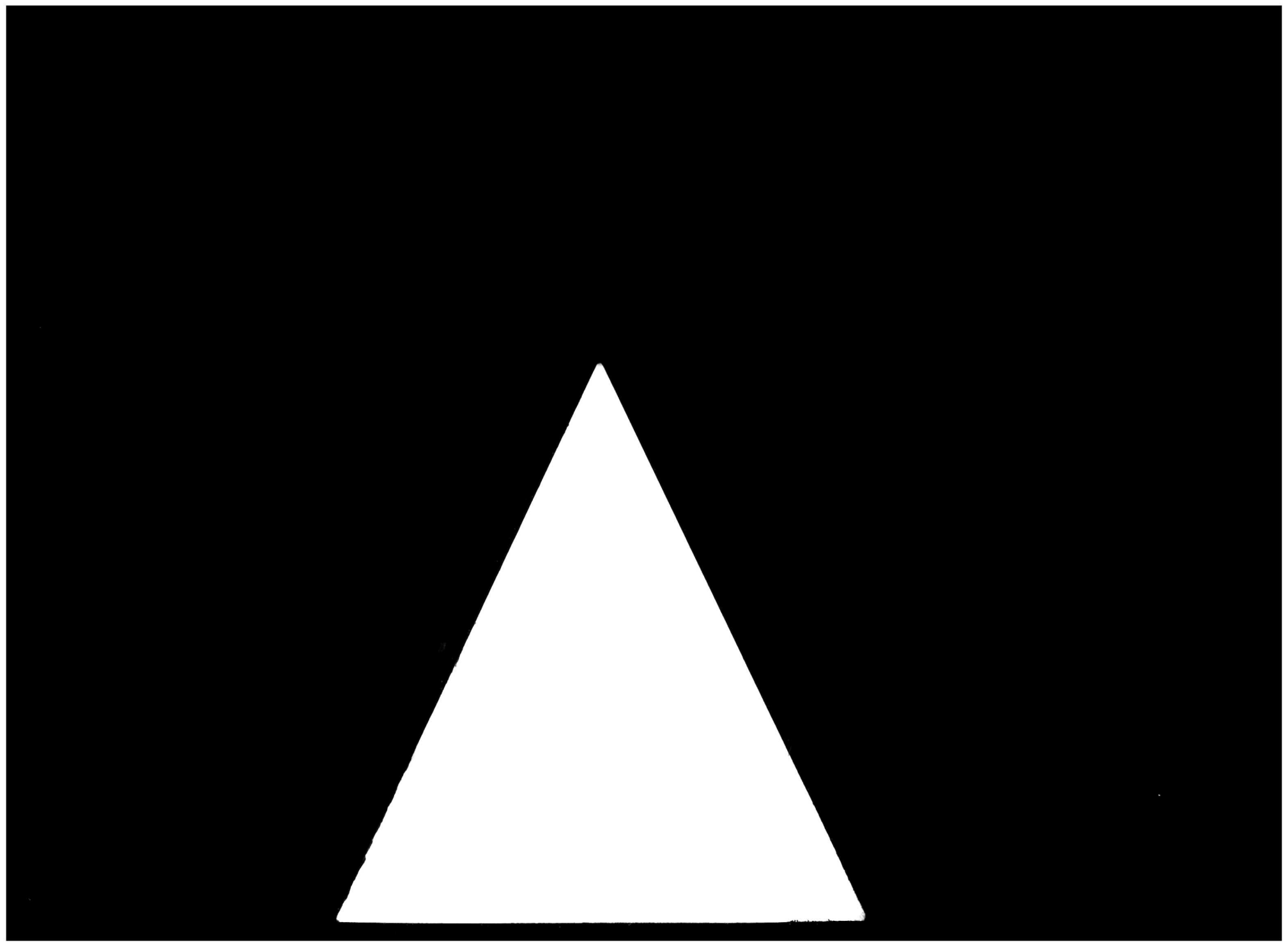
$50

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

Fifty 00/100 Dollars,

per above voucher, this 17 of Feby 1891.

A. J. Shaw



Shaw, H.C.
Cobb Co.,
No. 1907

INDIGENT PENSION.

~~1903.~~
1907

Name H.C. Shaw
County Cobb
Co. Troupe Artillery Regt.
Approved . 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/8/04. 6/6/06

Pension Office 10/1/04

This is not an aged, man The extent and effects of the infirmity as stated has not been shown to be such as will by ordinary effort prevent him from making his support at some kind of labor. The earnings of his minor children are his, until they are of age, and it is his duty to contfol it and use it for his support, no authority to allow it to be used solely by them. Let applicant amend, and not make a new application, if he desires to be heard from again.

J. W Lindsey
Com. Of Pension.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ COUNTY. }

I, _____ of _____ hereby authorize _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1903.

[L. S.]

Executed in the presence of

_____

POWER OF ATTORNEY.

STATE OF GEORGIA, }
..... COUNTY. }

I, ...hereby authorize

..... of .....

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

..... at ..... by .....

Witness my hand and seal, this ..... day of ..... 1903.

..... [L. S.]

Executed in the presence of

.....

.....

Pension ... 1901 ... [illegible] ... and ... an ... [illegible] ... the ... [illegible] ... has not been ... [illegible] ... to ... [illegible] ... will by or- ... [illegible] ... prevent him from ... [illegible] ... his support at some kind ... of labor. The earnings of his ... minor children are his, until they ... are of age, and it is his duty to ... control it and use it for his ... support, no authority to allow ... it to be used solely by them. ... Let applicant amend, and ... ot make ... a new application, if he ... desires ... to be heard from again.

.....d. W Lindsey
C. C. of Penn on .

H. C. Shaw, Lt. C.
Cobb Co.
No. ... 1902

INDIGENT PENSION.

1903.
1907

Name H C Shaw
County Cobb
Co. Temple Artillery Regt.
Approved ..... 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

9/8/04. 6/6/10

Every Question MUST be Answered.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA, }
Cobb COUNTY. }

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

1. What is your name and where do you reside? (give State, County and post-office)
Henry C. Shaw - Cobb Co. Mableton P.O.
2. How long and since when have you been a resident of this State? All my life: except during my service in Confederate Army.
3. When and where were you born? Born in Clarke Co June 25th 1844.
4. When and where and in what company and regiment did you enlist or serve? Enlisted in Clarke Co. June 1862. in Clarke Co Artillery Co Troops Known as the 1st Ga Regt
5. How long did you remain in such company and regiment? Remained in Co L Battalion until Surrender Co Co R ... 9th 1865
6. When and where was your company and regiment surrendered and discharged? ... Appomattox ...
7. Were you present with your company and regiment when it was surrendered? I was.
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? .....
9. How much can you earn (gross) per annum by your own exertions or labor? Very little.
10. What has been your occupation since 1865? Farmer.
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity & poverty.
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I have been afflicted With Rheumatism in my Arms and Legs for more than four years Which increase with my age. For the past two years I have been Unable to make a Support by manual Labor.
13. What property, real and personal, or income, do you possess, and its gross value? A little household furniture - A Cow worth $15.00 - An old Mule worth $25.00
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? Same as above - I have disposed of none -
15. In what County did you reside during those years, and what property did you then return for taxation? Cobb County -
16. How were you supported during the years 1899, 1900, 1901 and 1902? By what I could earn & contributed to by my children - two of whom - the only ones that could aid me
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Very little. I keep no books and can not say what it cost.
18. What was your employment during 1898, 1899, 1900, 1901 and 1902? What pay did you receive in each year? Farmer. Only what I got as part of the Crop. - No pay.
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? I have a Wife - Two children living with me. aged Myself: aged 61 - Two daughters aged 16 & 18 years respectively
20. Are you receiving any pension? If so, what amount and for what disability? None
21. Have you ever made an application for pension before? [redacted]
22. How many applications have you ever made and under what class? Two - Indigent -

Sworn to and subscribed before me this the 16th day of July 1904.

H. C. Shaw
Applicant.

J. M. Chivington
Ordinary
of Cobb County.

Words are too Risky for Attorneys Use.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, Cobb COUNTY.

I C Pair & J. H. Murray of said State and County, having been presented as a witness in support of the application of W C Shaw for pension under section 1254, Code, and after being duly sworn true answers make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? I C Pair, Cobb County Ga
2. Are you acquainted with W C Shaw, the applicant; if so, how long have you known him? For 6 years
3. Where does he reside, and how long and since when has he been a resident of this State? Macklon Cobb County Ga ever since and near here
4. When, where and in what company and regiment did he enlist, and how do you know? H. Murray deposes he knows to question No 11 & 2 Applicant enlisted in Colton Rifles Troop Miller's Regt 1863 Deponent was a member of the same Co.
5. Were you a member of the same company and regiment? Yes
6. How long did he perform regular military duty? Until Surrender about 1 Year
7. When and where was his command surrendered? At Greensboro N.C. in April 1865
8. Were you present when it surrendered? Yes
9. Was applicant present? He was
10. If he was not present, where was he? ——— When did he leave his command? ——— For what cause? ——— By what authority he left? ——— How do you know all of this? I was there with him
11. What property, effects or income has the applicant? (Give your means of knowledge.) One small mule & cow
12. What property, effects or income did the applicant possess in 1898, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? About the same as now
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? No
14. What is the applicant's occupation and physical condition? Farmer, very poor
15. Is the applicant unable to support himself by labor of any sort, if so, why? On account of age being worn out. Unable to do any work & is unable to any thing
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? By his children
17. What portion of his support for these four years was derived from his own labor or income? Very little & not any at all
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? Rheumatism in hips & shoulders
19. Who composes family? What property have they? Children's age and their earning capacity? Wife & 4 Children. One about 21 one 16 years One 11 yrs one about 8 yrs boys 2 boys & 2 girls
20. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 8th day of Sept 1904

John Dunlap Ordinary

J C Pair Witness.

J H Murray

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, Cobb COUNTY.

Personally came before me W M Kemp and J D Malone, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully W C Shaw, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: He is about 70 years of age. We examined his heart & lungs & found heart weak & irregular & lungs in a congested condition. He is very feeble & unable to do any work & is unable to earn a support & is in need of relief and we believe he is entitled to a pension & that he is in needy circumstances & that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 8th day of Sept 1904

John Dunlap Ordinary

J. D. Malone M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Cobb COUNTY.

I, John Dunlap Ordinary in and for said County, hereby certify that the applicant W C Shaw resides in said County, and has been a bona fide resident of this State since the 1st day of January 1894 and that the witnesses, viz.: J C Pair & J H Murray

are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Cobb County show that applicant returned for taxation in his name in 1901 95 Dollars of property, and in 1902 95 Dollars of property, in 1903 95 Dollars of property, in 1904 100 Dollars of property.

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

Witness my hand and seal of office, this 8th day of September 1904

John Dunlap Ordinary, of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, H. C. Shaw, hereby authorize John Awtrey of

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

at

by

WITNESS my hand and seal, this 3rd day of Jany 1907.

H. C. Shaw [L.S.]

Executed in presence of
M. Gann

Shaw, H. C.,
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 670.

INDIGENT
SOLDIER'S PENSION
1907.

Name H. C. Shaw
County Cobb
Co. D 4th Regiment

WARRANT ISSUED
JAN 21 1907.
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Cobb County. } Carlton Battery, Troops artillery

Personally appears H C Shaw of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18__; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company A, of 4th Regiment of _____; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items: _____

of the value of Nothing Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 3 day of Jany 1907. } H C Shaw

John Awtrey Ordinary.

State of Georgia,
Cobb County. }

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with H C Shaw 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 3rd day of Jany 1907.

John Awtrey

Ordinary Cobb County.

Affix your seal here

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

Amended Application for Pension of H. C. Shaw, Cobb County.

State of Georgia,

Cobb County.

In person appeared before me the undersigned H. C. Shaw, applicant for pension, who on oath says that since he filed his application for pension hereto attached in 1904, his two daughters referred to in said application whose ages were sixteen and eighteen at that time, since then have married and have left petitioner and they do not in any way contribute to his support.

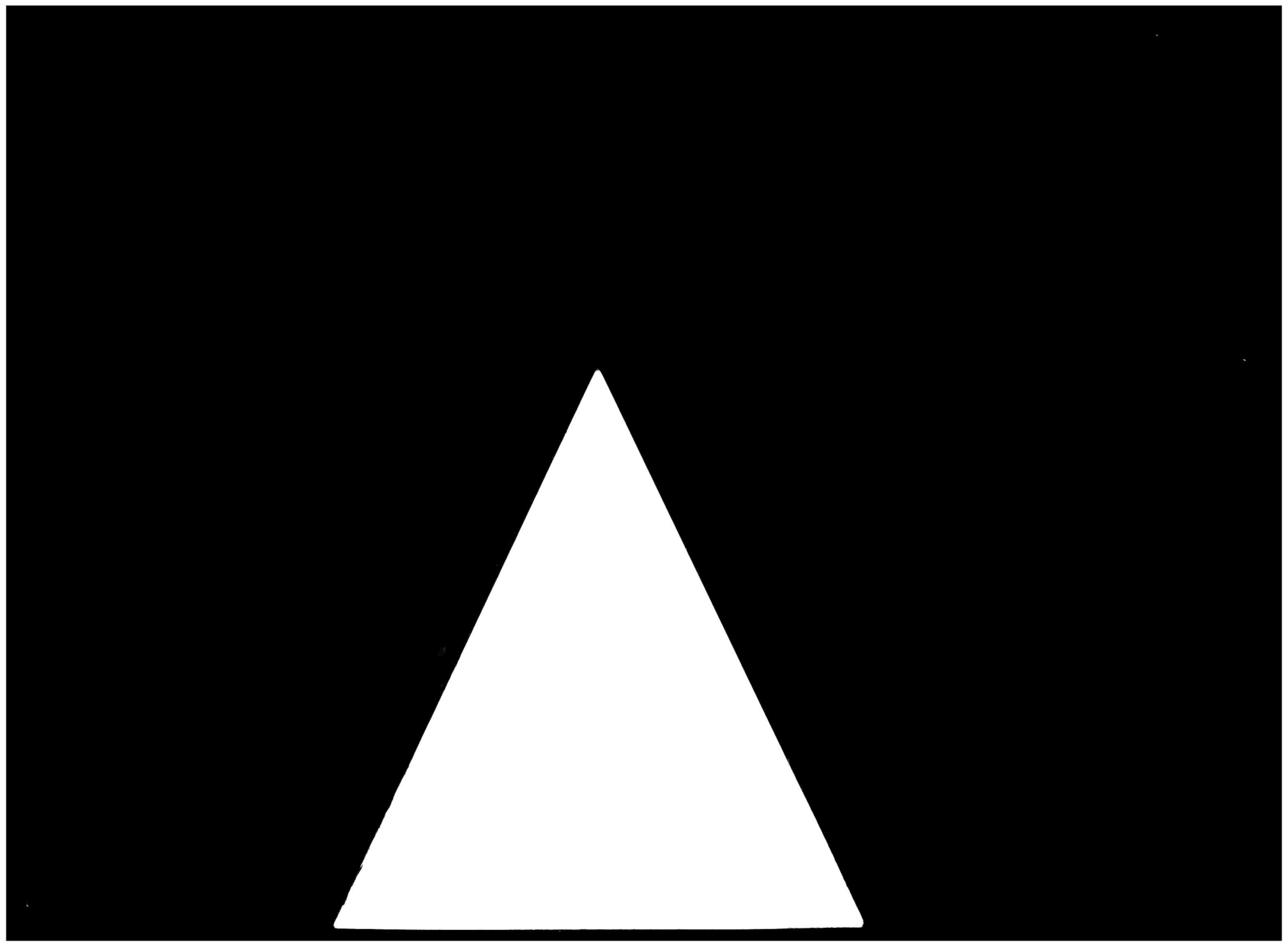
Affiant shows that since his original application was filed he received severe injuries by being crushed between his wagon and barn, which severely mashed his back, kidneys and spine. Affiant's ability to labor and earn a living in any way has been greatly impaired since he made said original application. He is now unable to make a support. He only has one child with him: the labor of that child is not sufficient to make a support for affiant and child and affiant's wife.

Affiant will be sixty-two years old the 25th day of June 1906. Affiant has not accumulated any property other than that described in his original application.

H. C. Shaw

Sworn to and subscribed before
me this 15th day of June, 1906.

John Dobbs
Ordinary



Shaw, M. A. Mrs.
Cobb Co

O.K.

No.

WIDOW'S
Indigent Pension.
1901.

Name Mrs M. A. Shaw

County Cobb

Widow of A. J. Shaw
Echols Holding

Approved 4/8 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

3/7/01

POWER OF ATTORNEY.

STATE OF GEORGIA.
Cobb County.

I, Mrs. M. A. Shaw hereby authorize John Cooley of Cobb County, to receive and receipt for the pension allowed and that he remit the same to me at his office by his check or registered mail.

Witness my hand this 26th day of Jany 1901.

Executed in presence of

Ordinary,
County.

Mrs. M. A. Shaw, L. S.
Mark

SEAL

Husband was drawing Invalid pension –

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Mrs. M. A. Shaw hereby authorize John Awtry of Cobb County, to receive and receipt for the pension allowed and that he remit the same to me at his office by his check or registered mail.

Witness my hand this 26th day of Jany 1901.

Executed in presence of
Ordinary,
County.

Mrs. M. A. her X mark Shaw, L. S.

SEAL

Questions for Applicant.

STATE OF GEORGIA,
Cobb County.

Mrs. M. A. Shaw of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (*Give State, County and Post Office.*) Mrs. M. A. Shaw, Marietta, Ga.
2. How long and since when have you been a resident of this State? All my life.
3. When and where were you born? Oct. 17th, 1826, in Elbert County Ga.
4. When and where was your husband born—state his full name, and when were you and he married? My husband, A. J. Shaw, was born in South Carolina. Cannot tell the date – Were married in 1846 in Elbert Co. Ga.
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? Enlisted 15th March 1862 in Oglethorpe Co. in Echols Artillery. Cannot give Company.
6. How long did your husband serve in said Company and Regiment? He served three years and two months.
7. When and where did your husband's Company and Regiment surrender and was discharged? At Greensboro, N.C. at Surrender in 1865.
8. Was your husband present at the time and place when his Company and Regiment surrendered? Yes
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? H
10. When and where did your husband die? He died March 3rd 1897, in Elbert County, Ga.
11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty? The first and second grounds.
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight. I am now nearly seventy five years old, and completely worn out. I could do a little housework until a few months ago, but now cannot do that.
13. What has been your occupation since your husband's death? Nothing but knitting and such light work as that.
14. How much can you earn gross, by your own exertion or labor? Nothing now.
15. What property, real or personal, or income do you have or possess, and its gross value? Nothing but little household furniture.
16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899–1900, and what disposition, if any, by sale or gift, have you made of the same? Nothing but mule & wagon, and I sold them to live on after he died.
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation? In Cobb County – Paid no taxes.
18. How have you been supported since death of husband, and especially for 1899 and 1900? Principally by Charity.
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? Don't know what it cost. I contributed nothing but what little I could do in knitting etc.
20. What was your employment during 1899 and 1900—how much did you receive for each year? Not employment – Received nothing except from neighbors in way of Charity.
21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property? Have no family except one crippled daughter who never walked a step in her life. She is 47 years old – Has no property at all.
22. Have you ever made an application for pension before? Yes.
23. How many applications have you made for a Pension, and under what class? One application – My husband drew pension & after his death I made application but failed.

Sworn to and subscribed before me this 26th day of Jany 1901.

Mrs. M. A. her X mark Shaw.

John Awtry, Ordinary,
of Cobb County.

This applicant is almost helpless. Her husband had established proof of service and was drawing pension before his death. John Awtry Ordinary.

Shaw, M. A. Mrs.
Cobb Co.

O.K.

No.

WIDOW'S
Indigent Pension.
1901.

Name Mrs. M. A. Shaw
County Cobb
Widow of A. J. Shaw
Echols Artillery
Approved 4/8 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

3/5/01

Questions for Witnesses.

STATE OF GEORGIA,
Cobb **County.**

John A Booth of said State and County, having been presented as a witness in support of the Application of Mrs. M A Shaw for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? John A Booth Cobb Co Ga
2. Are you acquainted with the applicant, Mrs. [illegible] If so, how long have you known her? All of my life
3. Where does she reside, and how long and since when has she been a resident of this State? Cobb All of her life
4. When and where was she born? Elbert Co Ga
5. Were you ever acquainted with her husband? I was
6. Where did he reside in 1861? Oglethorp Co Ga
7. When and to whom was he married? About 1846 to M A Booth
8. When and where was he born? I do not know
9. How long have you known him? All my life
10. When and where did 1862 in March in Oglethorp Co Ga enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this?
11. Were you a member of the same Company and Regiment? I was not
12. How long did he perform regular military duty? from March 1862 until the Surrender at Greensborough N C
13. When and where was his Company and Regiment surrendered and discharged from service? At Greensborough N C
14. Were you with the command when it surrendered? I was not
15. Was A J Shaw the husband of applicant present? he was
16. If not present, where was he? X
17. When and where did he leave his Command? X

For what cause? X

By whose authority he left? X

How do you know all this? (State fully and clearly.) While I was not present when his Command surrendered I know that it did and that he returned home to his family in [illegible] deality afterward

18. When and where did In March 1897 in Elbert Co Ga die?
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? In Elbert Co Ga, all his life
20. Do you of your own knowledge know that applicant is the lawful widow of A J Shaw Yes
21. Has she remained unmarried since her soldier husband's death, and is now his widow? She has
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? None from personal observation and inquiry
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? None
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? Not any
25. What is applicant's physical condition and her chances and ability to earn a support? Very bad. She old, very feeble. She sometimes ago and broke her right arm from which she has never recovered
26. Is applicant able to earn a support at labor of any sort, if not why? She is not.
27. How was she supported for 1899 and 1900? By Charity
28. How much did applicant contribute to her support for last two years? Nothing
29. Give a full and complete statement of applicant's physical condition? She is old very feeble and unable to perform any sort of the avocation of life
30. What interest have you in the recovery of this pension by the applicant?

Sworn to and subscribed before me this 26th day of January 1901
John Awtrey Ordinary,
Cobb County.

John A Booth
Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,
Cobb **County.**

Personally before me comes J H Simpson M.D. and C H Fields MD both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. M A Shaw applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this She is 75 years old and very infirm - a broken arm (both bones of fore arm, left arm,) one bone of which has not [illegible] together, make her condition such that she can do no work -

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 13th day of Feb. 1901
John Awtrey Ordinary,
Cobb County.

John H Simpson M.D.
C H Fields MD

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb **County.**

I, John Awtrey, Ordinary in and for said county, hereby certify that the applicant, Mrs. M A Shaw resides in said county, and has been a bona fide resident of this State since 1st day of Jany 1900, and that the witnesses, Mr. John A Booth are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses *before the same was signed and subscribed.*

I further certify that the tax digest of Cobb county shows that applicant returned for taxation in her own name in 1899 No dollars worth of property, and in 1900 No dollars worth of property.

Witness my hand and official seal, this 14th day of Feb 1901.

{SEAL}

John Awtrey Ordinary,
Cobb County.

NOTES—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
5. ..... Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA
Cobb County.

I, M. A. Shaw, hereby authorize John Antney of Marietta, Ga to receive and receipt for the pension paid hereon, and request that he remit same to at

In Witness Whereof, I have hereunto set my hand and seal, this 19th day of Jany 1902.

M. A. Shaw [L. S.]

Executed in presence of

To Those Heretofore Paid

1902.

No. 483

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO Mrs. M. A. Shaw

OF Cobb County,

Widow of A. J. Shaw

Co. Regiment

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT ISSUED

Dec 1/24 1902

AND HANDED TO only

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Martha A. Shaw, hereby authorize John Antney of to receive and receipt for the pension paid hereon, and request that he remit same to at

In Witness Whereof, I have hereunto set my hand and seal, this 14 day of Jan 1902

Martha A. Shaw [L. S.]

Executed in presence of

J. M. Gamer

Shaw Martha H.
Cobb County

To Those Heretofore Paid.

1902. 3

No. 138

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO Mrs. Martha A. Shaw

OF Cobb County,

Widow of Andrew C. Shaw

Co. Regiment Echols Stilling

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT ISSUED

1/23 1902

AND HANDED TO Today

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

Form No. 1.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. M. A. Shaw

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State [illegible] All her Life. That she is the Widow of A J Shaw who was a soldier in Company [illegible] of the Echols Artillery Regiment of [illegible] Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to Johnson's Surrender 1865. That he died [illegible] day of March 1897.

On account of age infirmity and poverty she is unable to support herself—

[illegible] of said deceased soldier during his service in the Army as a [illegible] since his death aforesaid, and that she became his wife in [illegible] 1846

[illegible] Cobb [illegible]

[illegible] 19th day of Jany [illegible] John Awtrey [illegible] } M. A. Shaw Post-Office

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

Given under my official signature and seal, this the 19th day of Jany 1902

(Official Seal) John Awtrey Ordinary of Cobb County

NOTE. All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1902.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of } Personally comes Mrs. Martha A Shaw

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1832 - She is 80 years old. That she is the Widow of Andrew J Shaw who was a soldier in Company of the Echols Artillery Regiment of Volunteers, that he enlisted in said regiment on or about the month of 1862, and served in the Army up to April 1865. That he lost his life on the day of 18 (State here particulars of the husbands death, when, where and from what cause)

Owing to Age Infirmity + poverty She is unable to support herself

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

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

Sworn to and subscribed before me, this 15 day of January 1902. John Awtrey, Ordinary. } Martha A Shaw Post-Office

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

Given under my official signature and seal, this the 15th day of Jan 1902

Official Seal. John Awtrey Ordinary of Cobb County.

NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Martha E. Shaw hereby authorize John Awbrey of to receive and receipt for the pension paid hereon, and request that he remit same to at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of Jan 1904.

Martha E. Shaw her mark [L. S.]

Executed in presence of

Shaw, Martha E.
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. 230

INDIGENT WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO Mrs. Martha E. Shaw

OF

Widow of John Shaw County,

Co. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
JAN 25 1904,

AND HANDED TO Ordy

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, M. A. Shaw, hereby authorize John Awbrey of to receive and receipt for the pension paid hereon, and request that he remit same to at

In Witness Whereof, I have hereunto set my hand and seal, this 1 day of Jan 1905.

M. A. Shaw her mark [L. S.]

Executed in presence of

J. M. Gann

Shaw, M. A. (Mrs.)
Cobb County

To Those Heretofore Paid.

1905.

No. 223

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO Mrs. M. A. Shaw

OF

Widow of Cobb County, J. Shaw

Co. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
JAN 23 1905.

AND HANDED TO Ordy

The Franklin Printing and Publishing Co., Atlanta.
Geo. W. Harrison, Manag'r, for State Printer.

FORM NO. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. Martha A Shaw

who, being sworn, says on oath that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since . That she is the Widow of Zack Shaw who was a soldier in Company of the Regiment of Volunteers, that he enlisted in said regiment on or about the month of 186 , and served in the Army up to 186 That he died on the day of 18 owing to age Infirmity and poverty She is unable to support herself

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 7th day of Dec 1904. John Awtrey Ordinary } Martha A Shaw her mark Post Office

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

Given under my official signature and seal, this the 7th day of Dec 1904.

{ Official Seal } John Awtrey Ordinary of Cobb County

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

FORM NO. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. M A Shaw

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since That she is the Widow of A J Shaw who was a soldier in Company of the Echols Artillery Regiment of Volunteers, that he enlisted in said regiment on or about the month of 186 , and served in the Army up to 186 That he died on the day of 18 Age & poverty

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905

Sworn to and subscribed before me, this day of Jan 1905. John Awtrey Ordinary. } her M A x Shaw mark Post-Office

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

Given under my official signature and seal, this the 4 day of Jan 1905.

{ Official Seal } John Awtrey Ordinary of Cobb County

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, M A Shaw, hereby authorize
John Bentley of Marietta, Ga.
to receive and receipt for the pension paid hereon, and request that he remit same to
me at his office

In Witness Whereof, I have hereunto set my hand and seal, this 20
day of February 1906.

M A Shaw [L. S.]

Executed in presence of

To Those Heretofore Paid.

1906.

No. 229

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO

Mrs. M A Shaw

OF

Cobb County,

Widow of A Shaw

Co. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1 22 1906.

AND HANDED TO

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

Shaw, W. A. (Mrs.)

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, M A Shaw, hereby authorize
John Bentley of
to receive and receipt for the pension paid hereon, and request that he remit same to
at

In Witness Whereof, I have hereunto set my hand and seal, this 9
day of January 1907.

X M A Shaw [L. S.]

Executed in presence of

To Those Heretofore Paid.

1907.

No. 169

INDIGENT

WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO

Mrs. M A Shaw

OF

Cobb County,

Widow of A Shaw

Co. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1 21 1907.

AND HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Shaw, M. A. (Mrs.)
Cobb County

Form No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of _____ } PERSONALLY COMES MRS. M A Shaw

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since before the war That she is the Widow of A J Shaw who was a soldier in Company _____ of the Echols Artillery Regiment of _____ Volunteers, that he enlisted in said regiment on or about the month of _____ 186__, and served in the Army up to _____ 186__ That he died on the _____ day of _____ 18__.

Age & poverty

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 10 day of Jany 1906. John Awtry, Ordinary. } M A Shaw Post Office _____

State of Georgia, Cobb County. } I, John Awtry Ordinary of said County, certify that I am well acquainted with Mrs. M A Shaw, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1 day of Jany 1894

Given under my official signature and seal, this the 20 day of Jany 1906.

{ Official Seal } John Awtry Ordinary of Cobb County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

Form No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. M. A. Shaw

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Jany 1st 1894 That she is the Widow of A J Shaw who was a soldier in Company _____ of the Echols Art. Regiment of _____ Volounteers, that he enlisted in said regiment on or about the month of _____ 1862, and served in the Army up to _____ 1865 That he died on the _____ day of _____ 18__

Age, Infirmity & poverty

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 5 day of Jany 1907. John Awtry, Ordinary. } x M A Shaw Post Office _____

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

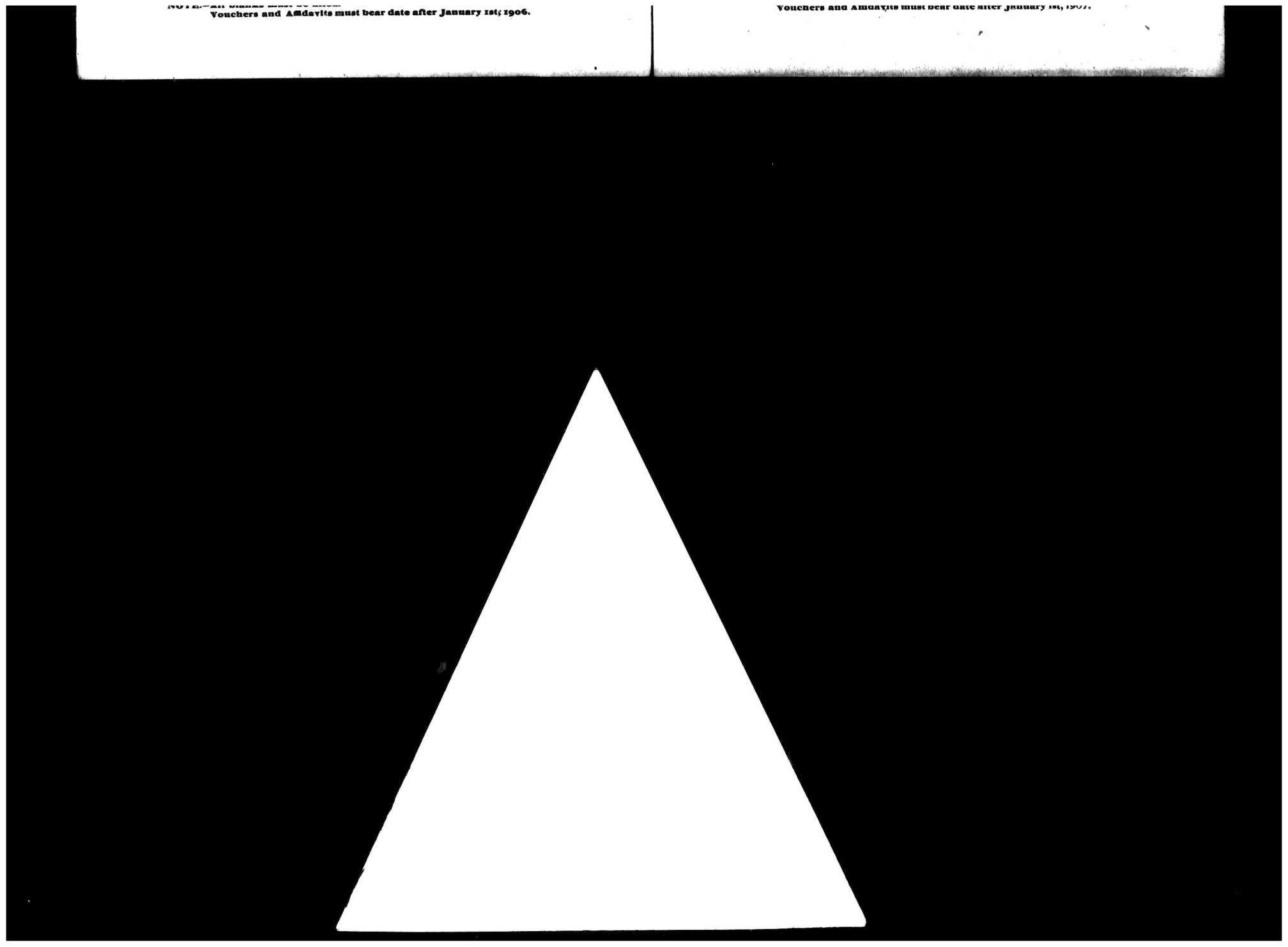
Given under my official signature and seal, this the 15 day of Jany 1907.

{ Official Seal } John Awtry Ordinary of Cobb County.

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

Vouchers and Affidavits must bear date after January 1st, 1906.

Vouchers and Affidavits must bear date after January 1st, 1907.



Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

Know all Men by these Presents, That I, W. M. Shaw of Cobb County, in said State, do hereby appoint John T. Shaw of Marietta 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 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 31st day of October 1891

W. M. her x mark Shaw [L. S.]

Executed in the presence of us:

J. M. Stone Ordny.

Geo. M. Fleming

DIRECTIONS.

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

Shaw W. M.
Cobb County
1891.
Ex Cobb Legion Cavalry
No. 3871

Widows' Pension

PAID TO

Mrs. W. M. Shaw

OF

Cobb County.

$100.00.

Warrant Issued

AND HANDED TO

1891

Geo. W. Harrison, State Printer Atlanta.

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,
Cobb County.

Know all Men by these Presents, That I, W. M. Shaw of Cobb County, in said State, do hereby appoint John T. Shaw of Marietta 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 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 31st day of October 1891.

W. M. her x mark Shaw [L. S.]

Executed in the presence of us:
J. M. Stone Ordny.
Geo. M. Stone

DIRECTIONS.

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

Shaw W. M.
Cobb County
1891.
Ex Cobb Tenn Corp
No. 3871

Widows' Pension
PAID TO
Mrs. W. M. Shaw
OF
Cobb COUNTY.

$100.00.

Warrant Issued
1891
AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.
County of

In person came before me, the undersigned Ordinary in and for the County of Cobb Mrs. W. Malisa Shaw who being sworn according to law, says under oath that she is the widow of J. S. Shaw, who was a soldier in the service of the Confederate States, and served as a member of Company , of the Regiment of Cp Volunteers; that he enlisted in said service on or about the 10th day of Jany 1862, and was in the Confederate Army up to June 1865 or to the time of his death. That while in the Army, he was on the 5 day of June 1865, (See Note No. 1)

At that time the news came to deponent that her husband was killed in battle in the State of Norcarolina while fighting in the Confederate army and against the Federal army — Deponent was informed that — was killed instantly and has never seen or heard any thing from her husband from that time to the present —

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 21 th day of Oct 1852, and that she has resided in Georgia continuously since the 6th day of Sept 1854; 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 27th day of October 1891.

W. M. her x mark Shaw

J. M. Stone
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.

Form No. 2.

Affidavit for Three Witnesses.

STATE OF GEORGIA,
County of Cobb

In person came before me, the undersigned Ordinary in and for said County, witnesses A. E. Johnson W. C. Dial and Jno. W. Orrus (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. M. Melissa Shaw, of the County of Cobb, State of Georgia, is the widow of J. S. Shaw, who was a soldier in Company "G" of the Cobbs Legion Regiment Cavalry Ga. Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 10th day of January 186 2 That while in said service, or by reason of said service in the Army, he lost his life as follows:

That while in the Army in January 1865 we met the Federal Army at Dalton via S. C. - we were pressed back very day, and continuous Skirmishing every day, forward and into North Carolina. On or about 25th February in 1865 while being pressed back and skirmishing, we began into a charge against the Enemy, the said J. S. Shaw was present and went into the charge with us. It was reported to us by good Authority that he was killed and left on the battlefield. We do know that he went into the charge with us and that we never saw him any more. - he has never returned home since the war nor have we ever heard any thing from him only that he was killed in said charge and left dead on the field. We were in the same Company with said J. S. Shaw during his Service in the army.

We further swear that Mrs. M. Melissa Shaw was the wife of said soldier during the service and that she has not intermarried since his death, and that she resides in Cobb County of the State of Georgia.

Sworn to and subscribed before me, this, the 31st day of October 1891.

J. M. Stone, Ordinary.

W. C. Dial
Jno. W. his X mark Orrus
A. E. Johnson

Form No. 3.

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

STATE OF GEORGIA,
County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. M. Melissa Shaw 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 31st day of October 1891.

SEAL

J. M. Stone, 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.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. W. M. Shaw 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. J. Shaw 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 4th day of February 1893.

J. M. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mrs. W. M. Shaw of Cobb County in said State, do hereby appoint J. M. Stone, Ord. of Cobb 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 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 February 1893.

Mrs. W. M. Shaw [L. S.]

Executed in the presence of us:

[illegible]

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

Shaw, W. M. Cobb County

FOR THOSE HERETOFORE PAID.

1893.

No. 187

Widows' Pension,

for year ending February 15th, 1893.

PAID TO

Mrs. W. M. Shaw

OF

Cobb County.

Warrant Issued

3/6 1893

AND HANDED TO

J. M. Stone

Geo. W. Harrison, State Printer, Atlanta.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. W. M. Shaw 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 J. S. Shaw 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 22 day of Feby 1894.

J. M. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mrs. W. M. Shaw of Cobb County in said State, do hereby appoint J. M. Stone of Marietta 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 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 17th day of Feby. 1894.

× Mrs. W. M. her Shaw mark × [L. S.]

Executed in the presence of us:

G. M. Fleming

J. T. Shaw

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

Shaw, W. M. (Mrs.) Cobb County

FOR THOSE HERETOFORE PAID.

1894.

No. 817

WIDOWS' PENSION,

for year ending February 15th, 1894.

PAID TO

Mrs. W. M. Shaw

OF

Cobb County.

WARRANT ISSUED

3/3 1894,

AND HANDED TO

J. M. Stone

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb | Personally comes Mrs. W. M. Shaw

who being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has *resided* in said State continuously ever since Oct. 20 1835 That she is the Widow of Wm S Shaw who was a Soldier in Company E. of the Phillips Legion Regiment of Georgia Volunteers that he enlisted in said Regiment on or about the month of March 1862 and served in the Army up to 186 That he lost his life on the day of 18 (*State here full particulars of the husband's death, when, where and from what cause.*) (

Not the said soldier served in the army as above stated, that he was killed in battle during the first part of the year 1865 in North Carolina — So reported to me —.

He never returned home after the war, nor was ever heard of after the war

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension 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 4th day of February 1893. J. M. Stone Ordinary. | Mrs. W. M. her mark Shaw Post-office Marietta Ga

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb | Personally comes Mrs. W. M. Shaw

who being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has *resided* in said State continuously ever since October 1835 That she is the Widow of J. S. Shaw who was a Soldier in Company E. of the Phillips Legion Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of March 1862 and served in the Army up to Spring of 1865 That he lost his life on the day of Spring 1865 (*State here full particulars of the husband's death, when, where and from what cause.*) (

He was killed in the State of North Carolina at or about the close of the war, so I was informed — at any rate he never returned home after the war, nor any information given except as above stated

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension 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 22 day of July 1894. J. M. Stone Ordinary. | Mrs. W. M. her mark Shaw Post-office Marietta Ga

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. W. M. Shaw 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 J. S. Shaw 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 27th day of Feby 1895.

J. M. Stone Ordinary.

Form No. 3

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

Know all Men by these Presents, That I, W. M. Shaw of Cobb County in said State, do hereby appoint J. M. Stone of Marietta 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 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 27 day of Feby 1895. W. M. Shaw [L. S.]

Executed in the presence of us:

[illegible]

DIRECTIONS.

Send amount by to me at , and oblige

Shaw, W. M.
Cobb Co.
FOR THOSE HERETOFORE PAID.
1895.
No. 3975
WIDOW'S PENSION,
for year ending Febuary 15th, 1895.
PAID TO
Mrs. W. M. Shaw
OF
Cobb County.
widow of J. S. Shaw
WARRANT ISSUED
3/2 1895.
AND HANDED TO
Atty

Geo. W. Harrison, State Printer.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. W. M. Shaw 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 J. S. Shaw 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 11th day of Feby 1896.

{SEAL} J. M. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, Mrs. W. M. Shaw hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me at by him

In Witness Whereof, I have hereunto set my hand and seal, this 11 day of Feby 1896. Mrs. W. M. Shaw [L. S.]

Executed in the presence of

L. T. Shaw

Shaw, W. M. (Mrs.)
Cobb, County.
FOR THOSE HERETOFORE PAID.
1896.
No. 3548
WIDOW'S PENSION,
for year ending February 15th, 1896.
PAID TO
Mrs. W. M. Shaw
OF
Cobb County.
widow of J. S. Shaw
WARRANT ISSUED
2 1896.
AND HANDED TO
Atty

Geo. W. Harrison, State Printer.

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb | Personally Comes Mrs. Wm. Shaw

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has *resided* in said State continuously ever since Oct. 18 35 That she is the Widow of J. S. Shaw who was a Soldier in Company E of the Phillips Legion Regiment of Ga. Volunteers, that he enlisted in said Regiment on or about the month of Mch 186 4 and served in the Army up to 186 That he lost his life on the day of Spring 18 65 (*State here full particulars of the husband's death, when, where and from what cause.*) (

That while in the Confederate Army in the State of Va. he was killed dead on the battlefield a few days before the surrender of Genl Lee.

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, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this 17th day of Feby 1895. J. M. Stone Ordinary. | Mrs. W. M. her x mark Shaw Post-office Marietta Ga.

Form 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb | Personally Comes Mrs. Wm. Shaw

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Oct. 18 35 That she is the Widow of J. S. Shaw who was a Soldier in Company E of the Phillips Legion Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of Mch 186 4 and served in the Army up to April 186 5 That he lost his life on the day of April 18 65 (*State here full particulars of the husband's death, when, where and from what cause.*) (

That while in the Confederate Army in the Spring of 1865, near the close of the war, it was reported by his Comrades that he was shot off his horse. He never returned home nor has been heard of since the war

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, 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 as a resident of Cobb 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 11th day of Feby 1896. J. M. Stone Ordinary. | Mrs. W. M. her x mark Shaw Post-office Marietta Ga.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. W. M. Shaw the applicant for a pension in this case, and know from my own knowledge (or from positive proof presented to me by reputable witnesses,) that she resides in this County, and that she resided in the State of Georgia on December 23, 1890, and has not lived out of the State since that date. That she is the widow of W. S. Shaw 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 17th day July 1897.

[L. S.]

M. C. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA. Cobb County.

W. M. Shaw hereby authorize J. M. Stone of Marietta Ga to receive and receipt for the pension paid hereon and request that he remit same to me by mail Jan 17

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

W. M. his x Shaw mark [L. S.]

Executed in the presence of

T. J. Shaw

Richard Johnson:—
Pay this pension to
T. J. Shaw the bearer
Feby 24/97 J. M. Stone

Shaw W. M. (Mrs)
Cobb County

FOR THOSE HERETOFORE PAID.

1897.

No. 3756

WIDOW'S PENSION,

For year ending February 15th, 1897.

PAID TO
Mrs. W. M. Shaw
OF
Cobb County,
Widow of W. S. Shaw

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED
2/25 1897.
AND HANDED TO
J. T. Shaw

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

POWER OF ATTORNEY.

State of Georgia Cobb County.

I Mrs W M Shaw hereby authorize J. M. Stone of Marietta Ga to receive and receipt for the pension paid hereon and request that he remit same to me by mail Jan 17

In Witness Whereof, I have hereunto set my hand and seal, this day of Jany 1898.

W. M. his x Shaw [L. S.]
mark

Executed in the presence of

Shaw W. M. (Mrs)
Cobb County

For Those Heretofore Paid.

1898.

No. 3718

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO
Mrs. W. M. Shaw
OF
Cobb County,
Widow of W. S. Shaw

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED
Feb 8 1898.
AND HANDED TO
J. M. S

GEO. W. HARRISON, STATE PRINTER, ATLANTA

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. W. M. Shaw

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Oct 18 35 That she is the Widow of J. E. Shaw who was a Soldier in Company E of the Phillips Legion Regiment of Ga Volunteers, that enlisted in said regiment on or about the month of Mch 186 7 and served in the Army up to April 186 5 That he lost his life on the day of April 18 65 (*State here full particulars of the husband's death, when, where and from what cause.*)

Was killed or lost at one of the last battles of the war in N. C. — Was never heard from nor returned home after the war.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, 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 as a resident of Cobb 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 17 day of Feb 1897. J. M. Stone Ordinary. | Mrs W. M. her x mk Shaw Post-office Minette Ga

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. W. M. Shaw

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Oct. 18 35 That she is the Widow of J. E. Shaw who was a Soldier in Company E of the Phillips Legion Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of Mch 186 7 and served in the Army up to April 186 5 That he lost his life on the day of April 18 65 (*State here full particulars of the husband's death, when, where and from what cause.*)

He was killed or lost at or about the close of the war — he never returned home nor was ever heard of since the war

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

I have been allowed a pension as a resident of Cobb 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 29 day of Jany 1898. J. M. Stone Ordinary. | Mrs. W. M. her x mk Shaw Post-Office Minette Ga

State of Georgia, Cobb County } I, J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. W. M. Shaw who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the I understand since 18 35

Given under my official signature and seal this the 29th day of Jany 1898.

J. M. Stone

Official Seal.

Ordinary of Cobb County.

POWER OF ATTORNEY.

State of Georgia,
Cobb County.

I, W. M. Shaw hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st day of Feby 1899.

W. M. her x mark Shaw [L. S.]

Executed in presence of

Shaw, W. M. Mrs.
Cobb County
For Those Heretofore Paid.

1899.

NO. 3273

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO
Mrs. W. M. Shaw
OF
Cobb County
Widow of J. S. Shaw

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED
2/8 1899.
AND HANDED TO
Price

GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Mrs W. M. Shaw hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12 day of Feby 1900.

Mrs W. M. her x mark Shaw [L. S.]

Executed in presence of

Shaw, W. M. (Mrs)
Cobb, County
To Those Heretofore Paid.

1900.

NO. 2003

WIDOW'S PENSION,

For year ending February 15th, 1900.

PAID TO
Mrs. W. M. Shaw
OF
Cobb County,
Widow of J. S. Shaw

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
Feb 16 1900,
AND HANDED TO
Stone

eo. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. W. M. Shaw

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since October 1835 That she is the Widow of J. S. Shaw who was a soldier in Company E of the Phillips Legion Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to April 1865 That he lost his life on the _____ day of April 1865 (State here full particulars of the husband's death, when, where and from what cause.)

That while engaged in a battle in the State of N. C. near the close of the war, (about April 1865) he was wounded and died shortly or was killed, he never returned after the war

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

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

Sworn to and subscribed before me, this 1st day of Feby 1899.
J. M. Stone Ordinary.

W. M. her x mark Shaw
Post-Office Marietta Ga.

State of Georgia, Cobb County. } I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. W. M. Shaw who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the _____ day of October 1835

Given under my official signature and seal this the 1st day of Feby, 1899.

J. M. Stone
Ordinary of Cobb County.

(Official Seal.)

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. W. M. Shaw

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since October 1835. That she is the Widow of J. S. Shaw who was a soldier in Company E of the Phillips Legion ~~Regiment~~ of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to April 1865 That he lost his life on the _____ day of April 1865 (State here particulars of the husband's death, when, where and from what cause)

That while engaged in a battle in the State of N. C. near the close of the war, (about April 1865) he was wounded and died shortly or was killed, he never returned after the war

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

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

Sworn to and subscribed before me, this 12th day of Feby 1900.
J. M. Stone Ordinary.

Mrs. W. M. her x mark Shaw
Post Office

State of Georgia, Cobb County. } I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. W. M. Shaw, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the _____ day of October 1835

Given under my official signature and seal, this the 12 day of Feby 1900.

J. M. Stone
Ordinary of Cobb County.

(Official Seal.)

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Mrs W M Shaw hereby authorize My son, J. T. Shaw of Cobb to receive and receipt for the pension paid hereon and request that he remit same to me at home

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th day of Feby 1901.

Mrs. W M her X Shaw mark [L. S.]

Executed in presence of
John Awtry.

Shaw, W. Melissa
Cobb Co

To Those Heretofore Paid.

1901.

No. 2402.

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. W M Shaw
OF
Cobb County.

Widow of J S Shaw

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
2/11 1901,

AND HANDED TO
J. T. Shaw (Son)

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W M Shaw, hereby authorize John Awtry of to receive and receipt for the pension paid hereon, and request that he remit same to at

In Witness Whereof, I have hereunto set my hand and seal, this 15th day of Jany 1902.

W M her X Shaw mark [L. S.]

Executed in presence of

Shaw, W. Melissa
Cobb County

To Those Heretofore Paid.

1902.

No. 248

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. W M Shaw
OF
Cobb County,

Widow of

Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/16 1902

AND HANDED TO
Ordy

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

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. W M Shaw

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since. October 1865. That she is the Widow of J L Shaw who was a soldier in Company E of the Phillips Legion Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to April 1865. That he lost his life on the day of April 1865 (State here particulars of the husband's death, when, where and from what cause) That while engaged in a the State of N Carolina near the Close of the war (about April 1865) he was wounded and died shortly or was killed he never returned after the war

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

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

Sworn to and subscribed before me, this 5th day of July 1901. John Awtry Ordinary. } Mrs W M Shaw Post Office

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

Given under my official signature and seal, this the 5th day of July 1901.

John Awtry
Ordinary of Cobb County.

{ Official Seal. }

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. W M Shaw

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Oct 1865. That she is the Widow of J L Shaw who was a soldier in Company E of the Phillips Legion Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to April 1865. That he lost his life on the day of April 1865 (State here particulars of the husband's death, when, where and from what cause) That while engaged in a battle in the State of N C near the close of the war about April 1865 he was wounded and died shortly or was killed he never returned after the war

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

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

Sworn ~~to~~ and subscribed before me, this 15th day of Jany 1902. John Awtry, Ordinary. } Mrs W M Shaw Post-Office Powder Spgs Ga

State of Georgia, Cobb County. } I, John Awtry Ordinary of said County, certify that I am well acquainted with Mrs. W M Shaw, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 15th day of Jany 1902.

John Awtry
Ordinary of Cobb County.

{ Official Seal. }

NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W. M. Shaw, hereby authorize John Notry of

to receive and receipt for the pension paid hereon, and request that he remit same to by hand in Atlanta

In Witness Whereof, I have hereunto set my hand and seal, this 1 day of January 1903.

Mrs W. M. Shaw [L. S.]

Executed in presence of

J. M. Gann

Shaw W. Malissa (Mrs)
Cobb County

To Those Heretofore Paid

1903.

No. 232.

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID

Mrs W. M. Shaw

Cobb County,

Widow of

Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/23 1903.

AND HANDED TO

Cody

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W. M. Shaw hereby authorize John Autrey of

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

In Witness Whereof, I have hereunto set my hand and seal, this 1 day of Jany 1904.

Mrs W. M. Shaw [L. S.]

Executed in presence of

J. M. Gann

Shaw W. Malissa
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. 276

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs W. M. Shaw

Cobb County,

Widow of J. S. Shaw

Co. E Regiment Phillips Legion

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/25 1904,

AND HANDED TO

Cody

Geo. W. Harrison, State Printer, Atlanta

FORM No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. A. M. Shaw

who being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Oct, 1850. That she is the Widow of J. D. Shaw who was a soldier in Company G. of the Phillips Legion Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to April 1865. That he lost his life on the day of April 1865. (State here particulars of the husband's death, when, where and from what cause.) That While engaged in a battle in the State of N. C. near the Close of the war about April 65 he was wounded and died shortly or was killed he never returned after the war

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1857

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

Sworn to and subscribed before me, this 6 day of Jan 1903. John Awtrey Ordinary. } A. M. Shaw Post Office Power

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

Given under my official signature and seal, this the 6 day of Jan 1903.

{ Official Seal. } John Awtrey Ordinary of Cobb County.

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

FORM No. 1.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. W. M. Shaw

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1850 That she is the Widow of J. D. Shaw who was a soldier in Company G of the Phillips Legion Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to April 1865. That he lost his life on the day of April 1865 (State here particulars of the husband's death, when, where and from what cause.) That While engaged in the State of N. C. near the Close of the war he was wounded and died shortly or was Killed

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

I have been paid a pension as a resident of Cobb County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 1 day of Jan 1904. John Awtrey Ordinary. } W. M. Shaw Post Office

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

Given under my official signature and seal, this the 1 day of Jan 1904.

{ Official Seal } John Awtrey Ordinary of Cobb County

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, M W Shaw, hereby authorize John Awbrey of

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

at

In Witness Whereof, I have hereunto set my hand and seal, this 12

day of Jany 1905. Malissa W Shaw Mark [L. S.]

Executed in presence of
J M Gann

Shaw, W. Malissa (Mrs)
Cobb Co.

To Those Heretofore Paid.

1905.

No. 271

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs. M W Shaw
OF
Cobb County,

Widow of

Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/23 1905.

AND HANDED TO
Dey

THE FRANKLIN PRINTING AND PUBLISHING CO. ATLANTA.
GEO. W. HARRISON, MANAGER FOR STATE PRINTER.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, , hereby authorize John Awbrey of

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

at

In Witness Whereof, I have hereunto set my hand and seal, this

day of Jany 1906. W M Shaw Mark [L. S.]

Executed in presence of
J M Gann

Shaw, W. Malissa
Cobb Co.

To Those Heretofore Paid.

1906.

No. 180

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO
Mrs. W M Shaw
OF
Cobb County,

Widow of J S Shaw

Co. 10/79 Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/22 1906,

AND HANDED TO
Dey

THE FRANKLIN PRINTING AND PUBLISHING CO., GEO. W. HARRISON, MGR.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. Malissa W Shaw

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 18 . That she is the Widow of J S Shaw who was a soldier in Company of the 10 Regiment of Volunteers, that he enlisted in said regiment on or about the month of 186 and served in the Army up to 186 . That he lost his life on the day of 18 (State here particulars of the husband's death, when, where and from what cause.)

Killed in battle in North Carolina

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

I have been paid a pension as a resident of Cobb County for the year ending December 31, 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this 12 day of Jany 1905. John Awtrey, Ordinary. } Malissa W her Shaw mark Post-Office

State of Georgia, Cobb County } I, ~~M W S~~ John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. M W Shaw, Who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 12 day of Jany 1905

{ Official Seal. } John Awtrey Ordinary of Cobb County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. W M Shaw

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 That she is the Widow of J S Shaw who was a soldier in Company of the 10 Ga Regiment of Volunteers, that he enlisted in said regiment on or about the month of 186 and served in the Army up to 186 That he lost his life on the day of 18 (State here particulars of the husband's death, when, where and from what cause.)

Killed in battle

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

I have been paid a pension as a resident of Cobb County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 20 day of Jany 1906. John Awtrey, Ordinary. } W. M. her x mark Shaw Post Office

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

Given under my official signature and seal, this the 20 day of Jany 1906.

{ Official Seal } John Awtrey Ordinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY,

I, W. Melissa Shaw hereby authorize
John Gwiting
to receive and receipt for the pension paid hereon, and request that he remit same to
at

In Witness Whereof, I have hereunto set my hand and seal, this 5
day of January 1907.

W. Melissa her mark Shaw [L. S.]

Executed in presence of

Shaw, W. Melissa
Cobb County
To Those Heretofore Paid.

1907.

No. 164

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO
Mrs. W. Melissa Shaw
OF
Cobb County,
Widow of J. S. Shaw
Co. 10 Regiment Ga.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/21 1907,
AND HANDED TO
6

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. W. Melissa

who, being sworn says on oath, that she is a bona fide resident of said County of ~~J S Shaw~~ Cobb State of Georgia, and that she has RESIDED in said State continuously ever since Jany 1-1894. That she is the Widow of J S Shaw who was a soldier in Company of the 10th Regiment of Ga. Volounteers, that he enlisted in said regiment on or about the month of 1864, and served in the Army up to 1865. That he lost his life on the Killed in day of battle 1865 (*State here particulars of the husband's death, when, where and from what cause.*)

Killed in battle in N. C.

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

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

Sworn to and subscribed before me this 5 day of Jany 1907.
John Awtry, Ordinary.

W. Melissa her Shaw mark
Post Office

State of Georgia, Cobb County. } I, W. Melissa Shaw Ordinary of said County, certify that I am well acquainted with Mrs. W. Melissa Shaw, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1 day of Jany 1894.

Given under my official signature and seal, this the 5 day of Jany 1907.

{ Official Seal }

John Awtry
Ordinary of Cobb County.

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

. . J. M. STONE, . .

Ordinary and Judge Probate.

OFFICE OF ORDINARY,

COBB COUNTY, GA.

Marietta, Ga. Feby 24 1897

Richard Johnson:

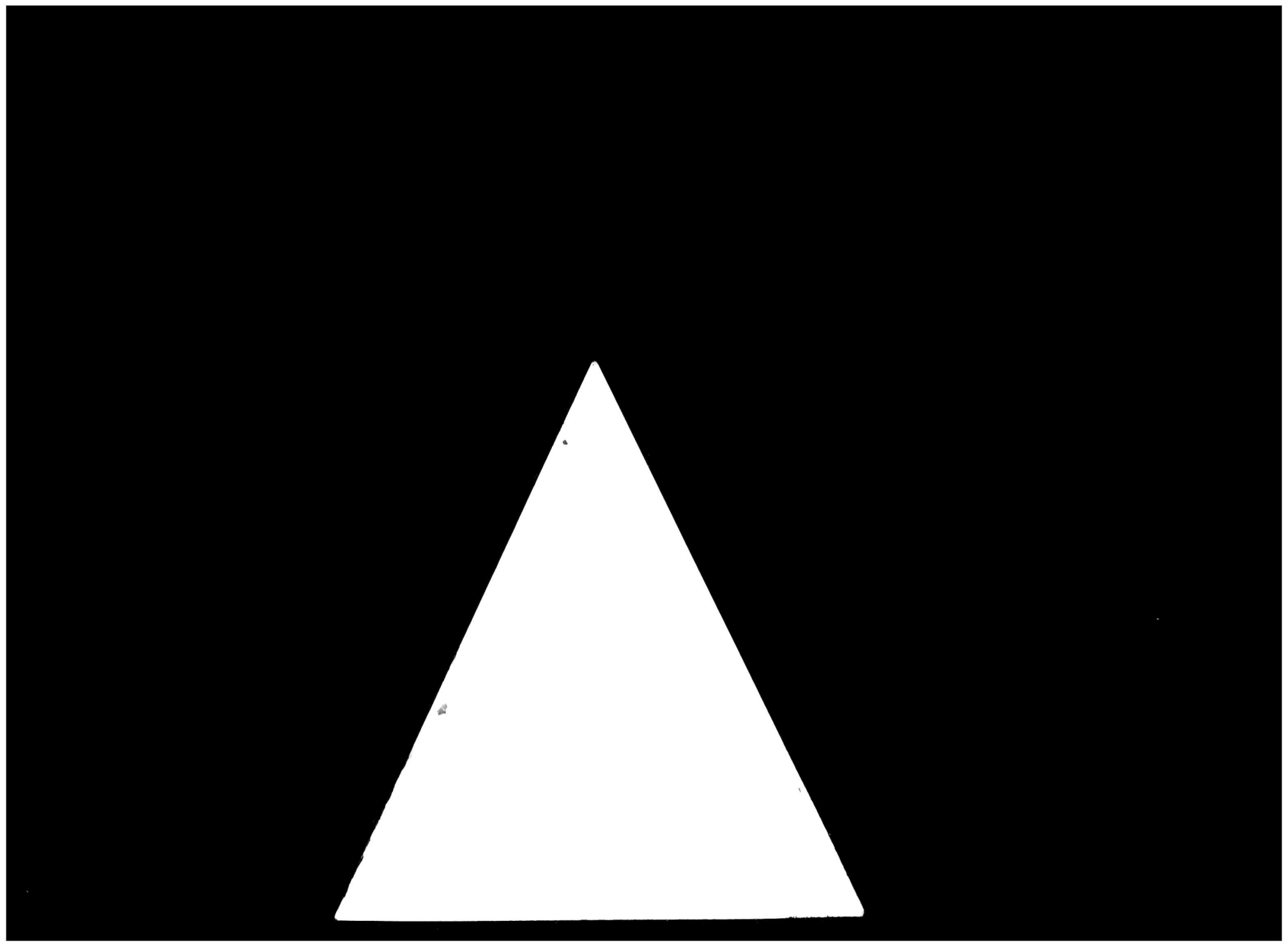
Dear Sir:

The bearer of this application for pension is the son of Mrs. W. M. Shaw the applicant. He is going to Atlanta today and I transfer the authority of the Power of Atty. to him, so he can draw the money.

Yours Truly

J. M. Stone

Ordy.



Sherman Forgeth
Cobb County

No. 1902

INDIGENT PENSION,

1901.

Name Geo. W. Sherman

County Cobb

Co. E. 1st Ga. Regls. Reg'm't

Approved 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

91-1902

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County. }

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1901.

Executed in presence of _____ [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1901.

_____ [L. S.]

Executed in presence of

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office) Geo. W. Sherman, Marietta, Cobb County, Ga.

2. How long and since when have you been a resident of this State? All my life - Since 1844 - 58 years -

3. When and where were you born? On 1844 - Cobb County, Ga.

4. When and where and in what company and regiment did you enlist or serve? First enlisted in Co. I 28th Ga. Afterwards, in latter part of 1864 transferred to Co. E 1st Ga. regulars - 1st enlistment at Marietta, Ga. August 1862 -

5. How long did you remain in such company and regiment? Remained in Co. [illegible] latter part 1864 - Then in Co. E. 1st Ga till surrender of Johnson's Army in 1865 -

6. When and where was your company and regiment surrendered and discharged? Greensboro N.C. with Johnson's Army, May 1865 -

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

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

9. How much can you earn (gross) per annum by your own exertions or labor? Not over $50 -

10. What has been your occupation since 1865? Farming -

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Age, infirmity & poverty.

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? For six or seven years I have not been able to earn support. I have a disease of the back and hips which disables me from labor - This has been growing on me for several years -

13. What property, real or personal, or income, do you possess, and its gross value? Nothing of any value - A little household furniture -

14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899 and 1900 & 1901 and what disposition, if any, by sale or gift, have you made of same? Nothing except A little household goods - Disposed of nothing -

15. In what County did you reside during those years, and what property did you then return for taxation? In Cobb County - Gave in $150.00 worth land - It did not belong to me - I gave it in for the Mal Comb estate -

16. How were you supported during the years 1899 and 1900? By my labor and my 3 Girls - Two of them have since married -

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Dont know exactly - My labor was about half -

18. What was your employment during 1900 and 1901? What pay did you receive in each year? Farming - Received no Salary -

19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? A wife and one daughter about twelve years old - Have no homestead - and no means of support -

20. Are you receiving any pension? If so, what amount and for what disability? None -

21. Have you ever made an application for pension before? Yes -

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

Sworn to and subscribed before me this the 15th day of Feby. 1902.

Geo. W. his Sherman mark Applicant.

John Anthony Ordinary,

of Cobb County.

Every Question MUST be Answered!

Sherman Geo. W. Cobb County

No. 1902

INDIGENT PENSION,

1901.

Name Geo. W. Sherman

County Cobb

Co. E 1st Ga. Regs. Reg'm't

Approved 1901.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

5/1-1902

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb COUNTY.

W. A. Barfield, of said State and County, having been presented as a witness in support of the application of Geo. W. Sherman for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W. A. Barfield. Marietta, Cobb County Ga.
2. Are you acquainted with Geo. W. Sherman the applicant; if so, how long have you known him? Yes - Ever since Jany 20th 1864.
3. Where does he reside, and how long and since when has he been a resident of this State? He resides at Marietta Ga. Has resided in this County since 1864.
4. When, where and in what company and regiment did he enlist, and how do you know? He was in Co. I. 28th Ga. Regt. When I joined it in Jany. 1864 he were both afterwards transferred to Co. E. 1st Ga. Regulars
5. Were you a member of the same company and regiment? Yes.
6. How long did he perform regular military duty? I know he performed it 16 months
7. When and where was his command surrendered? At Greensboro N.C. April 26th 1865.
8. Were you present when it surrendered? Yes.
9. Was applicant present? Yes.
10. If he was not present, where was he? He was present

When did he leave his command? — For what cause? —

By what authority he left? — How do you know all of this?

I was in same Co. with him

11. What property, effects or income has the applicant? (Give your means of knowledge.) None. By living by him for 10 or 12 years.
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899 and 1900, and what disposition, if any, did he make of same? None
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? He has not
14. What is the applicant's occupation and physical condition? Farming He is not able to do Manual labor
15. Is the applicant unable to support himself by labor of any sort, if so, why? He is not. On account of his shoulder and back being affected in some way
16. How was he supported during the years 1898, 1899 and 1900? By what little labor he could do himself and by aid of his wife
17. What portion of his support for these three years was derived from his own labor or income? Hardly one half
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? I only know that he has suffered for several years from some infirmity of his back and shoulders
19. What interest have you in the recovery of a pension by this applicant? None whatever

Sworn to and subscribed before me, this the 19th day of Feby. 1902.

W. A. his x mark Barfield answers questions 1 to 11

John Awtry Ordinary.

George W. Trulove answers questions 11 to 19

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me Gilbert Tennent MD and E. J. Setze MD, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully G. W. Sherman, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

He is fifty eight years of age; and on account of Age and Infirmity, (Cronic Cystitis) and Poverty, he unable work sufficiently to be self supporting, at this avocation of Farming

They further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 19th day of Feby. 1902.

Gilbert Tennent MD
E. J. Setze MD

John Awtry Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
COUNTY.

I, Ordinary in and for said County, hereby certify that the applicant resides in said County, and has been a bona fide resident of this State since the day of 189 and that the witnesses, viz:

are of trustworthy character, and that their statements are entitled to full faith and credit.

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

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

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

Witness my hand and seal of office, this day of 1901.

Ordinary,

of County

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, G. W. Sherman hereby authorize John Awtry of Marietta, Ga. to receive and receipt for the pension allowed and request that he remit same to me at his office by hand

Witness my hand and seal, this 3 day of Jany 1903

G. W. his x mark Sherman [L. S.]

Executed in presence of

CODE SECTION 1254
(FOR THOSE ALREADY ENROLLED.)

No. 531

INDIGENT
SOLDIER'S PENSION
1902. 1903

Name G. W. Sherman
County Cobb
Co. E 1st Regiment Mys.

WARRANT ISSUED
1/3 1903

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, G. W. Sherman, hereby authorize John Awtry of to receive and receipt for the pension allowed, and request that he remit same to at by

WITNESS my hand and seal, this 5 day of Jany 1907.

[illegible] [L. S.]

Executed in presence of

[illegible]

Sherman G. W.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 52

INDIGENT
SOLDIER'S PENSION
1907.

Name G. W. Sherman
County Cobb
Co. E 1st Regiment

WARRANT ISSUED
JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

C. S. 28th Regt Ga Inf

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears G. W. Sherman of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18 44 that he is 58 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 7 years in Company E, of 18 Regiment of Ga Regulars; that his physical condition is as follows: Born infirmity & poverty he cannot support himself

that his property consists of the following items

Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902 I have heretofore as a resident of Cobb county been allowed a pension for the year 1902.

Sworn to and subscribed before me, this the 22d day of January 1902

his
G. W. X Sherman
mark

John Dunlap Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Dunlap Ordinary of said County, do certify that I am well acquainted with G. W. Sherman 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 22d day of January 1902.

John Dunlap

Ordinary Cobb County.

Affix your seal here

NOTE.—The blank spaces must be filled
NOTE.—Affidavit should not be attested before January 1st, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

C. S. 28th Regt Ga Inf

State of Georgia,
Cobb County.

Personally appears G W Sherman of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18____; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company E, of 18th Regiment of Regulars; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items.

Nothing

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of ____ County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 5 day of Feb 1907.

his
G W X Sherman
mark

John Dunlap Ordinary.

State of Georgia,
Cobb County.

I, John Dunlap Ordinary of said County, do certify that I am well acquainted with G W Sherman 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 1907.

John Dunlap

Ordinary Cobb County.

Affix your seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA, [illegible] COUNTY.

I, [illegible] hereby authorize [illegible] of [illegible] to receive and receipt for the pension allowed and request that he remit same to [illegible] at [illegible] by [illegible]

Witness my hand and seal, this [illegible] day of [illegible] 1904.

[illegible] [L. S.]

Executed in presence of

[illegible]

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. [illegible]

INDIGENT
SOLDIER'S PENSION
1904.

Name [illegible]
County [illegible]
Co. [illegible] Regiment [illegible]

WARRANT ISSUED [illegible] 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO [illegible]

GEO. W. Harrison State Printer Atlanta

no data

Sherman, G. W.
Cobb Co.
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 7-5-7

INDIGENT
SOLDIER'S PENSION
1905.

Name G W Sherman
County Cobb
Co. 2 Regiment 1st

WARRANT ISSUED [illegible] 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO [illegible]

GEO. W. HARRISON, MANAGER STATE PRINTER, ATLANTA.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I G W Sherman hereby authorize John Autrey of [illegible] to receive and receipt for the pension allowed, and request that he remit same to [illegible] at [illegible] by [illegible]

WITNESS my hand and seal, this 6 day of Jany 1905.

G W (his mark) Sherman [L. S.]

Executed in the presence of

[illegible]

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, G W Sherman hereby authorize
John Awtrey of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 11 day of this Jan 1904.

G W Sherman [L. S.]
Mark

Executed in presence of
J M Gann

Sherman, G. W.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. [illegible]

INDIGENT
SOLDIER'S PENSION
1904.

Name G W Sherman
County Cobb
Co. E Regiment 1st

WARRANT ISSUED
1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Only

Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, G W Sherman hereby authorize
John Awtrey of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 7th day of Jany 1905.

G W Sherman [L. S.]
Mark

Executed in the presence of
J M Gann

Sherman, G. W.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 757

INDIGENT
SOLDIER'S PENSION
1905.

Name G W Sherman
County Cobb
Co. E Regiment 1st

WARRANT ISSUED
28 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
O

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no data

Co. D. 28th Regt. Ga. Inf. and

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears G. W. Sherman of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of 1844; that he is 57 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 2 Years in Company D, of 1st th Regiment of Ga. Regulars; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items: Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 1 day of Jan 1904. John Awtrey Ordinary.

G. W. Sherman
Mark

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 12 day of Jan 1904.

John Awtrey
Ordinary Cobb County.

Affix your Seal here.

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

Co. D. 28th Regt. Ga. Inf. and

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears G W Sherman of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of 1844; that he is 60 years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 2 years in Company D, of 1st th Regiment of Ga. Regulars; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: Nothing

of the value of ____ Dollars. I am now earning, by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 1 day of Jany 1905. J. W. Gann Ordinary.

G W his Sherman
Mark

STATE OF GEORGIA,
Cobb County.

I, John Awtrey, Ordinary of said County, do certify that I am well acquainted with G W Sherman 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 1 day of Jany 1905.

John Awtrey
Ordinary Cobb County.

Affix your Seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, G W Sherman hereby authorize John Hodney of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____

WITNESS my hand and seal, this 9th day of Jany 1906.

G W Sherman [L. S.]

Executed in the presence of

J M Gaines

Sherman, G. W.
Cobb [illegible]

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 711

INDIGENT
SOLDIER'S PENSION
1906.

Name G W Sherman
County Cobb
Co. _____ Regiment _____

WARRANT ISSUED
1/32 _____ 1906.

JOHN W. LINDSEY.
Commissioner of Pensions.

WARRANT HANDED TO
Cobb

THE FRANKLIN PRINTING AND PUBLISHING CO., GEO. W. HARRISON, MGR.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears G W Sherman of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company E, of 1 Geo Regiment of ____; that his physical condition is as follows: Defective Eyesight

that his property consists of the following items: ____

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 3 day of Jany 1906. John Awtry Ordinary.

G W Sherman
Mark

State of Georgia,
Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with G W Sherman 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.

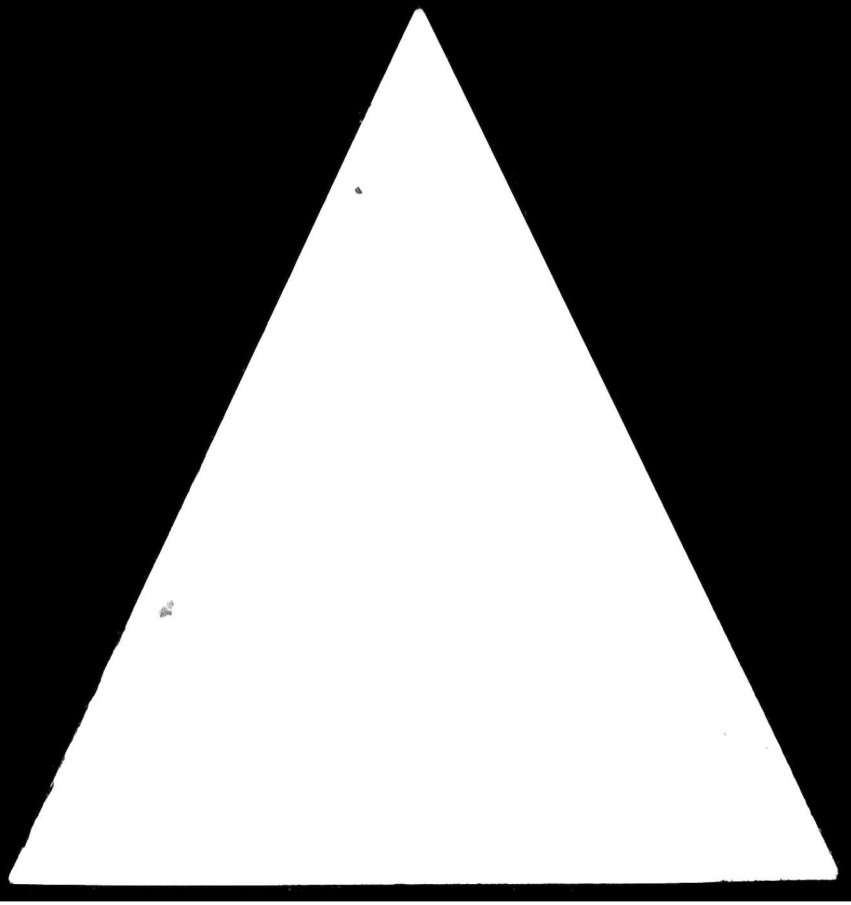
Given under my official signature and seal, this 3 day of Jany 1906.

John Awtry
Ordinary Cobb County.

Affix your seal here

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

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



Shipp, J. P.

Disapproved

11/2-1915

No.

Disapproved file

Confederate

Soldier's Application.

UNDER ACT 1910.

County Cobb

Name J. P. Shipp

Company Capt Russons Co

Regiment Wofford's Brigade

Approved

ERC 1941

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

11/1/15

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Cobb County.

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

1. What is your name and where do you reside? (Give County and Post-office)
J. P. Shipp Acworth Cobb County

2. How long and since when have you been a continuous resident citizen of this State?
All my life 70 years old

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes 1st 2 Ga. C. C. State Troops was wounded and after recovering

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Mar 1 1864 Paulding Co in Capt Runnions Co Moffets Command

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) Until May 16/65, Six months & 16 days

6. When and where was your Company and Regiment surrendered or discharged from the Service?
May 16 1865. at Kingston Ga

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were.
I was present

a. Where was your Command when you left it? Kingston

b. When did you leave the Command? May 16/65

c. For what cause did you leave? War was over

d. By whose authority did you leave? —

e. For how long was your leave granted? In what way? —

f. Why did you not return to your Command after leave expired? —

g. In what way were you prevented? —

h. What effort did you make to return? —

i. Were you captured during the war? No

j. If so, when, and where? In what prison were you held and when were you released?
—

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.)
107 acres of land Value $1200.00
Household goods 50.00

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list).
Same as Above

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? Rent receipt of land $75

13. Are you drawing a pension of any amount from this State or the United States?

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 9 day of October 1915.

J. H. Brown Ordinary

of Cobb County.

J. P. Shipp

Co. K Kennedy's Battery Cobb Artillery Reserves
Enlisted Mar 1st 1864 Discharged May 16th 1865
Age 70 years

Confederate

Soldier's Application.

UNDER ACT 1910.

County Cobb

Name J. P. Shipp

Company Capt Runnions Co

Regiment Moffets Brigade

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS P BYRD, State Printer, Atlanta.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Paulding County.

G R Ellsberry of said State and County is hereby presented as a witness in support of the application of J P Shipp for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? G R Ellsberry Dallas Paulding County Ga
2. How long and since when have you known J P Shipp the applicant? Since 1864
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? In Cobb County Ga and has been a continuous resident of said County since the civil war I live near him
4. When, where and in what Company and Regiment did J P Shipp enlist during war from 1861 to 1865? (Give date and place) Aug 1864, Paulding Co Ga, Capt Russ Cons Company, Gen Joseph E Johnston Command
5. How did you obtain your information of this Service? Served with him
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) from Nov 1st 1864 to May 16th 1865
7. When and where was his Command surrendered or discharged (give date and place) May 16th 1865 at Kingston Ga
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? Yes
11. If not where was he and how came him there?
12. When did he leave his Command? Where was his Command when he left it? for what cause did he leave? By whose authority did he leave and how long was he granted leave? How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was in the same command with him
13. In what way was he prevented from returning to his Command? How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner No If so, when and where? In what prison was he held? and when released

Sworn to and subscribed before me, this the 15th day of Sept 1915

D F Wells Ordinary,
of Paulding County.

G R Ellsberry
1896 Paulding Co

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
Cobb County.

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

102 acres of land Valued at 1275.00
Household goods " 75.00

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) No
2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant?
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full values? or was it made to obtain a pension?

Sworn to and subscribed before me, this the 4 day of Oct 1915

O M Wigley
W H Kemp

J M Gann Ordinary,
of Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J M Gann Ordinary of said County, certify that I know the applicant J P Shipp for Pension is the person he represents himself to be and resides in said County. That I also know the witness swearing to the service and O M Wigley & W H Kemp who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of Cobb shows that J P Shipp and wife value for tax is in 1908 $1915.00 for 1909 $.00 for 1910 $Digest Ret.00 for 1911 $2300.00 for 1912 $2235.00 for 1913 $1885.00 1915 — 1885

Sworn under my hand and official seal of office this day of 191

Ordinary,
of County.

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

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

How do you know? .....

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

.....

15. Was applicant captured as a prisoner..no.....If so, when and where?.....

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

.....

Sworn to and subscribed before me, this the 15-th day of Sept 1915

G R Ebberry
1896 Paulding Co

D J. Mills .....Ordinary,

of Paulding .....County.

.....Ordinary,

of.....County.

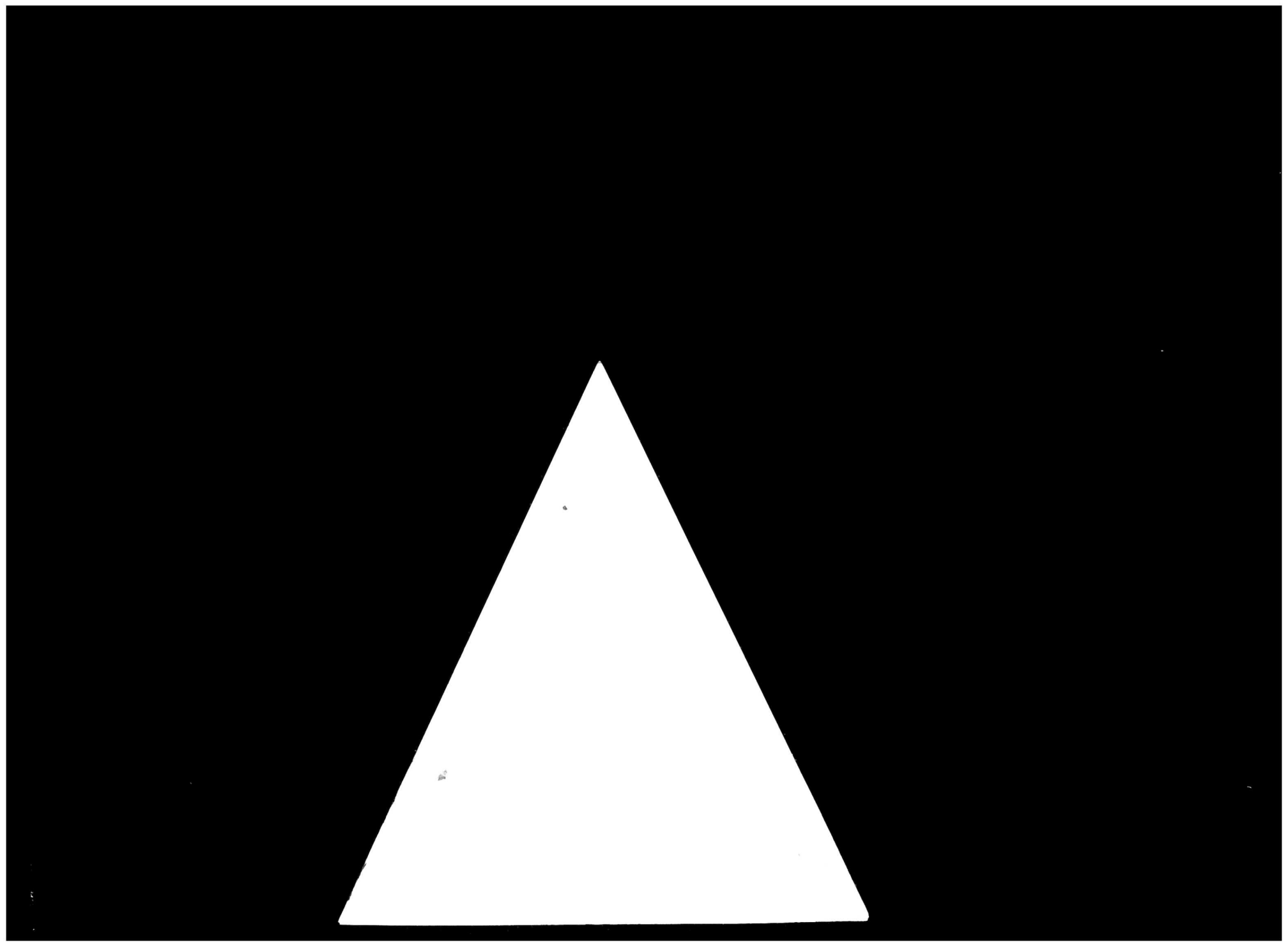
NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
2. Additional affidavits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

GEORGIA PAULDING COUNTY.

I D J. MILLS Ordinary of Paulding County Ga certify that I am personally acquainted with G R Ebberry whose name appears on the attached affidavit, That he is a citizen of this County, and that he is a man of good moral character and is every way worthy of belief and credit.

Given under my hand and the seal of said Court. This 12th day of Oct 1915.

D J. Mills Ordy



Simmons, Laura A.
Cobb County
OK for 1907

No. 62 off

WIDOW'S INDIGENT PENSION.

1903.

Name Laura A. Simmons

County Cobb

Widow of W. H. Simmons

Co. H. 42nd Ga. Regt.

Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

_____

_____ 1903.

Geo. W. Harrison, State Printer, Atlanta.

9/8/04
62-06

Pension Office, 9/22/04.

No testimony has been submitted to prove the service of the husband as stated in application. Must be done.

J. W. Lindsey,
Com. of Pensions.

POWER OF ATTORNEY.

STATE OF GEORGIA, _____ County.

_____ hereby authorize _____

of _____ County, to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190__

Executed in presence of

_____ Ordinary, _____ L. S.

_____ County.

SEAL

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____ County, to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190

Executed in presence of

_____

Ordinary, L. S.

_____ County.

(SEAL)

Personally appeared before me _____ who on oath says that he signed the above power of attorney in my presence.

Sworn to and subscribed before me this _____ day of _____ 1903.

_____ J. C.

No. _____

WIDOW'S INDIGENT PENSION. 1903.

Name Laura A. Simmons

County Cobb

Widow of W.H. Simmons Co. H. 42nd Ga. Regt.

Approved _____ 1903.

JOHN W. LINDSEY, *Commissioner of Pensions.*

WARRANT HANDED TO _____ 1903.

Geo. W. Harrison, State Printer, Atlanta.

Simmons, Laura A.
Cobb County
A. Sept 1903

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cobb County.

Laura A. Simmons of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? *(Give State, County and Post-office)* Laura A. Simmons, Marietta, Cobb County, Ga.

2. How long and since when have you been a resident of this State? Since the Fall of ~~1865~~ - Was raised in this State - Lived in Arkansas 19 years from ~~1865~~ to 1890 -

3. When and where were you born? Walton County, Ga. Dec. 20th 1843.

4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license in every case.) W.H. Simmons - Was born in Walton County Ga. in 1835 - We were married in Walton County March 10th 1859 - Maiden name Laura A. Young

5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? He enlisted March 4th 1862, Co. H. 42nd Regt. Ga. Vols. Ft Monroe, Walton County, Ga.

6. How long did your husband serve in said Company and Regiment? March 4th, 1862 to May 2nd 1865, little over 3 years -

7. When and where did your husband's Company and Regiment surrender and was discharged? ~~Greensboro~~ Charlotte N.C. at end of war -

8. Was your husband present at the time and place when his Company and Regiment surrendered? No -

9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? He was at Augusta, Ga. under detail - He was discharged at Augusta May 2nd 1865 - (See Company's Papers attached)

10. When and where did your husband die? In Cobb County, Ga. Sept. 29th 1902.

11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty? 1st & 2nd Grounds -

12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight? I am sixty years old and have no health - For several years have unable to do anything but a little house work - Cannot earn anything -

13. What has been your occupation since your husband's death? Nothing but do a little house work -

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

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

16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1899, 1900, 1901 and what disposition, if any, by sale or gift, have you made of the same? Nothing

17. In what counties did you reside in 1899, 1900, 1901 and 1902, and what property did you return for taxation? Cobb County - Returned no property -

18. How have you been supported since death of husband, and especially for 1899, 1900, 1901 and 1902? By my Children

19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? About 60 to 75 dollars - I contributed nothing -

20. What was your employment during 1899, 1900, 1901 and 1902—how much did you receive for each year? Kept house with my daughter - Received no pay -

21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? One Son 16 years old - Balance of support from Husband

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

23. How many applications have you made for a Pension, and under what class? None -

Sworn to and subscribed before me this 19th day of Sept 1903

Laura A Simmons

John Lindsey Ordinary,

of Cobb County.

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA, Cobb County.

W. J. Enbanks of said State and County, having been presented as a witness in support of the Application of Mrs. Laura A. Simmons for a Pension under the Act of 1900, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W. J. Enbanks, Manella, Ga. Route No. 2
2. Are you acquainted with the applicant, Mrs. Laura A. Simmons
If so, how long have you known her? Yes, long on five years
3. Where does she reside and how long and since when has she been a resident of this State? In Cobb County, near me - About five years to my knowledge.
4. When and where was she born? Dont know
5. Were you ever acquainted with her husband? Yes
6. Where did she reside in 1861? Dont know of my own knowledge
7. When and to whom was he married? He + applicant lived together as man + wife + first knew them
8. When and where was he born? Dont know of own knowledge
9. How long have you known him? About five years
10. When and where did W H Simmons enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? Dont know
11. Were you a member of the same Company and Regiment? No
12. How long did he perform regular military duty? Dont know except from hearsay
13. When and where was his Company and Regiment surrendered and discharged from service? Dont know
14. Were you with the Command when it surrendered?
15. Was W H Simmons the husband of applicant present? Dont know
16. If not present, where was he?
17. When and where did he leave his command?
For what cause?
By whose authority he left?
How do you know all this? (State fully and clearly.)
18. When and where did W H Simmons die? September 1902, in Cobb County.
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? In Cobb County, Ga. About five years to my knowledge.
20. Do you of your own knowledge know that applicant is the lawful widow of W H. Simmons. If they lived as husband + wife, and he is now dead -
21. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes.
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? She lives on a little place her husband bought on credit before his death - It is still unpaid - She has no income -
23. What property, effects or income did applicant possess in 1899, 1900, 1901 and 1902, and what disposition did she make of it? Nothing but that named above - She has disposed of nothing - She is dependent on her Children who are of age.
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? Not that I know of.
25. What is applicant's physical condition and her chances and ability to earn a support? It is bad - She has rheumatism and is not able to do anything towards earning a support -
26. Is applicant able to earn a support at labor of any sort, if not, why? No on account of rheumatism + old age -
27. How was she supported for 1899, 1900, 1901 and 1902? By her husband till his death. Since then by her sons, who are grown + of age -
28. How much did applicant contribute to her support for last two years? Nothing I suppose -
29. Give a full and complete statement of applicant's physical condition? She has rheumatism in her knees, + can scarcely get about - She is sixty years old + feeble -
30. What interest have you in the recovery of this pension by the applicant? None -

Sworn to and subscribed before me this 31st day of August 1904
John Gurley Ordinary, Cobb County.

his
W. J. Enbanks.
mark
Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA, Cobb County.

Personally before me comes J. D. Middlebrooks and W. L. Wright, both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. Laura A. Simmons, applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this Chronic Rheumatism, also her age renders her unable to perform the necessary labor for her support.

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 2 day of June 1904
John Gurley Ordinary, Cobb County.

J. D. Middlebrooks
W. L. Wright

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Cobb County.

I, John Gurley Ordinary, in and for said County, hereby certify that the applicant, Mrs. Laura A. Simmons resides in said County, and has been a bona fide resident of this State since the about day of five years 18____, and that the witnesses, Mr. W. J. Enbanks are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses *before the same was signed and subscribed.*

I further certify that the tax digest of Cobb County shows that applicant returned for taxation in her own name in 1899 No dollars worth of property, and in 1900 No dollars worth of property, in 1901 No dollars worth of property, and in 1902 dollars worth of property.

Witness my hand and official seal this 31st day of August 1904
John Gurley Ordinary.
Cobb County.

SEAL

NOTES.—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 9th April, 1865, not entitled.
5. ..... Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy marriage license in every case, or show why it cannot be obtained.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Louza A Simmons, hereby authorize John Robey of _____

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

In Witness Whereof, I have hereunto set my hand and seal, this 7 day of May 1907.

Mrs Louza A Simmons [L. S.]

Executed in presence of
J W Gann

Simmons, Louza A.
Cobb County

To Those Heretofore Paid.

1907.

No. 101

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO
Mrs Louza A Simmons
OF
Cobb County,
Widow of W A Simmons
Co. _____ Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/31 1907.

AND HANDED TO

Geo. W. HARMON, STATE PRINTER, ATLANTA.

Form No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Cobb

PERSONALLY COMES MRS. Laura A. Simmons

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since. That she is the Widow of [illegible] who was a soldier in Company [illegible] of the [illegible] Regiment of Volounteers, that he enlisted in said regiment on or about the month of [illegible] 186[illegible], and served in the Army up to [illegible] 186[illegible] That he died on the [illegible] day of [illegible] 18[illegible]

Infirmity Pension

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[illegible]

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 5 day of Jan 1907. [illegible] Ordinary

Mrs Laura A Simmons

Post Office [illegible]

State of Georgia, Cobb County.

I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. Laura A Simmons, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the [illegible] day of [illegible] 18[illegible]

Given under my official signature and seal, this the 5 day of Jany 1907.

John Awtrey

Official Seal

Ordinary of Cobb County.

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

Georgia Walton County
Personally came before me B. F.
Blasingame and after being sworn
says that He was in Same Company
& Regiment with W. H. Simmons Company
H - 42 th Regiment he entered in
March 1862 and served until the
close of the war and was Honorably
discharged I was with him in Same
Company & Regiment our Command
was at or near Bentonville N. C.
our Command left Mississippi Coming
to South Carolina on the Rail Road
the Wagon train going through the Country
to Augusta Ga and at that place was
cut off from the Command Mr W. H.
Simmons was with the Wagon Crowd
and was captured at Augusta Ga
at the Surrender and was Paraled
at Augusta Ga I had a brother with
him I know the above facts to be true

Sworn to before me
Dec 27 1905
R. C. Knight Ordinary

Beverly F. Blasingame

Georgia Walton County
I R. C. Knight Ordinary Walton County certify
that the witness Beverly F. Blasingame
is of trustworthy character and his statement
is entitled to full credit In witness I have
set my hand & deal this Dec 27 1905
R. C. Knight Ordinary

Georgia Walton County

Personally Came before me W.H. Pannell and after being Sworn Says that he was present at the Marriage of W.H. Simmons and Miss Laura Swinney, in Walton County Ga. The 10th day of March 1859 I was present and Saw them, Married by Mr Hillsman Hawk. I was well acquainted with them -

W.H. Pannell

Sworn to and subscribed before me This Oct 6 1903

R.C. Knight ordinary
Walton County Ga.

Georgia Walton County

I R.C. Knight ordinary Walton County Ga do hereby certify that the witness W.H. Pannell is of trustworthy Character and his Statement is entitled to full faith and Credit and the affidavit was read and understood by the Witness before the Same was Signed

In Witness I have set my hand and affixed the seal of my Office This Oct 6 1903

R.C. Knight ordinary
Walton County Ga.

Sworn to and subscribed
before me this Oct 6 1903
R C Knight ordinary
Walton County Ga.

Georgia Walton County
I R C Knight ordinary Walton County Ga
do hereby certify that the witness W H
Parnell is of trustworthy character and
his statement is entitled to full faith
and credit and the affidavit was
read and understood by the witness
before the same was signed
In witness I have set my hand and
affixed the seal of my office this Oct 6 1903
R C Knight ordinary
Walton County Ga.

In Witness I have set my hand and affixed the seal of my office This Oct 6 1903

R C Knight Ordinary
Walton County Ga.

Headquarters, Augusta, Ga.

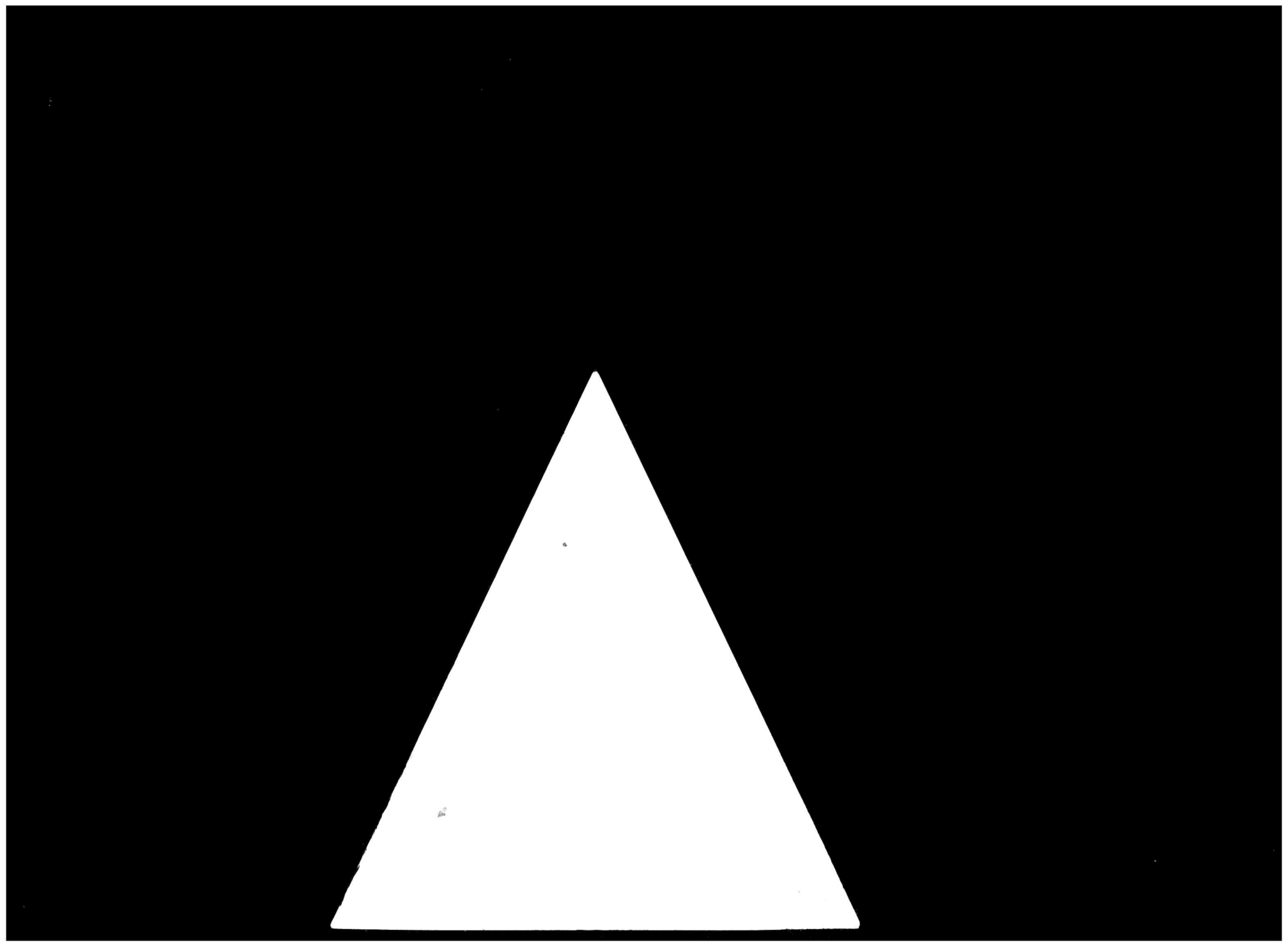
May, 1865.

The bearer, a

in Company Regiment, Vols.,

a Paroled Prisoner of the Army commanded by Gen. J. E. JOHNSTON, has permission to go to his home, and then remain undisturbed, on condition of not taking up arms against the United States until properly relieved of the obligation of his Parole.

By command of Brig. Gen. B. D. FRY.



Approved
Rich Johnson
No. 393 &c
Simpson, B.W.
Cobb

INDIGENT PENSION

1895.

Name B.W. Simpson

County Cobb

Ground

Aug 1 1890 ~~1895.~~

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Judge Stone

Geo. W. Harrison, State Printer, Atlanta.

Person or Order

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County

I, B.W. Simpson hereby authorize
J.M. Stone of Marietta Ga.
to receive and receipt for the pension allowed and request that he remit same to me
at by J.M. Stone
Witness my hand and seal this 23rd day of April 1895.

Executed in presence of
John Ogartree } B.W. Simpson

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, B. W. Simpson hereby authorize
J. M. Stone of Marietta Ga.
to receive and receipt for the pension allowed and request that he remit same to me
at by J. M. Stone

Witness my hand and seal this 23rd day of April 1895.

Executed in presence of
John A. Tice
B. W. Simpson

Proof ... Co.

Afforded Asst
No. 343
Dis. Clerk
Ordinary's Office

INDIGENT PENSION
1895.

Name B. W. Simpson
County Cobb
Ground

Aug 1 1896
RICHARD JOHNSON,
Secretary Executive Department.

WARRANT ISSUED TO
Jas. M. Stone

Geo. W. Harrison, State Printer, Atlanta.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office)
B W Simpson - Cobb Co. Ga. - Smyrna P.O.
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State?
In Cobb Co. Ga. — About 70 Years
3. When and where were you born? In 1814 — In South Carolina
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Ga. Militia
5. When and where did you enlist? In July 1863 — Cherokee Co. Ga
6. In what company and regiment did you enlist? Co. "B" Cherokee Legion
7. How long did you remain in that company and regiment? From July 21st 1863 till 21st July 1863
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
Was discharged when my time was out
9. For how long a period did you discharge regular military duty? Six Months
10. When, where and under what circumstances were you discharged from service?
I was discharged at the expiration of the time for which I enlistged, 6 months
11. What is your present occupation? Farming when I can work.
12. How much can you earn per annum by your own exertions or labor? Nothing at all
13. What has been your occupation since 1865? Farming
14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? $100. — None at all
15. What is your present physical condition and how long have you been in such condition?
I am diseased with Heart trouble & Rheumatism — am 81 years of age — am worn out
This condition has crept on me Year by Year
16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Age. Infirmity & Poverty
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight?
I am 81 Years of age — diseased with Heart trouble & Rheumatism — Am worn out as all Men are at my age — Has come on me as age Came on
18. What property, effects or income do you possess?
None at all
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same?
None at all
20. In what County did you reside during those years and what property did you then return for taxation?
In Cobb Co Ga. — None at all
21. How were you supported during the years 1893 and 1894?
By Charitable Aid from my friends —
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income?
Probably $100. — Nothing at all
23. What was your employment during 1893 and 1894? What pay did you receive in each year?
Could do Nothing — received No Pay
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support?
I am — Yes — Wife dead
2 Males — 3 Females — Aged 46. 30, 50, 44, & 30 Yrs
No means only their Labor.

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?

I do not

Sworn to and subscribed before me this the 23rd day of April 1895. } B. W. Simpson Applicant.

J. M. Stone Ordinary of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, Cherokee County.

Martin J. Smith, of said State and County, having been presented as a witness in support of the application of B. W. Simpson for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Martin Smith reside in Cherokee County
2. Are you acquainted with B. W. Simpson, the applicant, if so how long have you known him? Forty years
3. Where does he reside, and how long has he been a resident of this State? Resides in Cobb County Ga. I have known in the State for 40 years
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? he served in the State Militia I served with him
5. When, where and in what company and regiment did he enlist? Early 1863 in Cherokee County in Company B. Cherokee Legion
6. Were you a member of the same company and regiment? I was a member same Camp
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Six months he was discharged in January 1864
8. What property, effects or income has the applicant? (Give your means of knowledge.) can not answer in reference to his property Keheley's answers None at all — we are his neighbors
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? Keheley answers None at all
10. What is the applicant's occupation and physical condition? cannot answer Keheley answers farming when able to work physically he is worn out, not able to work
11. Is the applicant unable to support himself by labor of any sort, if so, why? I think he is Keheley answers he is unable to support himself at labor of any sort, on account of age & infirmity
12. How was he supported during the years 1893 and 1894? Don't know Keheley answers he was supported by his nephew & his children in 93 & 4
13. What portion of his support for these two years was derived from his own labor or income? Don't know — Keheley answers None
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? Cannot answer — Keheley answers On account of age, infirmity and disease &c. he is unable to do any work and has no income.
15. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this the 16th day of April 1895. } Martin J. Smith Applicant.

L. J. Keheley
James W. Keheley

J. C. Corns, Ordy of Cherokee County

Sworn to and subscribed before me April 23 1895 J. M. Stone Ordy Cobb Co. Ga. as to L. J. & J. W. Keheley

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, Cobb County.

Personally came before me Gilbert Tennent M.D. and E. J. Setze M.D., both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully B. W. Simpson, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

He is eighty one years old and seems be very infirm. Says he has Rheumatism

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 23 day of April 1895. } Gilbert Tennent M.D. E. J. Setze M.D.

J. M. Stone Ordy

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Cobb County.

I, J. M. Stone, Ordinary in and for said County, hereby certify that the applicant B. W. Simpson resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: L. J. Keheley Jas. W. Keheley, Gilbert Tennent M.D. & E. J. Setze M.D. are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1893, Nothing dollars of property, and in 1894, Nothing dollars of property.

Witness my hand and seal of office, this 23 day of April 1895.

J. M. Stone Ordinary of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, B. W. Simpson hereby authorize J. M. Stone of Marietta Ga

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12th day of Jany 1897.

Bales W Simpson [L. S.]

Executed in presence of
G M Fleming

ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)

No. 966

INDIGENT
Soldier's Pension.
1897.

Name B W Simpson
County Cobb

1/16 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Mr Stone

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

POWER OF ATTORNEY.

State of Georgia,
Cobb County.

I, B. W. Simpson hereby authorize J. M. Stone of Marietta Ga.

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13th day of Jany 1898.

B. W. Simpson [L. S.]

Executed in presence of
G M Fleming

Simpson, B. W.
Cobb Co

ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)

NO. 7178

INDIGENT
SOLDIER'S PENSION,
1898.

Name B W Simpson
County Cobb

WARRANT ISSUED
1/21 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J M S

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears B W Simpson Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of Aberit 1834 that he is 82 years old and by occupation a Farmer ; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 6 Mos or More in Company B , of Cherokee Legion Regiment of Ga Vols. ; that his physical condition is as follows: On account of my age and infirmity I am unable to do Scarcely any work.

that his property consists of the following items None

of the value of ~~~~ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Cobb county been allowed a pension for the year 189 6

Sworn to and subscribed before me, this the 12 day of Jany 1897. B W Simpson

J M Stone Ordinary.

STATE OF GEORGIA,
Cobb County.

I, J M Stone Ordinary of said County, do certify that I am well acquainted with B W. Simpson 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 Jany 1897.

Affix your seal here.

J M Stone Ordinary Cobb County.

NOTE.—The blanks spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears B W Simpson of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ~~Year~~ Seventy Years ; that he is 83 years old and by occupation a Farmer ; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 6 Months in Company B , of Cherokee Legion Regiment of Ga Volunteers ; that his physical condition is as follows: On account of age infirmity disease &c. he is unable to support himself by labor of any sort.

that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of Cobb county been allowed a pension for the year 189 7

Sworn to and subscribed before me, this the 13 day of Jany 1898. B W. Simpson

J M Stone Ordinary.

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 13th day of Jany 1898.

Affix your seal here.

J M Stone Ordinary Cobb County.

NOTE.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, B. W. Simpson, hereby authorize
J. M. Stone of Marietta
to receive and receipt for the pension allowed, and request that he remit same to
me at
by him

Witness my hand and seal this 13 day of Jany 1899.

Executed in presence of
B. W. Simpson (L. S.)
Pay to F. J. Hamby
Jany 20/99 J. M. Stone

CODE SEC. 1264.
(For Those Already Enrolled.)

No. 2576

INDIGENT
SOLDIER'S PENSION,
1899.

Name B. W. Simpson
County Cobb

WARRANT ISSUED
1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
F. J. Hamby

Geo. W. Harrison, State Printer, Atlanta.

No date

Simpson, B. W.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, B. W. Simpson hereby authorize
J. M. Stone of Marietta Ga.
to receive and receipt for the pension allowed, and request that he remit same to
me at
by him

Witness my hand and seal, this 15 day of Jany 1900.

B. W. Simpson [L. S.]

Executed in presence of
F. J. Hamby

CODE SEC. 1264.
(For Those Already Enrolled.)

NO. 814

INDIGENT
SOLDIER'S PENSION,
1900.

Name B. W. Simpson
County Cobb

WARRANT ISSUED
January 18 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Stone

Geo. W. Harrison, State Printer, Atlanta

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears B W Simpson Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 28th day of Feby 1814 that he is 84 years old and by occupation a Farmer ; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 6 mos in Company C of Cherokee Legion Ga ~~State troops~~ ; that his physical condition is as follows: On account of age Infirmity and poverty he is unable to support himself.

that his property consists of the following items

Nothing

of the value of ~~—~~ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one hereir applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Cobb county been allowed a pension for the year 1898

Sworn to and subscribed before me, this the 13th day of Jany 1899. J M Stone Ordinary.

B W Simpson

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 13th day of Jany 1899.

Affix your seal here.

J M Stone
Ordinary Cobb County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb **County.**

Personally appears B W Simpson of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 28th day of Feby. 1814; that he is 85 years old and by occupation a farmer ; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 6 mos. in Company C of the Cherokee Legion Ga ~~State troops~~ ; that his physical condition is as follows: On account of age, Infirmity and poverty he is unable to support himself

that his property consists of the following items

Nothing

of the value of ~~—~~ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cobb county been allowed a pension for the year 1899

Sworn to and subscribed before me, this the 15th day of January 1900. J M Stone Ordinary.

B W Simpson

State of Georgia,
Cobb County.

I, J M Stone Ordinary of said County, do certify that I am well acquainted with B W Simpson 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 Jany 1900.

Affix your seal here.

J M Stone
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, B W Simpson hereby authorize John Awtrey of Marietta to receive and receipt for the pension allowed and request that he remit same to at by hand

Witness my hand and seal, this day of 1901.

B W Simpson [L. S.]

Executed in presence of
Jas M Gann

Simpson, B. W.
Cobb Co.

CODE SECTION 1194
(For Those Already Enrolled.)

No. 243

INDIGENT
SOLDIER'S PENSION.
1901.

Name B W Simpson
County Cobb

WARRANT ISSUED
Jan 15 1901.

JOHN W. LINDSEY,
Commissioner of Pensions

WARRANT HANDED TO
Awtrey

Geo. W. Harrison, State Printer, Atlanta

No Data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appeare B W Simpson of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 28 day of Feb 1814; that he is 86 years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States and served for the term of 6 Mos in Company B, of Cherokee of Legion Ga State Troops; that his physical condition is as follows: on account of age Infirmity and poverty he is unable to support himself

that his property consists of the following items

Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Cobb county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the 7th day of January 1901.

John Awtrey Ordinary.

B W Simpson

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 7th day of January 1901.

Affix your seal here

John Awtrey
Ordinary Cobb County.

NOTE - The Blank spaces must be filled.
NOTE — Affidavit should not be attested before January 1st, 1901.

Given under my official signature and seal, this 7th

day of January 1901.

Affix your seal here

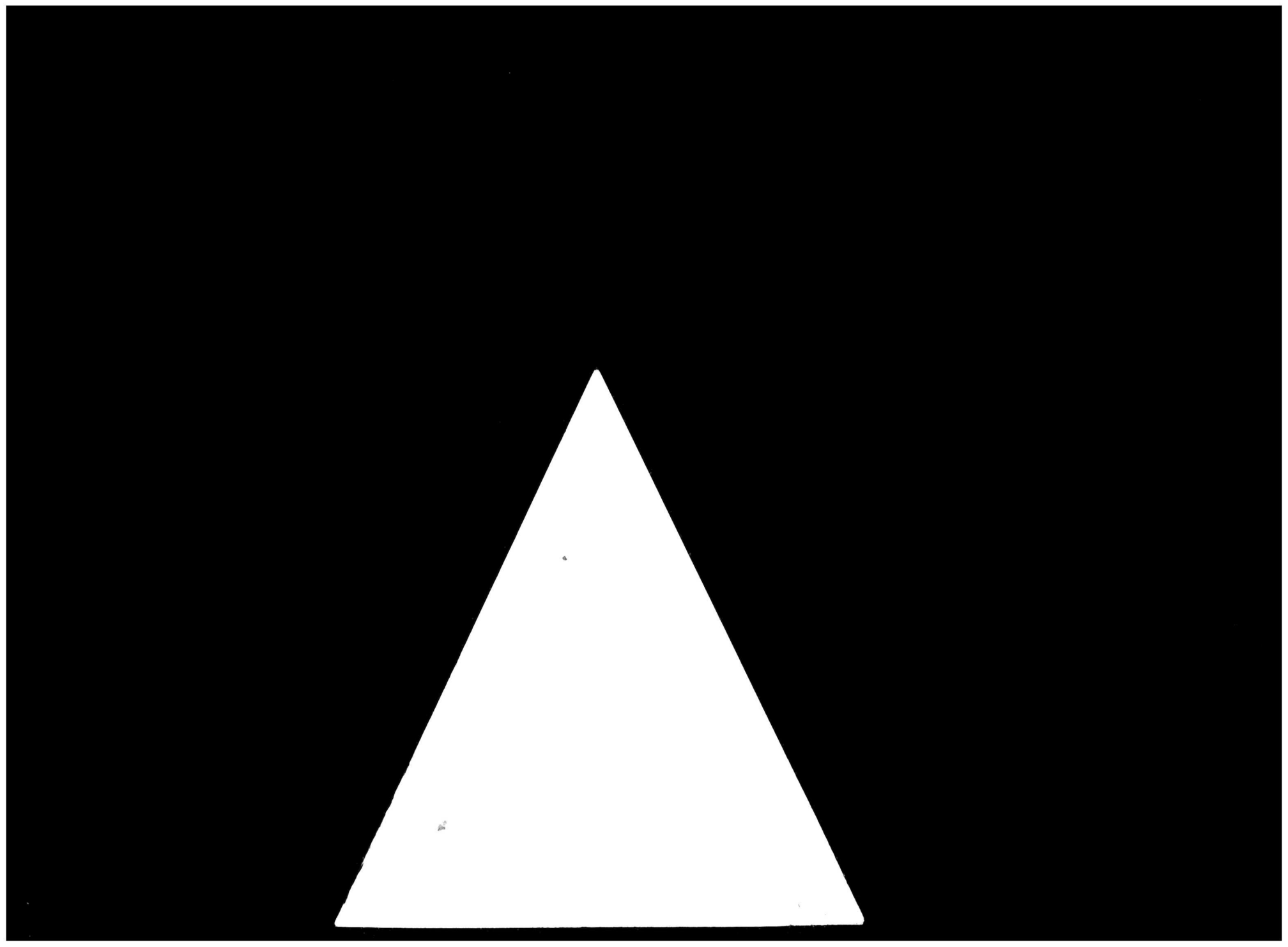
John Autrey
Ordinary Cobb County

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901.

State of Georgia
Cherokee County. Ex. C. C. Ordinary in and for said County certify that Martin J. Smith is a Citizen of this County and is of trust worthy character and that his statement is worthy of full force and credit

Witness my hand and seal of office April 16th 1895

D. C. C. Ordinary
of Cherokee County



Simpson Eliza J.
Cobb County

No.

Widow's Pension

UNDER ACT 1910.

Mrs Eliza J Simpson

County Cobb

Name

Widow of E. [illegible] Simpson

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer.

8/20/10

Simpson Eliza J.
Cobb County

No.

Widow's Pension

UNDER ACT 1910.

Mrs Eliza J Simpson

County Cobb

Name

Widow of Elias Simpson

J. W. LINDSEY,
Commissioner of Pensions.

Chas. P. Byrd, State Printer

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

STATE OF GEORGIA,
Cobb County.

Personally before me comes Mrs Eliza J. Simpson of said State and County, and after being duly sworn, on oath says that she desires to apply for a pension allowed under the Act of ..... 1910, and submit testimony to make out the same, true answers makes to the following questions to wit:

1. What is your name, and where do you reside? Eliza Jane Simpson - Cobb Co -
2. How long and since when have you been a continuing resident in the State of Georgia? All my life - Born in November 1846.
3. When, where and to whom were you married? Decr 1865 - Marietta Ga E. Jasper Simpson
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) In Novr 1862 in Cobb Co - in Co A. Lucas Bat Heavy Artillery
5. When and where did the Commands of your husband surrender or discharge from the army? Surrendered in April 1865 at Bentonville N.C. April 1865
6. Was your husband personally present at the time of the surrender or discharge of this Command? He was.
7. If he was not present state clearly where he was? ——
8. Where was his Command when he left? ——
a. For what cause did he leave his command? ——
b. By whose authority did he leave his Command? ——
c. For how long was he granted leave of absence? ——
e. What was his physical condition when he left his Command? ——
f. What effort did he make to return to his command? ——
g. In what way was he prevented from going back to Command? ——
h. Was he captured by the enemy at any time? Only when Surrendered
i. If so, when and where captured and where held as a prisoner, and when and for what cause released? ——

j. When and where did your husband die? Were you residing together when he died? If not, how long had you resided apart? For Cobb Co. April 17th 1899. We lived together
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items.) None

10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) None.

11. What property of any description of any value have you now? None
Give list and cash value? ——
12. What are your annual earnings or income and their value? I have no income except the little I can make working for others —
13. Have you heretofore been paid a pension by the State? None
If so, when and for what cause were you struck from the Roll? ——

Sworn to and subscribed before me this the 2nd day of Aug 1910

Mrs Eliza J her x mark Simpson

J. M. Lanton Ordinary
of Cobb County.

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

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? J. M. Robinson Cobb Co

2. How long and since when have you known Mrs E. J. Simpson applicant? all her life

3. How long and since when has she continuously resided in this State? (Give date.) Ever since she was born in Nov. 1846

4. When and to whom was she married? How do you know? E. Jasper Simpson - Dec 1865 I was a neighbor

5. How long and since when did you know E. Jasper Simpson her husband? Fifty Years

6. When, where and in what Company and Regiment did E. Jasper Simpson enlist? In November 1862 in Cobb Co. Company A. Lucas Bat Heavy Artillery - S. Cy Dols

7. Were you a member of the same Company? Yes

8. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Until Surrender in April 1865

9. When, and where did his Command surrender, and was discharged? Bentonville N. C

10. Were you personally present when it was surrendered? I was If not where were you —— and how came you there?

11. Was the husband of applicant personally present at surrender? Yes If not where was he? —— when, where and for what cause did he leave Command? (Give date.) —— By whose authority did he leave his Command? —— and how long was he granted leave? —— How do you know all this? I was there Do you state if of your own personal knowledge? (State all you know fully, and how you know it.)

12. For what cause, if you know of your own knowledge was he prevented from returning to his Command? ——

13. What effort did he make to return to his Command and how do you know this? Of you own knowledge or how?

Sworn to and subscribed before me this the 9th day of August 1910 J. M. his Mark Robinson

J. M. Gann Ordinary.

of Cobb County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA, Cobb County.

Personally before me comes J. M. Robinson who on oath says that they are freeholders of said County and that they know Mrs Eliza J. Simpson of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows No real Estate

Personal property None $

Notes and accounts due None $

Total $

Schedule (B).

We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:

Personal property None $

Money, Notes and accounts None $

Schedule (C).

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

No Acres of land worth $

No Horses and Mules $

No Cows and Hogs $

No Other property $

No income and earnings Except the little day work for others

Total Value of all property and effects $

Sworn and subscribed before me this the 9th day of August 1910 J. M. his Mark Robinson

J. M. Gann Ordinary. Joseph A. Chaney

of Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Cobb County.

I J. M. Gann Ordinary of said County do certify that I know Mrs Eliza J. Simpson the applicant for pension. She is the person she represents herself to be and she is a bonafide continuing resident citizen of said County and was in the 4th Nov. 1908.

That I also know J. M. Robinson the witness who swears to the service of husband, and who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Mrs Eliza J. Simpson Returned for Tax is for 1908 $ None for 1910 $ None

Sworn under my hand and official seal of office this 9th day of August 1910

SEAL. J. M. Gann Ordinary.

Cobb County

(SEAL.)

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

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

4 All affidavits must be made before the Ordinary.

3 Only widows who married prior to first January 1870, are entitled.

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

Simpson, Eliza J. (Mrs)

For Cobb County

1930

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness and funeral)

J. M. Gann Ordinary

For Mrs Eliza J Simpson

Date of Death May 31 1930

Amount $100.00

Approved and ordered paid

R. de T. Lawrence

~~JOHN W. CLARK~~,

Commissioner of Pensions.

[illegible] 24.

#25.00 refunded 1924.

Paid

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

GEORGIA, COBB COUNTY.

Received of J.M.GANN, ORDINARY, Cobb County, check for ONE HUNDRED DOLLARS, being payment for Funeral Expense of Pensioner, MRS. ELIZA J. SIMPSON, Deceased.

This 8 day of September 1930.

John S Dobbins Sons
By A. M. Dobbins

MARIETTA, GA. July 10th, 1930. 192

M Mr J S Frey, Marietta, Ga.

for Mrs Eliza Simpson, Decd.,

IN ACCOUNT WITH

John S. Dobbins & Sons

Funeral Directors—Embalmers

LADY ASSISTANT — DAY PHONES 437 AND 272

100 CHEROKEE STREET — AMBULANCE SERVICE

MOTOR EQUIPMENT — NIGHT PHONE 359-W

May 31st, 1930.

To casket, outside box, cross boards, grave lining, pall bearer gloves, hearse trip and all merchandise and services used for the funeral and burial of

Mrs Eliza Simpson----------$100.00

The above and foregoing account is rendered for funeral expenses of Mrs Eliza Simpson who died without owning sufficient property to pay this bill

John S Dobbins & Sons
By A. M. Dobbins Mgr.

Dated at Marietta, Ga
this July 10th, 1930. Sworn to and subscribed before me, July 10-1930
J.M. Gann Ordinary, Cobb County Ga.

Application for Pension Due to a Deceased Pensioner

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)

(Under Act Approved August 15, 1904)

GEORGIA, Cobb County.

Personally before me, the Ordinary of said County, comes J S Frey of said County, who, after being sworn, on oath says that he knew Mrs Eliza J Simpson of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in State Sanitorium Milledgeville Ga County, in this State, on the 31st day of May, 19 30, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of $ $100.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,

J. M. Ramey, Ordinary

Cobb County

(Seal of Ordinary)

J. S. Frey

CERTIFICATE OF ORDINARY

GEORGIA, Cobb County.

I, J. M. Ramey, Ordinary of said County, do certify that I personally know J. S. Frey, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs Eliza J Simpson while in life and that this was the same person whose name appears on the Pension Roll of Cobb County, and who was confined in State Sanitarium at Milledgeville where she died was paid a Pension of ($) Dollars in said County for 19, and I now believe said pensioner to be dead; and that the instructions at the foot of this voucher have been carefully observed in making up this voucher and the bills which are attached hereto.

Given under my hand and official seal, this 10 day of June, 1930

(Seal of Ordinary)

J. M. Ramey, Ordinary

Cobb County

INSTRUCTIONS:

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

2nd. Each account must be sworn to before the Ordinary, and in the following form:

"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of ....., who died without owning sufficient property to pay this bill.

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

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

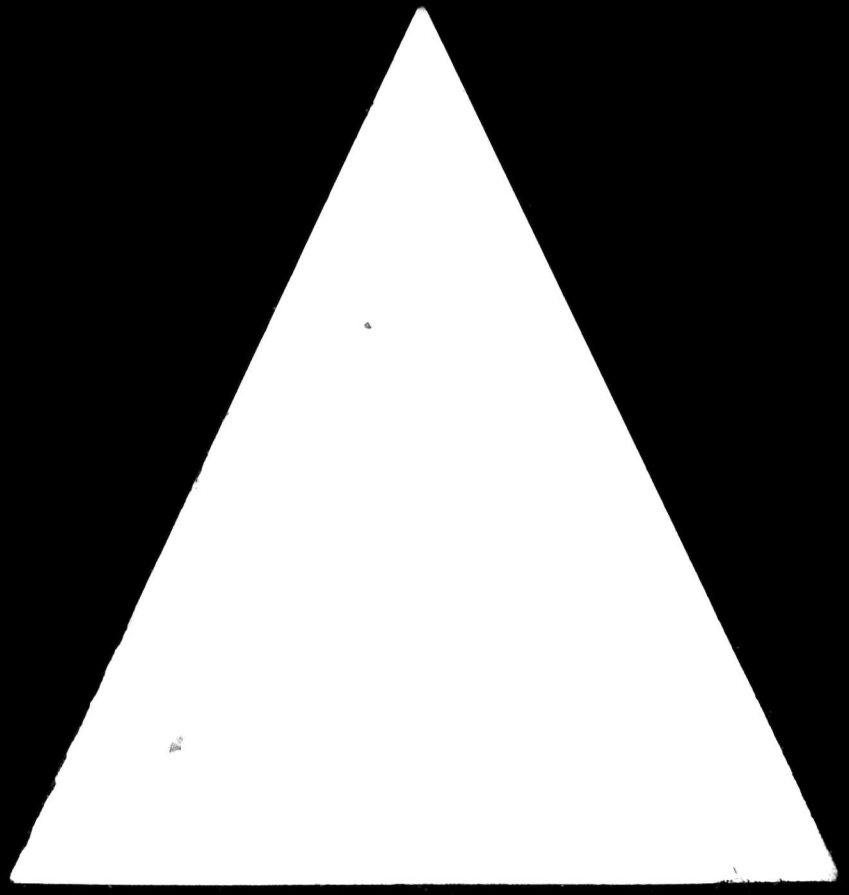
5th. Return this application, and attached bills, properly receipted, to the Pension Department.

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

money must be paid out until it is returned to you as your authority to make the payment.

5th. Return this application, and attached bills, properly receipted, to the Pension Department.

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



Simpson, E. J.
No. Cobb Co

NDIGENT PENSION

1898.

ame E. J. Simpson

ounty Cobb

pproved 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/28.98

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Cobb COUNTY. }

I, E. J. Simpson hereby authorize
13 Dec of Monroe Co
to receive and receipt for the pension allowed and request that he remit same to me by hand
at by

Witness my hand and seal this 18 day of Aug 1898.

Executed in presence of
J. M. Horn } E. J. Simpson [L.S.]

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Cobb COUNTY. }

I, E. J. Simpson hereby authorize
of Marietta Ga
to receive and receipt for the pension allowed and request that he remit same to me by hand
at by

Witness my hand and seal this 15 day of January 1898.

Executed in presence of } E J Simpson [L.S.]
}

INDIGENT PENSION 1898.

No. Cobb Co

Name E. J. Simpson

County Cobb

Approved

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/26.98

Questions for Applicant.

STATE OF GEORGIA, }
((((((County. }

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

1. What is your name and where do you reside? (give State, County and post office.) E J Simpson Marietta, Cobb County, Ga
2. How long and since when have you been a resident of this State? About 68 years
3. When and where were you born? 1831 8 miles east of Decatur
4. When and where and in what company and regiment did you enlist or serve? Feb 11 1863 Ga. Atlanta Ga. Company A. Fourth Battalion 14th South Cordeuse
5. How long did you remain in such company and regiment? from July 11 1862 until Close of the war Was surrendered at Greensborough N.C.
6. For how long a period did you discharge regular military duty? A little more than one year
7. When, where and under what circumstances were you discharged from service? At the Close of the war, at the surrender at Greensborough N.C I was discharged from further service with the surrendered army
8. What is your present occupation? Living on my home. My wife has lost my shoes
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing at all
10. What has been your occupation since 1865? Acting as was able to make a farmer.
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? On 1st 62 no
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I have been confined to my home for three years. I have not been able to do anything for that length of time. I received a stroke of paralysis about three years ago & have been confined to bed ever since
13. What property, effects or income do you possess and its gross value? I do not own any thing I am dependent on the mercy of the people
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897 and what disposition, if any, did you make of same? Nothing at all. Made no disposition of any thing.
15. In what County did you reside during those years and what property did you then return for taxation? Cobb County Ga, Made no return that ever
16. How were you supported during the years 1896 and 1897? By the good people of our County
17. How much did your support cost for each of those years and what portion did you contribute thereto by your own labor or income? I do not know. I have contributed nothing at all by my own labor
18. What was your employment during 1896 and 1897? What pay did you receive in each year? Staying in the house. I received no pay at all
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Yes My wife & I compose my family. My wife has a few chickens, a garden. Eggs &c. &c. I have no real estate. I own nothing. That may be left with assistance from the good people of Cobb Co
20. Are you receiving any pension, if so, what amount and for what disability? No one has ever

Every Question MUST be Answered

Sworn to and subscribed before me this the 15 day of January 1898. } E J Simpson Applicant.
J H Eidson Ordinary. Smyrna Ga

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb County.

W M Robertson, of said State and County, having been presented as a witness in support of the application of E. P. Simpson for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W M Robertson Marietta Cobb County Ga.
2. Are you acquainted with E. P. Simpson, the applicant, if so how long have you known him? About forty years
3. Where does he reside, and how long and since when has he been a resident of this State? Cobb County Ga ever since I knew him
4. When, where and in what company and regiment did he enlist, and how do you know? In 1862 with him at Atlanta Ga, Company A Lucas' Battalion Cavalry the war
5. Were you a member of the same company and regiment? Yes sir.
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About 3 years He was a courageous soldier. At the close of the war in 65. He was discharged from further service when he was surrendered
7. What property, effects or income has the applicant? (Give your means of knowledge.) Nothing as I know of
8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? He owns nothing. Has nothing to my knowledge
9. Has he conveyed away any of his property in the last three years, if so, what was it and to whom? Nothing to my knowledge. Therefore could make no disposition
10. What is the applicant's occupation and physical condition? Saying in the Recorders office and being crippled he has to employ assistance to work. He was struck with paralysis about 3 years ago
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is not able to do one half days work because of his physical condition which is such that he cannot do any hard work
12. How was he supported during the years 1896 and 1897? By the grace and charitable people of his county.
13. What portion of his support for these two years was derived from his own labor or income? Nothing at all
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He received a severe wound in the left lung and he is partially crippled in using his right arm and hand. He is broken down generally in health and quite feeble. Some one has to wait on him all the time.
15. What interest have you in the recovery of a pension by this applicant? None whatever

Sworn to and subscribed before me, this the 12 day of January 1898.
W M Robertson his mark Witness.
W M Stone Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me Gilbert Tennent M D and E. P. Fitzpatrick, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully Examined E. P. Simpson, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

He has Valvular Disease of Heart.
He received a contused Wound from a piece of shell striking him on Bullock at Battery Wagner, Charleston Harbor, and has been crippled ever since from its effects

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the 12 day of January 1898.
W M Stone Ordinary.
Gilbert Tennent M. D.
E. P. Fitz M. D.

ORDINARYS' CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, W M Stone, Ordinary in and for said County, hereby certify that the applicant E. P. Simpson resides in said County, and has been a bona fide resident of this State since the first day of June 60 Years or more and that the witnesses, viz.: W M Robertson, Gilbert Tennent M D E. P. Fitz M D. are of trust worthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1896 Nothing Dollars of property, and in 1897 Nothing Dollars of property.

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

Witness my hand and seal of office, this 12th day of January 1898
W M Stone Ordinary
of Cobb County.

NOTE.

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

the 12 day of [illegible] 1898.)

Witness.

Ordinary.

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

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

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

Simpson, Rebecca
Cobb, County

No.

WIDOW'S INDIGENT PENSION.

Name Rebecca Simpson

County Cobb

Widow of James Simpson
Co-Ee-C Ga Rgt

Approved

JOHN W LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

C. P. BYRD, STATE PRINTER, ATLANTA, GA.

9/30/09

POWER OF ATTORNEY.

STATE OF GEORGIA,
..... County.

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

Witness my hand this ..... day of ..... 190.....

Executed in presence of

..... Ordinary, ... L. S.

..... County.

[SEAL]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____ County to receive and receipt for the pension allowed

and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190__

Executed in presence of

_____ Ordinary, _____ L. S.

_____ County.

[SEAL]

Simpson Rebecca
Cobb County

No.

WIDOW'S INDIGENT PENSION.

Name Rebecca Simpson
County Cobb
Widow of James Simpson
Co. E. 6th Ga Rgt
Approved

JOHN W LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

C. P. BYRD, STATE PRINTER, ATLANTA, GA.

9/30/09

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

Cobb County.

Rebecca Simpson of said State and County, desiring to avail herself of the pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed December 19, 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.) P. O. Marietta State of Georgia Cobb Co
2. How long and since when have you been a resident of this State? Since 1840
3. When and where were you born? Tennessee Nov. 12 1837
4. When and where was your husband born—state his full name, and when were you and he married? (Attach copy marriage license in every case.) James Simpson Born in S. C. married 1854
5. When and where and in what Company and Regiment did your husband enlist or serve during the war between the States? Union Co. Ga 6th Ga Regiment Enlisted in 1862
6. How long did your husband serve in said Company and Regiment? About 3 years
7. When and where did your husband's Company and Regiment surrender and was discharged? Do not know
8. Was your husband present at the time and place when his Company and Regiment surrendered? No
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? At home on Sick furlough And was never able to get back to his command
10. When and where did your husband die? Union Co Ga Died 1896
11. Which of the following grounds do you base your application for pension, viz: First—Age and Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty? Old age and poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight? Some 11 or 15 years
13. What has been your occupation since your husband's death? House Keeping
14. How much can you earn gross, by your own exertion or labor? nothing
15. What property, real or personal, or income do you have or possess, and its gross value? Nothing
16. What property, real or personal, did you possess at death of husband or he left you, and of the years 1905, 1906, 1907 and 1908, and what disposition, if any, by sale or gift have you made of the same? No Property
17. In what counties did you reside in 1905, 1906, 1907 and 1908, and what property did you return for taxation? In Union Co Ga; untill about 1 year ago in Cobb Co Ga
18. How have you been supported since death of husband, and especially for 1905, 1906, 1907 and 1908? By my Children
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? Not been able to contribute anything
20. What was your employment during 1905, 1906, 1907 and 1908—how much did you receive for each year? Un able to do anything and received nothing
21. Have you a family? If so, who composes such family? Give their means of support? Have they any lands or other property? No Family Children all married
22. Have you ever made application for pension before? No
23. How many applications have you made for a pension, and under what class? None

Sworn to and subscribed before me, this the 22 day of September 1909

Rebecca Simpson
Mrs

J M Gann Ordinary,

of Cobb County.

QUESTIONS FOR WITNESSES.

STATE OF GEORGIA,
Gordon County.

G. L. Rhodes of said State and County, having been present as a witness in support of the application of Mrs. Rebecca Simpson for a Pension under the Act of 1900, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? G. L. Rhodes Reside in Gordon County
2. Are you acquainted with the applicant, Mrs. Rebecca Simpson
If so, how long have you known her? Yes - Since before the war
3. Where does she reside, and how long since when has she been a resident of this State? Now resides in Cobb County so she wrote me. She has resided in the State since about 1859
4. When and where was she born? Don't know when, she was born in So. Car
5. Were you ever acquainted with her husband? Yes
6. Where did she reside in 1861? in Union County, Ga.
7. When and to whom was he married? Rebecca Charlton, the applicant
8. When and where was he born? Don't know when, in So. Car
9. How long have you known him? Since about 1859
10. When and where did James Simpson enlist in the war between the States, and in what Company and Regiment did he enlist, and how do you know this? In Union Co. Ga. in 1862, Co. E. 6th Ga. I was in same Company
11. Were you a member of the same Company and Regiment? Yes
12. How long did he perform regular military duty? About two years
13. When and where was his Company and Regiment surrendered and discharged from service? Don't know
14. Were you with the Command when it surrendered? No
15. Was James Simpson the husband of applicant present? No
16. If not present, where was he? He was at home in Union Co. Ga.
17. When and where did he leave his Command? At Dalton Ga
For what cause? Sickness
By whose authority he left? Furloughed for sickness, I suppose Surgeons
How do you know all this? (State fully and clearly.) I was present and left at same time with him
18. When and where did James Simpson die? Don't know date - in Union Co. Ga
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? In Union Co. about fifty years
20. Do you of your own knowledge know that applicant is the lawful widow of I don't know. They lived as man and wife about 50 yrs to my knowledge
21. Has she remained unmarried since her soldier husband's death, and is now his widow? No. She is still a widow
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? She has no property
23. What property, effects or income did applicant possess in 1905, 1906, 1907 and 1908, and what disposition did she make of it? None
24. Has applicant conveyed any property in last two years or given any away, if so, what was it, and to whom? No
25. What is applicant's physical condition and her chances and ability to earn a support? Bad, Not able to earn support - Nor has been for several years
26. Is applicant able to earn a support at labor of any sort, if not, why? No Because she is old and unable
27. How was she supported for 1905, 1906, 1907 and 1908? By friends and kinsfolk
28. How much did applicant contribute to her support for last two years? Nothing
29. Give a full and complete statement of applicant's physical condition? Old age, worn out, not able to do anything
30. What interest have you in the recovery of this pension by the applicant? None

Sworn to and subscribed before me this 10th day of April 1909
W. R. Rankin Ordinary,
Gordon County.
as to G. L. Rhodes

G. L. Rhodes his mark
Witnesses.

AFFIDAVITS OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally before me comes A. E. Johnson and C. D. Elder, both known to me to be reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Mrs. Rebecca Simpson, applicant for a pension under Act of 1900, and after such personal examination say that her physical condition is this General debility brought about by old age rendering her unable to labor or to walk but a short distance at one time

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 22nd day of September 1909
J. M. Gann Ordinary,
Cobb County.

A. E. Johnson M.D.
C. D. Elder M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J. M. Gann Ordinary, in and for said County, hereby certify that the applicant, Mrs. Rebecca Simpson resides in said County, and has been a bona fide resident of this State since the ..... day of ..... 18....., and that the witnesses, Mr. ..... are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses **before the same was signed and subscribed.**

I further certify that the tax digest of ..... County shows that applicant returned for taxation in her own name in 1905 ..... dollars worth of property, and in 1906 None dollars worth of property, in 1907 None dollars worth of property, and in 1908 None dollars worth of property.

Witness my hand and official seal this 22 day of September 1909
[SEAL.] J. M. Gann Ordinary,
..... County.

NOTES—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; so help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since the 9th of April, 1865, not entitled.
5. ———— Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy of marriage license in every case, or show why it cannot be obtained.

and to whom: ----------

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

Bad. Not able to earn support - Nor has been for several years

words: "You do solemnly swear that you will [illegible] and the evidence you shall give will be the whole truth; so help you God."

2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since the 9th of April, 1865, not entitled.
5. ———— Witnesses and two Physicians are necessary to make out claims.
6. Attach certified copy of marriage license in every case, or show why it cannot be obtained.

Simpson, W. G.
Coffee Co.

No.

INDIGENT PENSION

1898.

Name W. G. Simpson

County Ga

Approved 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

4/22.1898 - 12/1.98

Pension Office 8/1 1898
Infirmity is not clearly established —
Rich. Johnson
Com. of Pensions

Pension Office 7/11 1899
See applicants answers to 6, 7, 8 & 9 - It seems he can support himself -
Rich. Johnson
Com. of Pensions

Pension Office 8/1-1900
Must state when and where his last Command was surrendered & that he was present - If true or account for himself hereby to end of war and prove this latter sum to the end of war by a witness that was present & of his own knowledge knows the truth of applicants statement
J. W. Lindsay
Com. of Pensions

Pension Office 7/4-1900
Must support every statement made in application or amendments thereto, by the testimony of as many as one witness who can swear to the truth of the same - of his own knowledge. It is not enough for applicant to swear to statement but it must be supported by other sworn testimony.
Hereby we will not do.
J. W. Lindsay
Com. of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA, } COUNTY.

I, ..., hereby authorize

..... of .....

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

..... at ..... by .....

Witness my hand and seal this ..... day of ..... 1898.

Executed in presence of .....

(L. S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,
COUNTY.

I, _____, hereby authorize

_____ of _____

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

_____ at _____ by.

Witness my hand and seal this _____ day of _____ 1898.

Executed in presence of

_____ (L. S.)

INDIGENT PENSION

1898.

No.

Name _____

County _____

Approved _____ 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Questions for Applicant.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (Give State, County and post office.) He Name is William Ramsay Simpson, I reside in Cobb Co. P.O. Marietta
2. How long and since when have you been a resident of this State? I have resided in Ga all my life.
3. When and where were you born? I was born in Cherokee Co Ga. Nov 24th 1844.
4. When and where and in what company and regiment did you enlist or serve? I first enlisted at Marietta Ga in Co E 7th Ga Vols June 12th 1861. Served 13 months was discharged July 1863. Re-enlisted in Co E 1st Regt State line Cavalry and Served until Surrender.
5. How long did you remain in such company and regiment? 13 months in Co E 7th Ga Regt and from October 1862 until Surrender something over two years.
6. For how long a period did you discharge regular military duty? Over three years.
7. When, where and under what circumstances were you discharged from service? I was discharged from 7th Ga July 10th 1862 on account of my Youth, I was discharged from 1st Regt State Troops When the Regt was disbanded at the Surrender in 1865.
8. What is your present occupation? Farming as long as I could work.
9. How much can you earn (gross) per annum by your own exertions or labor? Comparatively nothing.
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity & poverty.
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? My infirmity is Chronic Indigestion or dispepsia, And Chronic Rheumatism And General breaking down of my Nervous System. I also Continuously Suffer from Hemorrhoids.
13. What property, effects or income do you possess, and its gross value? None.
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897, and what disposition, if any, did you make of same? None. In 1894 I resided in Cobb County; in 1895 & 1896 in Griffin Ga. I returned No property for taxation those years. I owe no Debts
15. In what County did you reside during those years, and what property did you then return for taxation? (See answer to Question 14 Written Above)
16. How were you supported during the years 1896 and 1897? My Wife and I did what We Could, and made out on A Bale of Cotton
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Can't say as I kept no account. I made what I could and had to make out on it.
18. What was your employment during 1896 and 1897? What pay did you receive in each year? Had no wages, just did such jobs as I could get to make a living
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have my Sickly wife Who does all She can from necessity I have a little boy 11 Years old who is afflicted with dropsy We have neither home nor homestead we live on rented land and Are Poorly and indigent
20. Are you receiving any pension? If so, what amount, and for what disability? I never Received no Pension

Every Question MUST be Answered

Sworn to and subscribed before me this the 5th day of April, 1898.

W G Simpson
Applicant.

W. H. Glover
Ordinary
of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb COUNTY.

Bluford W. Osburn, of said State and County, having been presented as a witness in support of the application of W. G. Simpson for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Bluford W. Osburn. I reside in Cobb Co Ga

2. Are you acquainted with W. G. Simpson, the applicant; if so how long have you known him? I have known him ever since 1860.

3. Where does he reside, and how long and since when has he been a resident of this State? He resides in Cobb Co. and has resided here since 1860 - except two years that he resided in Spalding Co Ga -

4. When, where and in what company and regiment did he enlist, and how do you know? He enlisted in Co I. 7th Ga Regt at Marietta Ga about May or June 1861.

5. Were you a member of the same company and regiment? I was.

6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? He performed regularly military duty until July 1862 when he was honorably discharged from the service - on account of act of Congress authorizing the discharge of youths under 18 yrs of age - He was a good soldier -

7. What property, effects or income has the applicant? (Give your means of knowledge.) He has no property or income - I am intimately acquainted with him.

8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? None -

9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom? He has not

10. What is the applicant's occupation and physical condition? When he was able to work he was a farmer - He has no regular occupation He is physically unable to labor -

11. Is the applicant unable to support himself by labor of any sort, if so, why? He is unable to support himself by labor - He suffers from rheumatism - + nervous prostration + hemorrhoids

12. How was he supported during the years 1896 and 1897? By what little he and his wife could make -

13. What portion of his support for these two years was derived from his own labor or income? I dont think he could have made but little of it

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? I have stated in my answer to question 11 -

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

Sworn to and subscribed before me, this the 5th day of April 1898.

B W his + Osburn
Witness.
mk

J M Stone Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me Jno H. Simpson and E. J. Sitzer, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Wm Gannaway Simpson, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

Is feeble and unable to do much manual labor In addition to his infirmity has Hemorrhoids and Rheumatism

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the 5 day of April 1898.

Jno H Simpson M D
E J Sitzer M D

J M Stone Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I J M Stone, Ordinary in and for said County, hereby certify that the applicant W. G. Simpson resides in said County, and has been a bona fide resident of this State since the he says all his life day of 189 and that the witnesses, viz: B W Osburn, Jno H Simpson M D. and E J Sitzer M D. are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1896 Nothing Dollars of property, and in 1897 Northing Dollars of property.

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

Witness my hand and seal of office, this 5th day of April 1898.

J M Stone Ordinary
of Cobb County.

NOTE.

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

(Amendment 1900).

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb COUNTY.

M. L. ~~Hicks~~ Green, of said State and County, having been presented as a witness in support of the application of W. G. Simpson for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? M. L. Green

2. Are you acquainted with W. G. Simpson, the applicant; if so how long have you known him? I am. Since before the Civil War.

3. Where does he reside, and how long and since when has he been a resident of this State? At Marietta, Cobb Co. Ga. Ever since I have known him.

4. When, where and in what company and regiment did he enlist, and how do you know? In Co. "E" 1st Regt. State Line Cavalry, Early part of 1864, at Marietta Ga. I know because I enlisted in same company at same time.

5. Were you a member of the same company and regiment? I was.

6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About one year in this command. ~~[illegible]~~ In Jan. 1865 he was detailed as a courier for Gov. Joe Brown & was serving as such at time of the surrender. Our command was at or near Macon Ga. when the surrender came. Then & there he was discharged from service.

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

X

8. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same?

X

9. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?

X

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

X

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

X

12. How was he supported during the years 1898 and 1899?

X

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

X

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?

X

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

Sworn to and subscribed before me, this the 29 day of Aug. 1900. M. L. Green Witness.

[illegible] Ordinary.

Georgia Cobb County — I certify that [illegible] is a resident of Cobb County, [illegible]

POWER OF ATTORNEY.

State of Georgia,
Cobb County.

I, W. G. Simpson hereby authorize
John Autry of Marietta
to receive and receipt for the pension paid hereon and request that he remit same to
me by hand
at his office

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14th
day of Jany. 1901.

W. G. Simpson [L. S.]

Executed in presence of

Simpson, W. G.
Cobb County

ACT OF 1 DEC. 1901
(For Those Already Enrolled.)

NO. 251

INDIGENT
SOLDIER'S PENSION,
~~1902.~~ 1901

Name W. G. Simpson
County Cobb

WARRANT ISSUED
Jan 15 1901

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Autry

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W. G. Simpson hereby authorize
John Autry of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 9 day of Jany 1902.

W. G. Simpson [L. S.]

Executed in presence of
J. M. Gann

Simpson, W. G.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 537

INDIGENT
SOLDIER'S PENSION
1902.

Name W. G. Simpson
County Cobb
Co. I Regiment 7th

WARRANT ISSUED
4th 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. W. Harrison, State Printer, Atlanta.

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, Cobb County.

Personally appears W. G. Simpson of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1844; that he is 56 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 4 yrs in Company A, of 7 th Regiment of Ga. Vols.; that his physical condition is as follows: On account of disease and poverty he is unable to support himself

that his property consists of the following items: Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of Cobb county been allowed a pension for the year ~~1898~~ 1901

Sworn to and subscribed before me, this, the 14th day of Jany 1901. ~~1898.~~

W. G. Simpson

John Awtry Ordinary.

State of Georgia, Cobb County.

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

Given under my official signature and seal, this 14th day of Jany 1901 ~~1898.~~

Affix your seal here.

John Awtry Ordinary Cobb County.

NOTE.—The blank spaces must be filled.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, Cobb County.

Personally appears W. G. Simpson of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1844; that he is 57 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 4 yrs in Company A, of 7 th Regiment of Ga. Vols; that his physical condition is as follows: on account of disease and poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 9 day of Jany 1902.

W. G. Simpson

John Awtry Ordinary.

STATE OF GEORGIA, Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with W. G. Simpson 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 9 day of Jany 1902

Affix your seal here.

John Awtry Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W. L. Simpson hereby authorize
(illegible) of
to receive and receipt for the pension allowed and request that he remit same to
(illegible) at
by

Witness my hand and seal, this 2 day of Jan 1903.
W. L. Simpson [L. S.]

Executed in presence of
(illegible)

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 5-13

INDIGENT
SOLDIER'S PENSION
1903.

Name W. L. Simpson
County Cobb
Co. L Regiment

WARRANT ISSUED
13 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cray

Geo. Harrison, State Printer, Atlanta

no data

Simpson, W. L.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 6-30

INDIGENT
SOLDIER'S PENSION
1904.

Name W. L. Simpson
County Cobb
Co. L Regiment 2

WARRANT ISSUED
1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cray

Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W. L. Simpson hereby authorize
(illegible) of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 1 day of Jan 1904.
W. L. Simpson [L. S.]

Executed in presence of
(illegible)

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears W G Simpson of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18 44 that he is 58 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 years in Company A, of 7 th Regiment of Ga Vols; that his physical condition is as follows: from disease & poverty cannot support himself

that his property consists of the following items: Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cobb county been allowed a pension for the year 1902

Sworn to and subscribed before me, this the 2 day of Jan 1903. } W G Simpson

John Awtry Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 2 day of Jan 1903.

Affix your Seal here.

John Awtry
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
[illegible] County.

Personally appears [illegible] of [illegible] County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 18[illegible]; that he is [illegible] years old and by occupation a [illegible], that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of [illegible] in Company [illegible], of [illegible] th Regiment of [illegible]; that his physical condition is as follows: [illegible]

that his property consists of the following items: [illegible]

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of [illegible] County been allowed a pension for the year 1[illegible]

Sworn to and subscribed before me, this the 1 day of Jan 1904. } W G Simpson

John Awtry Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with W G Simpson 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 1 day of Jan 1904.

Affix your Seal here.

John Awtry
Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, W G Simpson hereby authorize
John Autry of Marietta
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 7th day of February 1905.

W G Simpson [L. S.]

Executed in the presence of

Simpson, W. G.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 766

INDIGENT
SOLDIER'S PENSION
1905.

Name W. G. Simpson
County Cobb
Co. L 7th Regiment Ga. Vols.

WARRANT ISSUED 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER JOB STATE PRINTER, ATLANTA.

no date

Simpson, W. G.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 778

INDIGENT
SOLDIER'S PENSION
1906.

Name W. G. Simpson
County Cobb
Co. L 7th Regiment Ga. Vols.

WARRANT ISSUED 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, W G Simpson hereby authorize
Autry of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this day of May 1906.

W G Simpson [L. S.]

Executed in the presence of

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears W G Simpson of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1844; that he is 60 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 4 Years in Company I, of 7 th Regiment of Ga Vols; that his physical condition is as follows: Rheumatism and poverty

that his property consists of the following items: Nothing

of the value of ____ Dollars. I am now earning, by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 7th day of January 1905. W G Simpson

John Austin Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 7th day of January 1905.

John Austin

Ordinary Cobb County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears W G Simpson of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company ____, of 7 th Regiment of Ga Vols; that his physical condition is as follows: Rheumatism and poverty

that his property consists of the following items: ____

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 2 day of January 1906. W G Simpson

John Austin Ordinary.

State of Georgia,
County.

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

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

Affix your seal here

Ordinary ____ County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, W G Simpson, hereby authorize John Hickey of

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

at

by

WITNESS my hand and seal, this 5th day of July 1907.

W G his Mark Simpson [L. S.]

Executed in presence of

M Lane

Simpson, W.G.,
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 58

INDIGENT
SOLDIER'S PENSION
1907.

Name W G Simpson
County Cobb
Co. F 7 Ga Regiment

WARRANT ISSUED
JAN 21 1907.
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,
Cobb County.

Personally appears W G Simpson of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company G, of 7 th Regiment of ____; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items: Nothing

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 3 day of May 1907.
John A Wray Ordinary.

W G Simpson
his Mark

State of Georgia,
Cobb County.

I, John A Wray Ordinary of said County, do certify that I am well acquainted with W G Simpson 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 3 day of May 1907.

John A Wray
Ordinary Cobb County.

Affix your seal here

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

applicant is afflicted with rheumatism as
before stated. This affliction affects his shoulders
[illegible] and hips which in combination with hemor-
rhoids causes the infirmity mentioned in our previous
certificate and exist at this time.

[illegible] } W. G. Simpson [illegible]
[illegible]

Sworn to & subscribed before me
this Nov. 30th 1898.

J. M. Stone Ordy

I certify that the above witnesses are resident
citizens of good character and are practising physi-
cians - and are entitled to full faith and credit

I further state that Mr Simp-
son is not a relative of the applicant.

J. M. Stone
Ordy

Georgia-Cobb County.

Personally came W. G. Simpson,
applicant, who upon oath says that
his command was at or near
Macon, Ga. when the surrender
came - that he was not with his
command at the time of surrender
but for four months before had
been detailed to serve as a courier
to Gov. Joe Brown and was serving
as such when the surrender
came - ~~The same that his~~ That his command
disbanded immediately after Lee's
Surrender, on April. 9. 1865 - at or near
Macon, Ga.
Sworn to and subscribed
before me. Aug. 29, 1900.

J. M. Stone
Ordinary.

W. G. Simpson

... 1899

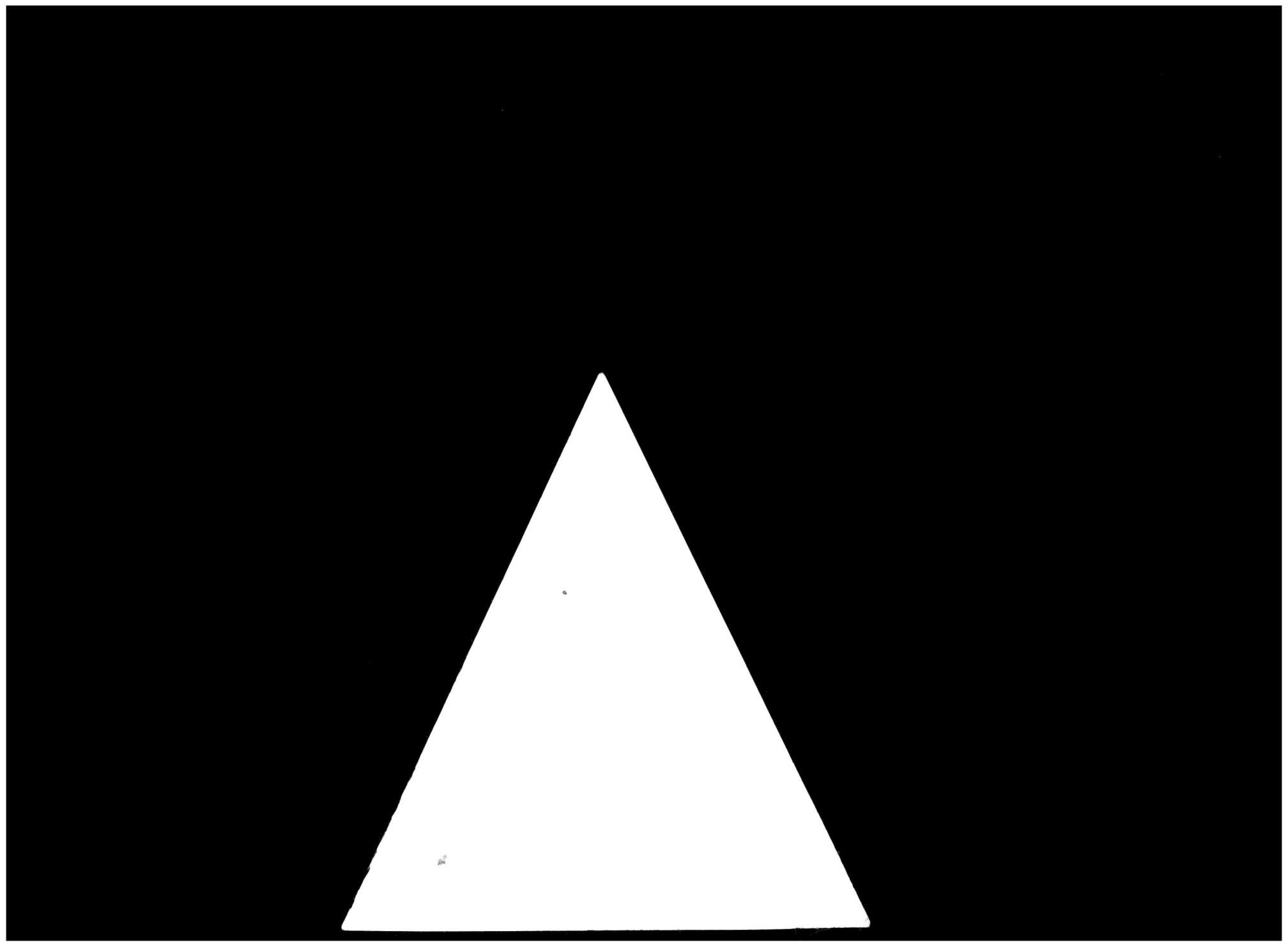
~~Aff~~ Affidavit.

Georgia- Cobb County-

Personally came W.G. Simpson. the applicant ~~of the~~ to whose application this is hereto attached, who upon oath says- that since the filing of said application his physical condition has continued to grow worse, while that of his wife was not improved- that now he is totally unable to earn a support at labor of any sort- that his earnings are not more than one half of what they were when said application was filed- and that he now gets a considerable part of his support from his son who is now twenty seven years old-

Sworn to and subscribed before me This Dec 20. 1899. J.M. Stone Ordy Cobb County.

W.G. Simpson



Sketton James E.
Approved Cobb Co for 4th Sr.

CONFEDERATE
SOLDIER'S APPLICATION

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

County Cobb 1926
Name James A Sketton
Company
Regiment 7th Ga State Reserves Guards
Approved John W. Clark 20 Oct. 26

E R S 19-1.

~~C. E. McGREGOR.~~
Commissioner of Pensions.

7-26-26 E

Ordinary's Certificate

STATE OF GEORGIA, Cobb COUNTY.

I, J M Gann, Ordinary of said County, certify that I know James A Sketton the applicant for pension; that he is the person he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know J H Goodwin, the witness, who swears to the service; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 1st day of June 1926

J M Gann Ordinary

(SEAL OF ORDINARY.) of Cobb County

Instructions:

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

Skelton, James E.
Approved Cobb Co. for 4th Ser.

CONFEDERATE
SOLDIER'S APPLICATION

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

County Cobb 1926
Name James A. Skelton
Company
Regiment 7th Ga. State Reserve Guards
Approved John W. Clark
20 Mt. Ave.

~~C. W. McCall~~
Commissioner of Pensions.

-26 E

Ordinary's Certificate

STATE OF GEORGIA, Cobb COUNTY.

I, J. M. Gann, Ordinary of said County, certify that I know James A. Skelton the applicant for pension; that he is the person he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know J. H. Goodwin, the witness, who swears to the service; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 5 day of June 1926

J. M. Gann Ordinary

(SEAL OF ORDINARY.) of Cobb County

Instructions:

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

CONFEDERATE
SOLDIER'S APPLICATION

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

1926

County. Cobb

Name. James A Skelton

Company. Co A 7th Ga Regt

Regiment. Ga Infantry

Approved. John W. Clark

C. R. [illegible]

Commissioner of Pensions.

9-21-26

Ordinary's Certificate

STATE OF GEORGIA, Cobb COUNTY.

I, J M Gann, Ordinary of said County, certify that I know James A Skelton the applicant for pension; that he is the person he represents himself to be, and that he has been continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know J W Goodwin, the witness, who swears to the service; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and they are truthful and trustworthy and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 5 day of June 1926

J M Gann Ordinary

(SEAL OF ORDINARY.) of Cobb County

Instructions:

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

APPLICATION FOR PENSION BY A SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA, Cobb COUNTY.

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

1. What is your name and where do you reside? (Give County and Post Office) James A Skelton Kennesaw Cobb Co Ga
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? 78 Years
3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State from 1861 to 1865? Yes Stood Co Roads Inf
4. When and where and in what Company and Regiment did you enlist? (State the date and class of service and give name of Colonel and Captain.) ~~May 1 1864~~ Big Shanty Co A 7 Regt, ~~Cavalry~~, Infantry, Johnson Colonel, Major Latimer
5. How long did you remain in the actual military service with said Company and Regiment? (Give date of discharge.) 6 Months.
6. When and where was your Company and Regiment surrendered or discharged from the Service? Mustered Out at Expiration of Term
7. Were you personally present with your Command when it was surrendered or discharged? Yes 2nd enlistment with Cowlings Legion to Ga, N Efforts. I remained with Co until Gen Stoffel Surrendered at King Ston Ga
8. If you were not actually present, state specifically and clearly where you were?
   a. Where was your Command when you left it? Kingston Ga Surrendered and Paroled by Gen Jordan
   b. When did you leave the Command? last of April 1865
   c. For what cause did you leave? War was over
   d. By whose authority did you leave? Gen Stoffel
   e. For how long was your leave of absence granted? In what way?
   f. Why did you not return to your Command after leave expired? War was over
   g. In what way were you prevented? —
   h. What effort did you make to return? —
   i. Were you captured by the enemy at any time? —
   j. If so, when, and where? In what prison were you held and when were you released? No
9. Are you drawing a pension of any amount from this State or the United States? No
10. Have you ever applied for the Georgia Pension and had it refused? If so, for what cause was it not allowed? Yes. Do not know it was refused

Sworn to and subscribed before me, this the 1st day of June, 1926. J M Gann, Ordinary of Cobb County (SEAL OF ORDINARY.)

James A. X Skelton his mark Applicant.

Questions of Witness as to Service

STATE OF GEORGIA,

Cobb COUNTY.

J H Goodwin of said State and County is hereby presented as a witness in support of the application of James A Skelton for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of 1920, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? J.H. Goodwin, Acworth Cobb Co Ga

2. How long and since when have you known James A Skelton the applicant? 43 years

3. Where does he now reside, and since when has he been, continuously, a bona fide resident of this State, and how do you know? Kenesaw Ga. ever since I knew him

4. When, where and in what Company and Regiment did James A Skelton enlist? (Give date and place) May 1864. At Kenesaw Ga. Co. A. 7 Ga reserves

5. How did you obtain your information of this Service? I belonged to Same Co. and Regiment

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) 6 Months

7. When and where was his Command surrendered or discharged? (Give date and place.) Mustered out in Atlanta Ga

8. Were you personally present when it was surrendered? Yes

9. If not, where were you? I was present and how came you there?

10. Was the applicant personally present with his Command when it was surrendered? Yes

11. If not, where was he? He was present and how came him there?

12. When, where and for what cause did he leave his Command? (Give date.) Time we enlisted for expired

By whose authority did he leave his Command? We enlisted for 6 months & time was out and how long was he granted leave? —— How do you know all that you have stated to be true? If of your own knowledge, state clearly and specifically I was with him during this 6 months

13. In what way, if you know of your own knowledge, was he prevented from returning to his Command? (State clearly and specifically.) ——

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

15. Was applicant captured as a prisoner? —— if so, when and where? —— in what prison was he held? —— and when released?

Sworn to and subscribed before me, this the 1 day of June, 1926.

J M Bauer, Ordinary of Cobb County

(SEAL OF ORDINARY.)

J H Goodwin
Witness.

know all that you have stated to be true? If of your own knowledge, state clearly and specifically

I was with him during this 6 months

13. In what way, if you know of your own knowledge, was he prevented from returning to his Command? (State clearly and specifically.)

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

15. Was applicant captured as a prisoner? —— if so, when and where? —— in what prison was he held? and when released?

Sworn to and subscribed before me, this the 1 day of June, 1926.

J. M. Bauer, Ordinary of Cobb County

(SEAL OF ORDINARY.)

F. H. Goodwin
Witness.

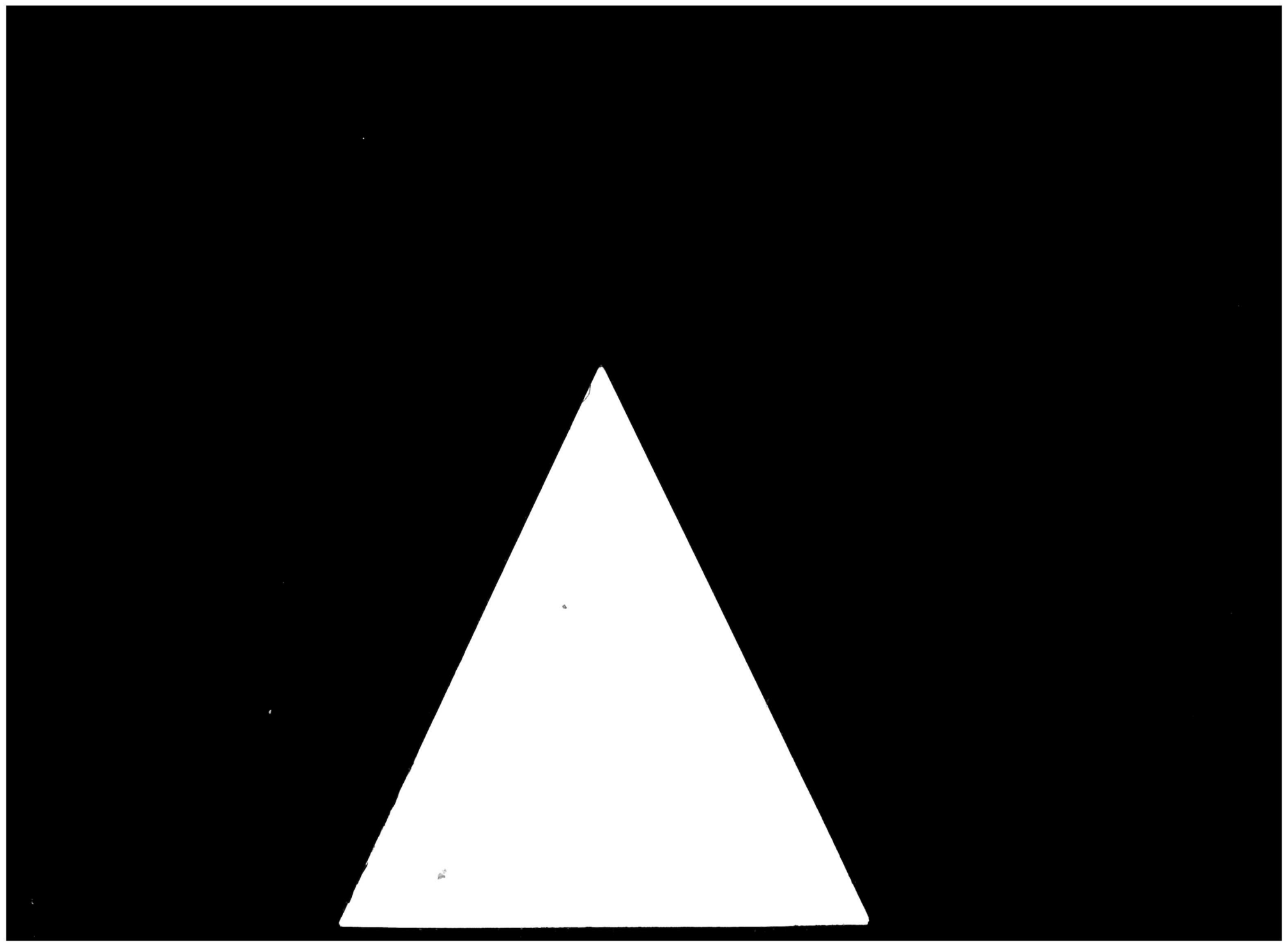
No. 7 Regt. Ga. Reserves

7 Regt. Ga State Inf.

Washington Record.

J.A. Skelton,

(Not borne as James A.Skelton) also borne as Jas. D. Skelton, Private Co. A. 7 Ga. Inf. (State Gusrds) C.S.A. enlisted Aug. 1, 1863 at Big Shanty and on muster roll for Dec. 1, 1863 to Jan. 31, 1864 (last on file) is shown present. No later record found.



No. 2975

Slatton, John

INDIGENT PENSION

Cobb Co.

1898.

Name John Slaton

County Cobb

Approved 5/9 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

R. C. Irwin

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/18/1898

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

I, _____ of _____ hereby authorize _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____

Witness my hand and seal this _____ day of _____ 1898.

Executed in presence of

_____ [L.S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,
COUNTY.

I, _____ hereby authorize

of _____

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

at _____ by _____

Witness my hand and seal this _____ day of _____ 1898.

Executed in presence of _____ [L.S.]

No. 2975

J. Cattin Platoon

INDIGENT PENSION
Cobb
1898.

Name John Cattin
County Cobb
Approved 579 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
R. C. Irwin

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

3/16.1898

Questions for Applicant.

Every Question MUST be Answered

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office.) John J Cattin in Cobb County Ga Post Office Kennesaw
2. How long and since when have you been a resident of this State? Since the year 1848
3. When and where were you born? In South Carolina in 1840
4. When and where and in what company and regiment did you enlist or serve? Capt Craig 1st Regt Cavalry Cobb County 3rd Company A Cobb County Lieutenant Hamilton Colonel
5. How long did you remain in such company and regiment? Four and 1/2 months
6. For how long a period did you discharge regular military duty? about 4 1/2 Months
7. When, where and under what circumstances were you discharged from service? Was discharged from service at Greensboro North Carolina at the close of the war 1865
8. What is your present occupation? Not able to do anything of profit.
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? When able farming
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"?
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? When able I could work, not seeing only to raise a crop and sell for two years
13. What property, effects or income do you possess and its gross value? 4 horses One piece of Land
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897 and what disposition, if any, did you make of same? I did not possess any property since Jan 1st 95 to date 1897
15. In what County did you reside during those years and what property did you then return for taxation? In Cobb County did not return any property
16. How were you supported during the years 1896 and 1897? By the Cobb County Ordinary
17. How much did your support cost for each of those years and what portion did you contribute thereto by your own labor or income? One hundred Each year I Contributed Nothing
18. What was your employment during 1896 and 1897? What pay did you receive in each year? Had No Employment
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Have No Family
20. Are you receiving any pension, if so, what amount and for what disability? I am Not Receiving any pension

Sworn to and subscribed before me this the 6th day of January 1898.

John J his Mark Cattin
Applicant.

Thos. P. Whitfield Justice of the Inferior Court
of Cobb County, Ga.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Gordon County.

L. M. Littlefield, of said State and County, having been presented as a witness in support of the application of John Slatton for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? L M Littlefield & J A Lewis Gordon Co Ga Adairsville Ga P.O.

2. Are you acquainted with John Slatton, the applicant, if so how long have you known him? yes. Have known him 38 or 39 years

3. Where does he reside, and how long and since when has he been a resident of this State? Cobb Co Ga since 1893

4. When, where and in what company and regiment did he enlist, and how do you know? Enlisted 1863 Mat Lemmons Co. Enlisted in Gordon Co Ga I was with him

5. Were you a member of the same company and regiment? yes

6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? about 12 months made a good soldier. Discharged in Rome Ga in 1864 J A Lewis answers as follows.

7. What property, effects or income has the applicant? (Give your means of knowledge.) None at all — I have known him for many years

8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? None at all

9. Has he conveyed away any of his property in the last three years, if so, what was it and to whom? No.

10. What is the applicant's occupation and physical condition? Farmer when he worked — he is paralyzed and is almost helpless — Cant leave his room

11. Is the applicant unable to support himself by labor of any sort, if so, why? He is unable to support himself — Cant wait on himself

12. How was he supported during the years 1896 and 1897? By his grandson

13. What portion of his support for these two years was derived from his own labor or income? None at all

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? On account of his age and his infirmity and having no income nor property he should have a pension

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

Sworn to and subscribed before me, this the 17" day of January 1898.

L. M. Littlefield Witness.
J. A. Lewis
Georgia Gordon County

T W Harkin Ordinary.

witness questions 1.2.3.4.5.6 as to questions 7.8.9.10.11.12.13 & 14

T W Harkin Ordinary hereby certify that I am acquainted with J A Lewis and L M Littlefield and that they live in his Co and are worthy of belief and of trustworthy character. Jan 17 1898 T W Harkin Ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me Dr. W. T. Pace and Chas. T. Nolan, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully John Slatten, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

That he is paralyzed in his entire right side — he has been suffering from spinal affection for several years. He is unable to leave his room or wait on himself

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the 20th day of Jany 1898.

William T. Pace M.D.
Chas. T. Nolan, M.D.

J. M. Stone
Ordinary.

ORDINARYS' CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone, Ordinary in and for said County, hereby certify that the applicant John Slatton resides in said County, and has been a bona fide resident of this State since the Sundrestrung for 1 day of 1897 50 yrs and that the witnesses, viz.: Wm. T. Pace M.D. J. H. Cantrell J. K. Kendley, and Chas. T. Nolan M.D. are of trust worthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1896 Nothing Dollars of property, and in 1897 Nothing Dollars of property.

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

Witness my hand and seal of office, this 29th day of Jany 1898

J. M. Stone Ordinary
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John Slaten, hereby authorize J. M. Stone of Marietta to receive and receipt for the pension allowed, and request that he remit same to me ~~at~~ by him

Witness my hand and seal this 17 day of January 1899.

Executed in presence of
S. T. Pace

John his mark Slatton (L. S.)

Pay to T. J. Hamby
J. M. Stone
Jany 20/99

CODE SEC. 1254.
(For These Already Enrolled.)

No. 2517

INDIGENT
SOLDIER'S PENSION,
1899.

Name John Slaten
County Cobb

WARRANT ISSUED
1/31 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
T. J. Hamby

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John Slaten hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension allowed, and request that he remit same to ~~at~~ me by him

Witness my hand and seal, this 15 day of Jany 1900.

John his mark Slaten (L. S.)

Executed in presence of
T. J. Hamby

CODE SEC. 1254.
(For These Already Enrolled.)

NO. 816

INDIGENT
SOLDIER'S PENSION,
1900.

Name John Slaten
County Cobb

WARRANT ISSUED
January 18 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Stone

Geo. W. Harrison, State Printer, Atlanta.

No Data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears John Slaten of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 21 day of Oct. 1893; that he is 88 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of six months in Company A, of th Regiment of of Infantry; that his physical condition is as follows: Old age Infirmity and poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Cobb county been allowed a pension for the year 189 8

Sworn to and subscribed before me, this the 17 day of January 1899. John his X mark Slaten

J M Stone Ordinary. witness to X mark Geo. Thurmond

State of Georgia,
Cobb County.

I, J M Stone Ordinary of said County, do certify that I am well acquainted with John Slaten 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 17th day of January 1899.

Affix your seal here.

J M Stone
Ordinary Cobb County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears John Slaten of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 21 day of Oct. 1893; that he is 88 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 10 mos. in Company A, of Col Dabneys Regt. Dabneys ; that his physical condition is as follows: On account of age, infirmity and poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cobb county been allowed a pension for the year 189 9

Sworn to and subscribed before me, this the 15th day of January 1900. John his X mark Slaten

J M Stone Ordinary.

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 15th day of January 1900.

Affix your seal here.

J M Stone
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John Slaton hereby authorize John Awtry of Marietta to receive and receipt for the pension allowed and request that he remit same to me at his office by hand

Witness my hand and seal, this 14th day of Jany 1901.

John Slaton [L. S.]

Executed in presence of

For Those Already Enrolled.

No. 2-5

INDIGENT
SOLDIER'S PENSION.
1901.

Name
County

WARRANT ISSUED
Jan 13 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Awtry

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John Slaton hereby authorize John Awtry of to receive and receipt for the pension allowed and request that he remit same to at by

Witness my hand and seal, this 4 day of Jan 1902.

John Slaton [L. S.]

Executed in presence of
J M Gann

Slaton, John
Cobb County

CODE SECTION 1201
(FOR THOSE ALREADY ENROLLED.)

No. 542.

INDIGENT
SOLDIER'S PENSION
1902.

Name John Slaton
County Cobb
Co. A Regiment Dobbins

WARRANT ISSUED
1/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cady

Wm. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County

Personally appears John Slaton of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 21 day of October 1893; that he is 89 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 10 Months in Company A, of th Regiment of Cobb Cav ; that his physical condition is as follows: a resident of age infirmity poverty he is unable to support himself

that his property consists of the following items

Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Cobb county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the 14th day of Jan 1901. John Slaton

John Antrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, ~~[illegible]~~ John Antrey Ordinary of said County, do certify that I am well acquainted with John Slaton the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 14th day of Jany. 1901

Affix your seal here

John Antrey
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears John Slaton of Cobb County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 21 day of Oct 1893; that he is 88 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 6 or 10 months in Company A Cav, of Dabney th Regiment of ; that his physical condition is as follows: Old age Infirmity and Poverty

that his property consists of the following items

Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 4th day of Jan 1902. John Slaton

John Antrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Antrey Ordinary of said County, do certify that I am well acquainted with John Slaton 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 4th day of Jan 1902.

Affix your seal here

John Antrey
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John Slatten hereby authorize
John Awtry of Marietta
to receive and receipt for the pension allowed and request that he remit same to
me at his office
by hand

Witness my hand and seal, this 1st day of Jany 1903.

John Slatten [L. S.]

Executed in presence of

Slatten John
Cobb County
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 517

INDIGENT
SOLDIER'S PENSION
1903.

Name John Slatten
County Cobb
Co. Robert's Regiment Ga. Vols.

WARRANT ISSUED
1/3 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John Slatten hereby authorize
John Awtry of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 25th day of January 1904.

John Slatten [L. S.]

Executed in presence of

Slatten John
Cobb Co
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 641

INDIGENT
SOLDIER'S PENSION
1904.

Name John Slatten
County Cobb
Co. Regiment

WARRANT ISSUED
1905 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

Geo. W. Harrison, State Printer, Atlanta.

no data

Co. A. Col. Dabney's Regt. Ga

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears John Statten of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 21 day of October 1893; that he is 92 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 6 & 10 mos in Company , of Dabney's Regt. of ; that his physical condition is as follows: age & poverty cannot support self

that his property consists of the following items:
Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cobb county been allowed a pension for the year 1902

Sworn to and subscribed before me, this the 1st day of Jany 1903.
John Statten
John Awtry Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with John Statten 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 Jany 1903.
John Awtry
Ordinary Cobb County.

Affix your seal here.

Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1903.

Co. D. Colonel Dabney's Regt. Ga

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears John Statton of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 21 day of Oct 1873; that he is 93 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 6 & 10 months in Company , of th Regiment of Dabney; that his physical condition is as follows: Old age Infirmity and poverty

that his property consists of the following items:
Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 1 day of Jan 1904.
John Statten
John Awtry Ordinary.

STATE OF GEORGIA,
County.

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

Given under my official signature and seal, this day of 1904.

Affix your seal here.

Ordinary County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, John S Slatton hereby authorize

of

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

at

by

WITNESS my hand and seal, this 17 day of January 1905.

John His S Slatton [L. S.]
Mark

Executed in the presence of
J M Camp

Slatton, John
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 7411

INDIGENT
SOLDIER'S PENSION
1905.

Name John Slatton
County Cobb
Co. E Regiment 1st Infantry - 9

WARRANT ISSUED
1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears John Stallion of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 21 day of October 1863; that he is 23 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 10 months in Company Co B, of th Regiment of Col. Dobbins's Regt. Ga.; that his physical condition is as follows:

age & infirmity and poverty

that his property consists of the following items:

nothing

of the value of Dollars. I am now earning, by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 17 day of January 1905.
John Awtrey Ordinary.

his
John X Stallion
mark

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 17 day of January 1905.

John Awtrey
Ordinary Cobb County.

Affix your Seal here

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

Georgia Cobb County:

In Person appears J. H. Cantrell and J. R. Rendley residents of said County who on oath say that they are near neighbors and are well acquainted with John Slatten the Applicant for Pension mentioned in this application — that the said Slatten is at this time entirely helpless Confined to his room unable to walk or help himself in any way — he is we understand about 85 or 90 Years of age.

He has no Property at all nor any income nor means of support within himself — he is supported & taken Care of by his Grandson who has to labor to support himself and family and the said John Slatten

J. M. STONE,
Ordinary & Judge Probate.

OFFICE OF ORDINARY,
COBB COUNTY, GA.

Jany 20th 98

I, J. M. Stone Ordinary and Ex Officio Clerk of Court of Ordinary of Cobb County do hereby Certify that from Reliable information I learn that John Slatten this Applicant for pension is unable to leave his room and come to my Office — I further Certify that Thos. P. Whitfield whom he made his affidavit is a Justice Peace in this County legally Commissioned as such —

Witness my Official signature and Seal of Office this 20th day of January 1898.

J. M. Stone Ordy
Ex Officio Clk

We believe that in accordance with our knowledge of the Pension laws that this Applicant is a worthy beneficiary beyond any doubt, under such law or laws.

Sworn to and subscribed before me this 12 July 1898.

J. H. Cantrell
J. R. Kendley

J. M. Stone
Ordy

J. M. Stone,
Ordinary and Probate Judge.

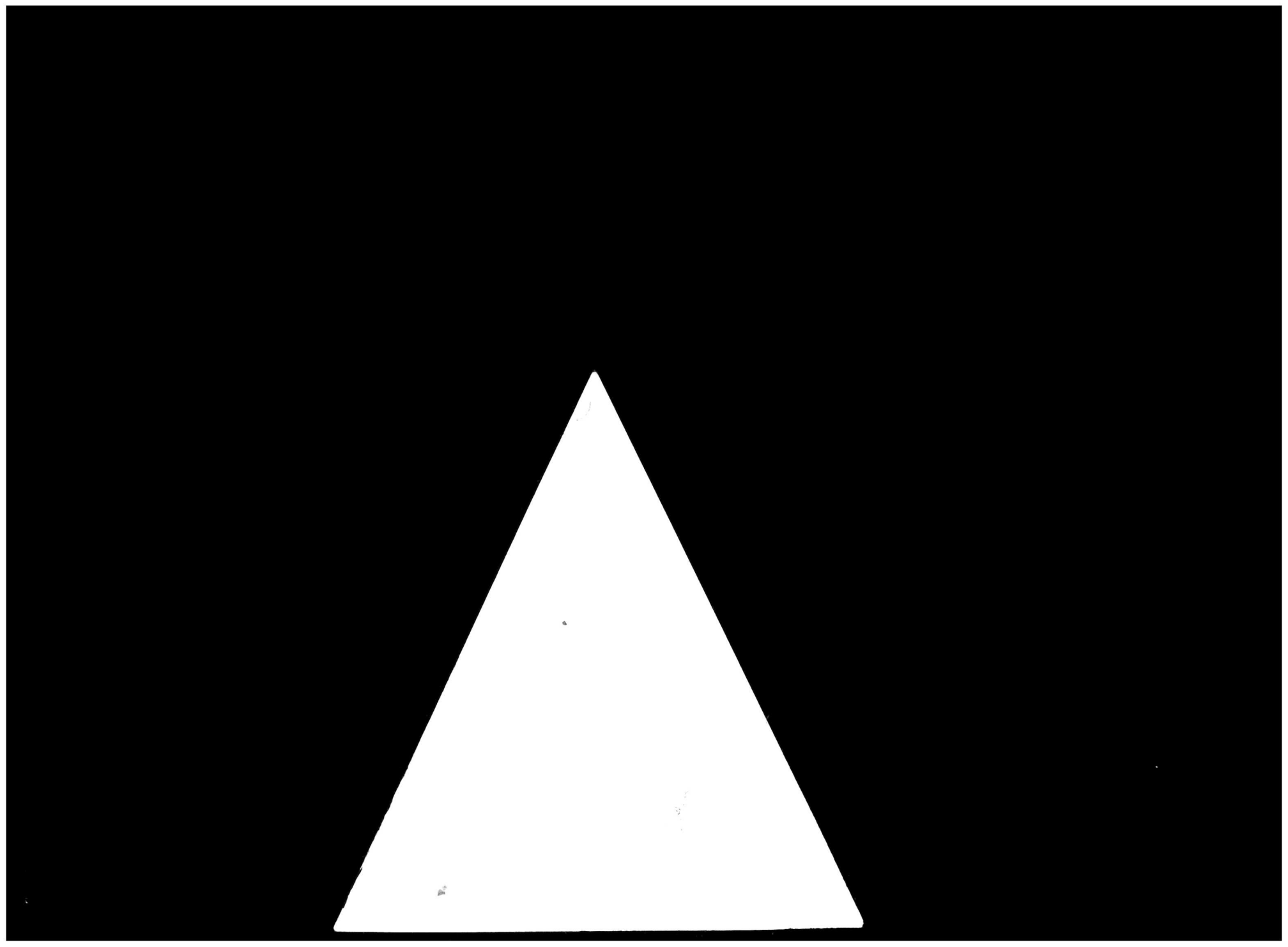
Office of Ordinary,
Cobb County, Ga.

Marietta, Ga., July 15 1898

Richard Johnson
Pension Com:

I have known this old man John Slatten for 8 or 10 years, am somewhat acquainted with his present condition now. I am satisfied he is in the condition as represented. J. H. Cantrell and J. R. Kendley two of these witnesses are two of our very best men. This old man in my judgment is worthy of a Pension.

J. M. Stone
Ordy.



NOTES.

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

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

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

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

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

Slaughter, John W.
Cobb Co.
1890

No. 7895.

APPLICATION FOR ALLOWANCE

FOR

Loss of one finger

Applicant Jno W. Slaughter

County Cobb

Amount 5

Date of Warrant June 1

Entered on Record June 1 1890

Secretary Executive Department

Applicant

NOTES.

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

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

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

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

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

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

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

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

Clerk's Office, 1890

No. 8615.

APPLICATION FOR ALLOWANCE

FOR

Loss of one Leg

Applicant, Wm. Slaughter

County, Cobb

Amount, $ 50

Date of Warrant, June 4 1890

Entered on Record, June 4 1890

SECRETARY EXECUTIVE DEPARTMENT

Affidavits

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears Wm Slaughter of Cobb 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 [illegible] day of [illegible] 1820; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company F, of 2 th Regiment of [illegible] Volunteers Ransom's Brigade; that whilst engaged in such military service, at the battle of Nashville in the State of Tenn, on the 6 day of Dec 186/, he was wounded as follows: Received a gunshot wound in the [illegible] thigh and shattered the bone, whereby the said leg is rendered essentially and substantially useless for all manual labor

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 15 day of May 1890

J. H. Stowe Ordy

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

Commissioned Officer's Affidavit.

STATE OF GEORGIA,

Marion County.

PERSONALLY came before me Edgar M Bush of the county of Marion State of Georgia, who, being duly sworn says that he was Colonel [illegible], of 2 Regiment of [illegible] Volunteers, and that deponent knows Wm Slaughter, 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 [illegible] as stated by him in said affidavit. Deponent further states that said [illegible] is a *bona fide* citizen of this State and resides in Cobb county.

Sworn to and subscribed before me, this [illegible] 1890

Edgar M Bush

J. H. Stowe Ordy

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,

County

PERSONALLY came

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

Sworn to and subscribed before me, this day of 188

Note.—This affidavit cannot be made by those citizens who personally know all the facts about service and injury applicant for.

STATE OF GEORGIA,

Cobb County.

PERSONALLY comes before me Jill Stone Ordinary of said county, J. D. Malone and Gilbert Tenant, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined No. N. Slaughter and after such examination say that the applicant has been injured as follows: By two bullets Entering through the left hand, taking off the Second finger near the hand And also damaging the third and fourth fingers so that they are Stiff and useless — Also the bullet passed through the hand and joint of thumb, Causing that part of the hand to be Seriously damaged — thereby on account of the two wounds, said left hand is rendered substantially and essentially useless for all ordinary Manual labor.

Sworn to and subscribed before me, this 2nd day of June 1890

J. Ill. Stone

ORDINARY.

J. D. Malone M.D.
Gilbert Tennant M.D.

READY 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,

Cobb County.

I, Jill. Stone Ordinary of said county, do certify that I am well acquainted with John N. Slaughter 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 attorny was signed, is a of said county, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 2nd day of June 1890

Jill. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

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

In witness whereof I have hereunto set my hand and seal, this 2nd day of June 1890 (L.S.)

Executed in the presence of us:

Jill. Stone Ordy.

STATE OF GEORGIA,

Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with Wm. W. Slaughter 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 26 day of May 1891.

J. M. Stone

Ordinary Cobb County.

1891.

Slaughter, Wm. W.

Cobb Co

No. B 38

Application for Allowance

FOR THE YEAR ENDING OCTOBER 26, 1891.

FOR

Applicant, Wm. W. Slaughter

County, Cobb

Amount, $12

Date of Warrant, May 13 1891

Entered on record

Clerk

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

Wm. W. Slaughter

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

STATE OF GEORGIA,

Cobb County.

I, J. M. Stone Ordinary of said county, do certify that I am well acquainted with Wm. W. Slaughter 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 repesents himself to be, and that he resides in this county.

Given under my official signature and seal, this 23 day of June 1892

J. M. Stone

Ordinary Cobb County.

Cobb Co.

Slaughter, Wm. W.

No. 3113

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 26, 1892.

Name Wm W Slaughter

County Cobb

Disability Loss of finger

Amount, $ 12

Entered on record June 23 1892.

W. H. HARRISON,

Secretary of Executive Department.

AGENT.

W H Hawkins

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears Jno W Slaughter of Cobb 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 5 day of Aug 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 I; of 2 th Regiment of Ga, Volunteers Bennings 's Brigade; that whilst engaged in such military service at the battle of The Wilderness in the State of Virginia, on the 6th day of May 1864, he was wounded as follows: By Rifle Shot Striking 2d finger on left hand Cutting it off & Cutting Each Side of 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, 1891. I have heretofore been allowed a pension of Nil dollars, for Said finger

Sworn to and subscribed before me, this, the 7th day of May 1891. } Jno W Slaughter

H W Stone 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, }
County. }

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

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

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears Jno W Slaughter of Cobb 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 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 Sergeant in Company I, of 2d th Regiment of Ga, Volunteers Bennings '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: By Gunshot Striking the left hand and Cutting off the Second finger

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 $5, Dollars for Said finger

Sworn to and subscribed before me this the 22 day of June 1892. } Jno W Slaughter

H W Stone 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, }
County. }

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

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

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to P. O.

County, Georgia.

County, Georgia.

Audited 189

COMPTROLLER-GENERAL.

Cobb

Maimed Soldiers.

Voucher No. 2895

Amount $ 5.

Paid to Jno. W. Slaughter

For Loss of one finger

June 4 1890

Included in Warrant No.

issued to Treasurer.

189

WARRANT CLERK.

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

Applicant

Audited 1891.

COMPTROLLER-GENERAL.

Slaughter, John W.

Cobb

1891.

Maimed Soldiers.

Voucher No. 3038

Amount $ 5.

Paid to Jno W Slaughter

For Loss of One finger

May 13 1891.

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

No. 2895

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga., June 4 1890

Mr. John M Slaughter of the County of Cobb 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 One finger.

He is entitled to receive the sum of Five 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.

TREASURER'S OFFICE PAID STATE OF GEORGIA

J. B. Gordon
GOVERNOR.

By the Governor,
W. N. Harrison
CLERK EXECUTIVE DEPARTMENT.

$5 00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Five 00/ Dollars,

per above voucher, this 4 of June 1890.

Jno. M. Slaughter

1891.

No. 3038

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga. May 13 1891.

Mr. Jno. M. Slaughter of the County of Cobb having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for

Loss of one finger

He is entitled to receive the sum of Five 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.

W. J. Northen
GOVERNOR.

By the Governor,
W. H. Harrison
SEC'Y EXECUTIVE DEPARTMENT.

$5.

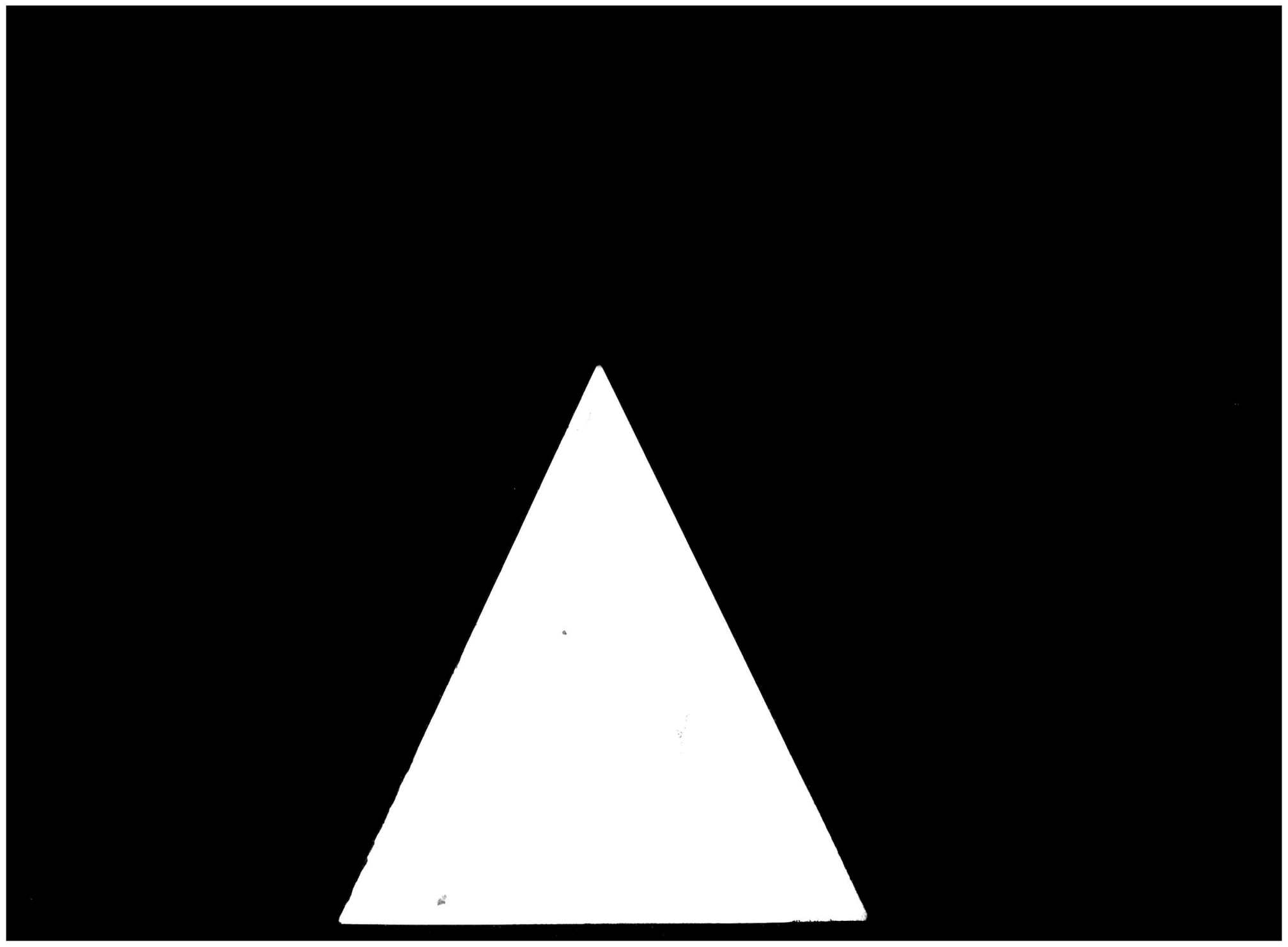
TREASURER'S OFFICE PAID STATE OF GEORGIA

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

Five Dollars,

per above voucher, this 13 of May 1891.

Jno. M. Slaughter



Smith, D. O.
Cobb Co.

No. 24 for 1905

INDIGENT PENSION.

1903.

1905

Name D. O. Smith

County Cobb

Co. I. Bryant Regt.

Approved 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

5/28/04

POWER OF ATTORNEY.

STATE OF GEORGIA, } COUNTY.

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1903.

_____ [L. S.]

Executed in the presence of

_____

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ COUNTY. }

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1903.

_____ [L. S.]

Executed in the presence of

_____

_____

Smith, D. O.
Cobb Co.

No. 45,905

INDIGENT PENSION.

1903.

Name D. O. Smith 46-

County Cobb

Co. Sd. Bryan's Regt.

Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Chas. W. Harrison, State Printer, Atlanta.

Co. L, Bryan's Regt. Ga. Militia

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA, }
Cobb COUNTY. }

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

1. What is your name and where do you reside? (give State, County and post-office)
D. O. Smith, Marietta, Cobb County, Georgia.
2. How long and since when have you been a resident of this State?
All my life, since 1847
3. When and where were you born? Franklin County Ga., 1847
4. When and where and in what company and regiment did you enlist or serve? Co. L. Col. Bryans Regiment, at Carnesville, Ga. Sept. 1st 1864.
5. How long did you remain in such company and regiment? Till close of war, about 8 months.
6. When and where was your company and regiment surrendered and discharged? At Kingston, Ga. about April 25th 1865.
7. Were you present with your company and regiment when it was surrendered? Yes-
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was absent -
9. How much can you earn (gross) per annum by your own exertions or labor? Very little - 30 or 40 dollars
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Infirmity & poverty.
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? My left hand was cut off in Cotton gin six years ago - one broken in left leg by gun Shot wound in battle near ~~Atlanta~~ Kingston - Also have Chronic diarrhoea Contracted in the Service. These troubles almost completely disable me from work
13. What property, real and personal, or income, do you possess, and its gross value? Nothing.
~~Have no property - Returned none in 1903~~
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? Had nothing but a horse - At close April 1865. Had a milch Cow, which died in October 1903.
15. In what County did you reside during those years, and what property did you then return for taxation?
In Cobb County. Returned 2 or 3 Cows - Have neither now -
16. How were you supported during the years 1899, 1900, 1901 and 1902? 1903? By my boys - One of them is dead - The other is of age and is work for himself.
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I Contributed very little - Dont know what it cost.
18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year?
Farming not hired - Receive no pay -
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Yes - Wife and one girl 11 years old - My wife is sickly - No means of support - Have no homestead - My wife is 52 years old -
20. Are you receiving any pension? If so, what amount and for what disability? None -
21. Have you ever made an application for pension before? No -
22. How many applications have you ever made and under what class? None -

Every Question MUST be Answered.

Sworn to and subscribed before me this the 6th day of February 1904. } D. O. Smith his Mark Applicant.

John Huntley Ordinary, of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb County.

Jos. E. Echols of said State and County, having been presented as a witness in support of the application of D. O. Smith for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Jos. E. Echols I reside in Banks Co. Ga.
2. Are you acquainted with D. O. Smith, the applicant; if so, how long have you known him? I have known him all my life
3. Where does he reside, and how long and since when has he been a resident of this State? all his life He resides now in Cobb Co Ga he been a resident of the State
4. When, where and in what company and regiment did he enlist, and how do you know? In 1864 (Sept) Co. M 2nd Col Bryan Pagett
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? 8 months
7. When and where was his command surrendered? at Kingston Ga. April 26th 1865.
8. Were you present when it surrendered? I was not
9. Was applicant present? Applicant was present
10. If he was not present, where was he?
When did he leave his command? For what cause?
By what authority he left? How do you know all of this?
I was at home sick at the time of the surrender but I am certain that Applicant was present.
11. What property, effects or income has the applicant? (Give your means of knowledge.)
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same?
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
14. What is the applicant's occupation and physical condition?
15. Is the applicant unable to support himself by labor of any sort, if so, why?
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902?
17. What portion of his support for these four years was derived from his own labor or income?
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code?
19. Who composes family? What property have they? Children's age and their earning capacity?
20. What interest have you in the recovery of a pension by this applicant?

Sworn to and subscribed before me, this the 5th day of March 1904.
J. S. E. Echols Witness.
J. P. Hill Ordinary.

Sign here -

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me Chas. H. Field and W. M. Kemp, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully D. O. Smith, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: We find evidence of a wound & examination also bad cut from sword on left hand & has gunshot wound on lower portion of left leg, which disease & injuries are permanent and renders him totally unable to do manual labor, he is a physical wreck and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 30th day of March 1904.
Chas H. Field M.D
Wm. Kemp M.D
John Dunlap Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, John Dunlap Ordinary, in and for said County, hereby certify that the applicant D. O. Smith resides in said County, and has been a bona fide resident of this State since the 1st day of January 1894 and that the witnesses, viz.: Thos. B. Irwin

are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Cobb County show that applicant returned for taxation in his name in 1899 No Dollars of property, and in 1900 No Dollars of property, in 1901 No Dollars of property, in 1902 No Dollars of property.

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

Witness my hand and seal of office, this 30th day of April 1904.
John Dunlap Ordinary,
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb COUNTY.

I, D. O. Smith hereby authorize John Arthur of Marietta, Ga. to receive and receipt for the pension allowed, and request that he remit same to Mr at his office by hand

WITNESS my hand and seal, this 7th day of January 1905.

D. O. Smith [L. S.]
Mark

Executed in the presence of

Smith, D. O.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 172

INDIGENT
SOLDIER'S PENSION
1905.

Name D. O. Smith
County Cobb
Co. I, Regiment Ga. State Troops Cav.

WARRANT ISSUED 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb COUNTY.

I, D O Smith hereby authorize John Arthur of to receive and receipt for the pension allowed, and request that he remit same to at by

WITNESS my hand and seal, this 8 day of Jany 1905.

D O Smith [L. S.]
Mark

Executed in the presence of
J M Gann

Smith, D. O.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 725

INDIGENT
SOLDIER'S PENSION
1906

Name D O Smith
County Cobb
Co. 43 Regiment Ga, Vols.

WARRANT ISSUED 1/22 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO Lady

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears D. O. Smith of Cobb County, State of Georgia who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1847; that he is 58 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 8 mos. in Company I, Bryant's Regiment of Ga. ~~State troops Cavalry~~ Militia and his physical condition is as follows: on acct of disease and poverty he is unable to support himself

that his property consists of the following items:

Nothing

of the value of Dollars. I am now earning, by my labor, No Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1905

Sworn to and subscribed before me, this the 7th day of January 1905.

D. O. his x mark Smith

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 7th day of January 1905.

John Awtrey
Ordinary Cobb County.

Affix your Seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears D O Smith of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1847; that he is 58 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 10 mos in Company I, of ~~[illegible]~~ Bryant's Regt Regiment of Ga. ~~Lots~~ State Troops; that his physical condition is as follows: Disease

that his property consists of the following items:

Nothing

of the value of No Dollars. I am now earning, by my labor, No Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1905

Sworn to and subscribed before me, this the 8 day of Jany 1906

D. O. his x mark Smith

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 8 day of Jany 1905.

John Awtrey
Ordinary Cobb County.

Affix your Seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, D O Smith, hereby authorize John Arotrey of

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

at

by

WITNESS my hand and seal, this 3 day of Jany 1907.

D. O. Smith [L. S.]
mark

Executed in presence of
Gann

Smith, D. O.,
Cobb Co.,

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 665

INDIGENT
SOLDIER'S PENSION
1907.

Name D O Smith
County Cobb
Co. I-43 Regiment Ga.
Vols

WARRANT ISSUED
JAN 21 1907.

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,

Cobb County.

Personally appears D O Smith of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18__; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company B, of the 4th Regiment of Ga State Troops; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items: Nil

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

his
D O Smith
mark

Sworn to and subscribed before me, this the 3 day of Jany 1907.

John Hurley Ordinary.

State of Georgia,

Cobb County.

I, John Hurley Ordinary of said County, do certify that I am well acquainted with D O Smith 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 3rd day of Jany 1907.

J M Gann

Ordinary Cobb County.

Affix your seal here

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

Georgia
Cobb County. } Personally appeared before me the Under-signed, Ordinary in and for said County, Thos D. Ewin, who being duly sworn Says that he is well acquainted with W.C. Smith and has known him for about eight years - lives in about a mile of him and has so resided for five or six years - & in answer to Question 11 of said Smiths application for pension - Says

Said Smith possessed no property at this time except some household furniture &c worth perhaps thirty dollars - & know it because I live near him and have frequently visited his house -

To the 12th He answers - Only the above except that a part of those years Said Smith owned a horse and a cow - both of which are now dead - To the 13th He answers - None -

To the 14th He answers - He is a prosper in small way - His physical condition is feeble - Lost fingers on left hand - Not being a physician I can not say what his ailments are, but he is a very feeble man.

To 15th He answers - He is unable to support himself by labor because of his infirmity -

To 16th He answers - By the aid of two Sons - one now dead & the other living & himself.

To 17th He answers - Very little I should say -

To the 18th He answers - I can not give a statement more complete than heretofore set out as to applicant's physical condition

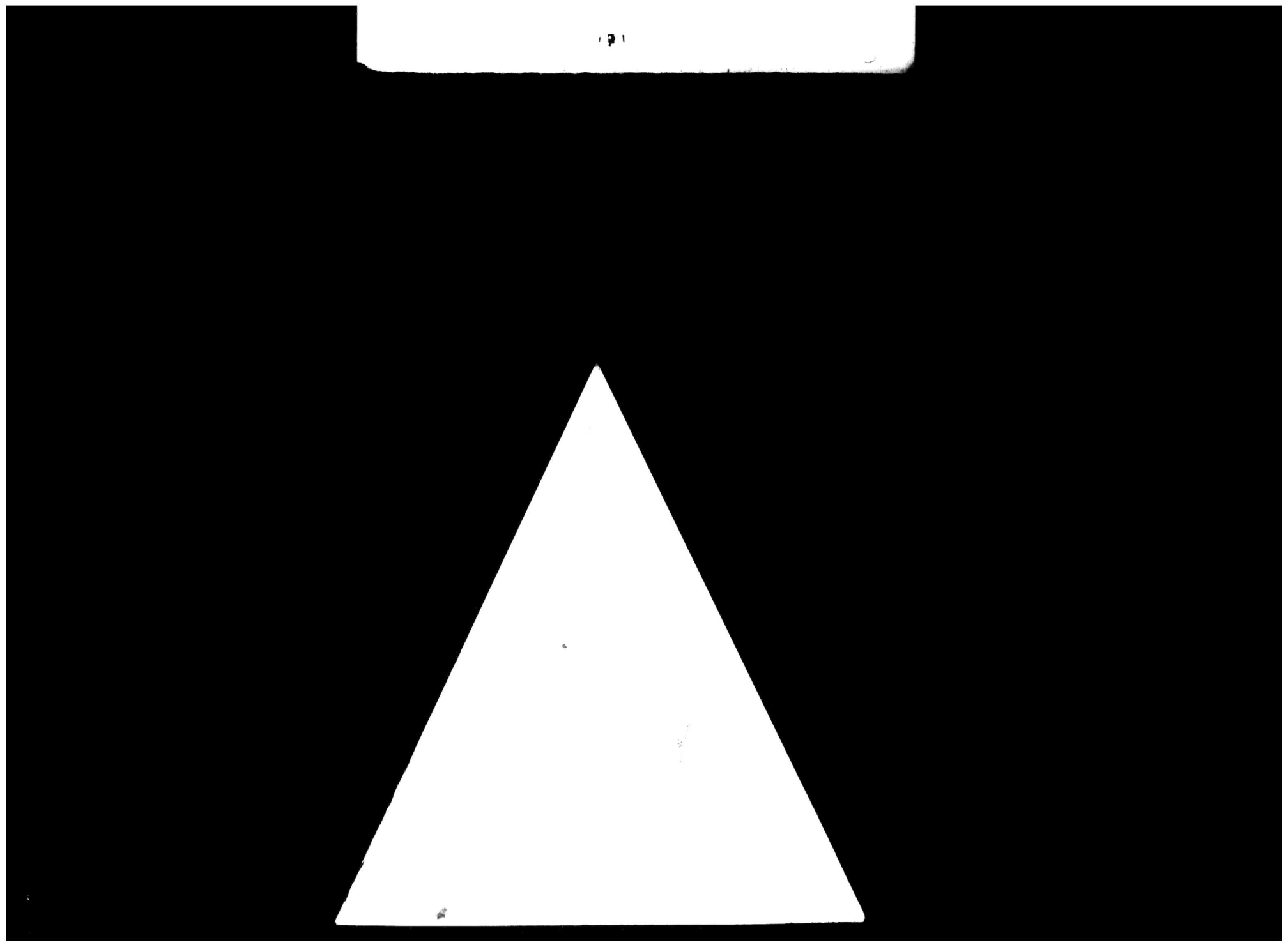
To the 19th He answers - His family consists of himself, wife and little daughter, they have no other property than as mentioned. I take the little daughter to be ten or twelve years old.

To the 20th He answers - None.

Sworn to & subscribed before me this April 11th 1904

[signature]
Ordinary

Thos B. Irwin



Smith, W. A.

Cobb County
1915

Application for Pension Due Deceased Pensioner Under Act 1904.

J. M. Garner Ordinary

for Helen A. Smith

of Cobb County

of Co. ..... Regiment

Approved and ordered paid

..... 1915.

J. W. LINDSEY,
Commissioner of Pensions.

Georgia, ... County.

I hereby authorize and constitute .....

of ..... County, my lawful attorney to collect and receipt for me in my name, the pension due to ..... for 191...., now deceased, who was on the ..... Pension Roll from said County at his death.

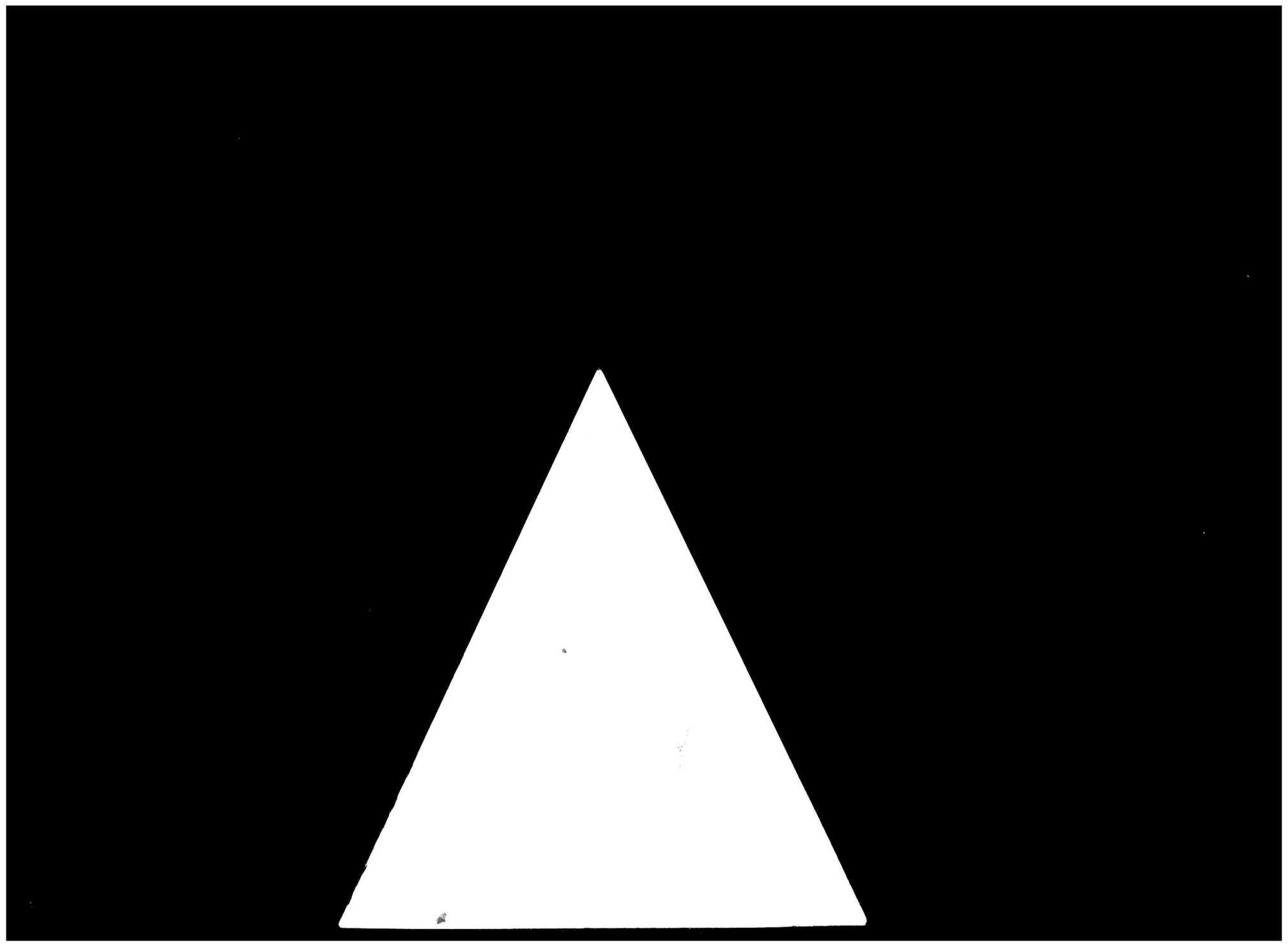
Witness my hand and seal, this ..... day of ..... 1915.

ATTEST BY

.....

.....

Note 1.—Use this blank only when the Pension is wanted to pay funeral expenses.



[illegible]

Desoffered

No. 11/15-1905

INDIGENT PENSION

1903.

Name J. M. Smith

County Cobb

Co. C. 1st Confederate Regt.

Approved _____ 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta.

8/31/05

Pension office
11/15-1905
This man deserted by costing oath of allegiance to U.S. for Pension Oct 14-1864.
J. W. Lindsey
Cons of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ COUNTY. }

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1903.

_____ [L. S.]

Executed in the presence of

_____

POWER OF ATTORNEY.

STATE OF GEORGIA, }
..... COUNTY. }

I ..... hereby authorize

..... of .....

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

..... at ..... by .....

Witness my hand and seal, this ..... day of ..... 1903.

..... [L. S.]

Executed in the presence of

Pension Office
Nov 9 1903
Ten years service
to Corporal
Co E 18th Ga Cav
Enlisted in Co X
1st 1862 -
J M Smith
Cobb Co Ga

INDIGENT PENSION.

1903.

No. 1742 Nov 9 1903

Name J. M. Smith

County Cobb

Co. L 18th Cavalry Regt.

Approved 1903

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W Harrison, State Printer, Atlanta.

6731/05

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA, }
Cobb COUNTY. }

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

1. What is your name and where do you reside? (give State, County and post-office) J. M. Smith, Marietta, Cobb County Ga. R.F.D. 4.
2. How long and since when have you been a resident of this State? All my life, since 1842
3. When and where were you born? Campbell County, Ga, August 15th 1842
4. When and where and in what company and regiment did you enlist or serve? Co. C. 18th Confederate Regt. at Mt. Carmel Ga. in Summer of 1862.
5. How long did you remain in such company and regiment? About two years.
6. When and where was your company and regiment surrendered and discharged? I was not present when it surrendered, and cannot say -
7. Were you present with your company and regiment when it was surrendered? No.
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was Captured near Atlanta, Ga. By Sherman's Army in Summer of 1864
9. How much can you earn (gross) per annum by your own exertions or labor? Not over 50 Dollars.
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Age, Infirmity & poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? For five or six years have been Unable to support Myself - Have Rheumatism in both arms all the time - Also have the dyspepsia. The trouble, with advancing age, Render me unable to support myself -
13. What property, real and personal, or income do you possess, and its gross value? Nothing except a little household goods.
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? Nothing except a little household goods.
15. In what County did you reside during those years, and what property did you then return for taxation? Cobb County - Returned nothing -
16. How were you supported during the years 1899, 1900, 1901 and 1902? 1903. By what little I could do, and my boys work - He is now of age -
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About Sixty Dollars - I Contribute very little
18. What was your employment during 1899, 1899, 1901 and 1902? What pay did you receive in each year? Laborer - Receive very little pay -
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Yes. Wife and two daughters Respectively ages 20 & 22 - Wife is an invalid. My daughters Have no employment on my Farm -
20. Are you receiving any pension? If so, what amount and for what disability? None -
21. Have you ever made an application for pension before? No
22. How many applications have you ever made and under what class? None -

Every Question MUST be Answered.

Sworn to and subscribed before me this the 6 day of August 1903. J. M. Smith Applicant.

John Lindsey Ordinary,
of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Fulton COUNTY.

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

1. What is your name and where do you reside? John W. Jones, resides at Hamphill P.O. Fulton Co, Ga
2. Are you acquainted with Jas M Smith, the applicant; if so, how long have you known him? Since 1862
3. Where does he reside, and how long and since when has he been a resident of this State? Cobb County. In Ga all his life
4. When, where and in what company and regiment did he enlist, and how do you know? 1862 - in the Cata Ga, Co C - 1st Conf Ga Rect.
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? About two years
7. When and where was his command surrendered? at Macon Ga
8. Were you present when it surrendered? I was present
9. Was applicant present? No, sir, not at Macon
10. If he was not present, where was he? He was captured by Shermans army
When did he leave his command? 1864 - For what cause? Captured
By what authority he left? Was taken prisoner How do you know all of this? I was with the Company when he was reported as captured
11. What property, effects or income has the applicant? (Give your means of knowledge.) I do not know of any
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? I do not know of any
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? None that I know of
14. What is the applicant's occupation and physical condition? Farmer - in very feeble physical condition and his eyes are weak -
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes, he is unable to support himself by labor of any sort, because he is old and feeble
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? I do not know of my own knowledge,
17. What portion of his support for these four years was derived from his own labor or income? I do not know, but very little if any
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He is feeble, old, and nearly blind and too feeble to work to make a living
19. Who composes family? What property have they? Children's age and their earning capacity? Wife, old woman - two children, girls, no property, girls 21 + 19 years of age.
20. What interest have you in the recovery of a pension by this applicant? None at all

Sworn to and subscribed before me, this the 21st day of December 1904

J. W. Jones Witness.

John R. Wrekinson Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

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

He is unable to earn a full support by his labor, for himself and family at Farming by reason of age and infirmity

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

Sworn to and subscribed before me, this the 6 day of December 1904

John Rodney Ordinary.

Gilbert Tennent M.D.
E J Setze M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Fulton COUNTY.

I, John R. Wrekinson Ordinary, in and for said County, hereby certify ~~that the applicant ..... resides in said County, and has been a bona fide resident of this State since the ..... day of ..... 189.. and that the witnesses, viz:~~ that the witness J W Jones is of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of ..... County show that applicant returned for taxation in his name in 1899 ..... Dollars of property, and in 1900 ..... Dollars of property, in 1901 ..... Dollars of property, in 1902 ..... Dollars of property.

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

Witness my hand and seal of office, this 21st day of December 1904

John R. Wrekinson Ordinary,
of Fulton County.

NOTE.

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

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
..... COUNTY.

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

.....

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

Sworn to and subscribed before me, this, the ..... day of ..... 190.....

..... Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I, John Anthony Ordinary, in and for said County, hereby certify that the applicant J M Smith resides in said County, and has been a bona fide resident of this State since the ..... day of ..... 1866 and that the witnesses, viz.: .....

are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of ..... County shows that applicant returned for taxation in his name in 1899 20 Dollars household Dollars of property, and in 1900 " " Dollars of property; in 1901 $15 " Dollars of property; in 1902 10 " Dollars of property.

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

Witness my hand and seal of office, this 15 day of Jany 1905

John Anthony Ordinary,
of Cobb County.

NOTE.

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

Jno. W. Lindsey,
Commissioner of Pensions,
Atlanta, Ga.

Nov.,6th 1905.

Gen F. C. Ainsworth,

Washington.D.C.

Dear Sir:-

Please furnish me the prison record of C. N. Smith company C 12th Confederate Regiment Infantry who claims that he was captured near Atlanta Ga July 186[illegible] and held a prisoner at _____ to the end of the war.

He is an applicant for pension pending the Georgia Pension Department,and has no other way to prove his capture an imprisonment except by this record,and for that purpose only is it asked.

Yours respectfully,

J. W. Lindsey

Commissioner of Pensions.

MILITARY SECRETARY'S OFFICE
RECEIVED
NOV 8 1905
1069276

Atlanta, Ga.
Nov. 6, 1905.

J. M. Smith,
Co. C, 1st Confederate
Regt. Infty.

Commissioner of Pensions, State of Georgia, requests prison record of the above named man, an applicant for pension.

Address: "The Military Secretary, War Department, Washington, D. C."

1069276

WAR DEPARTMENT,

THE MILITARY SECRETARY'S OFFICE,

WASHINGTON, November 11, 1905.

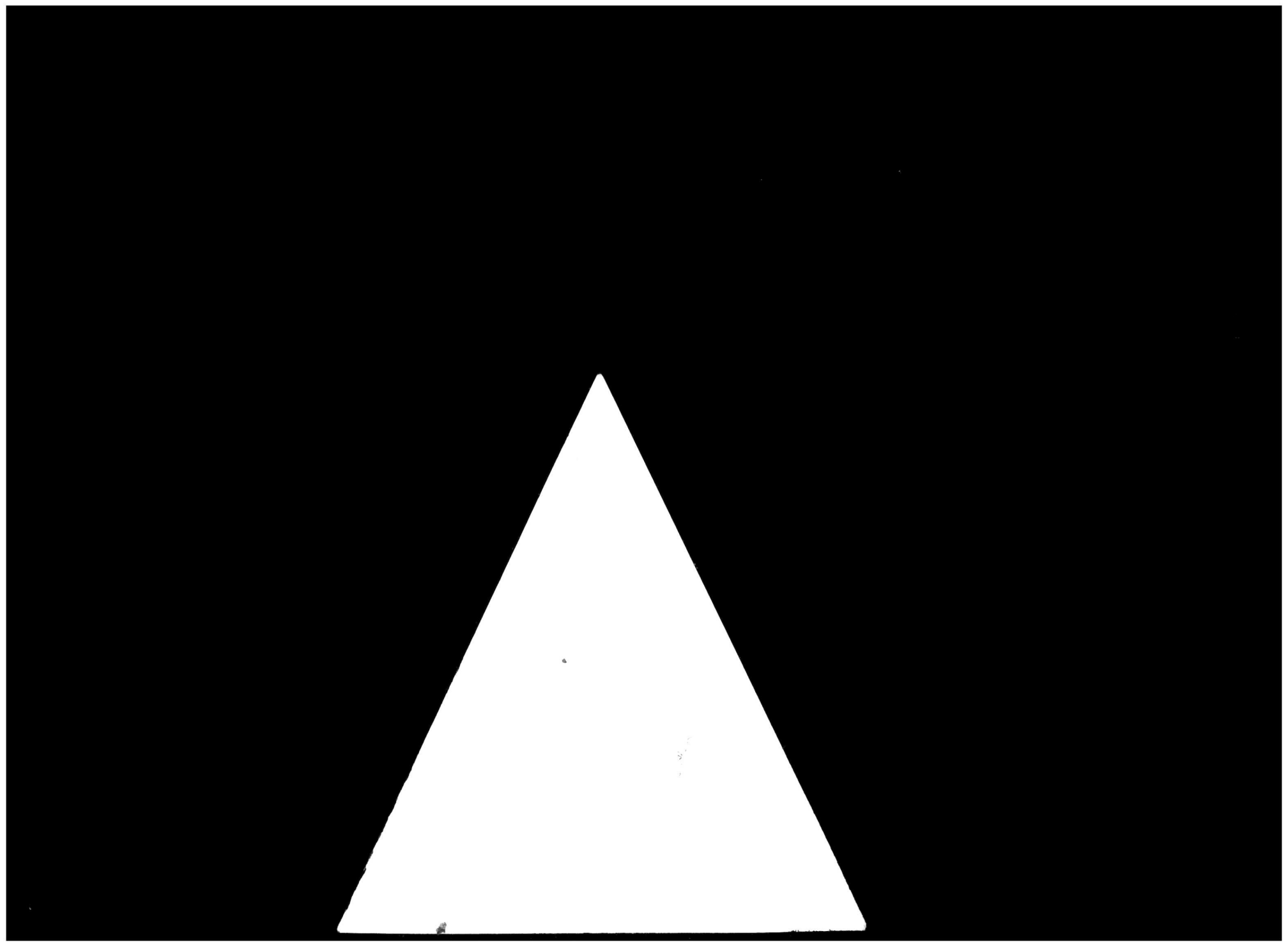
Respectfully returned to

The Commissioner of Pensions,
State of Georgia,
Atlanta.

The official records show that J.M. Smith, private, 1st Confederate Infantry, C.S.A., was captured, date not stated, and was held as a prisoner of war until October 14, 1864, when released on taking oath of allegiance.

F. C. Ainsworth
The Military Secretary

(M.S.O. 72-1) Per HH



Smith, Jesse J.
Cobb Co

No. 143

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING OCT. 25, 1889.

FOR

Loss of Right Arm

Applicant J. J. Smith

County Cobb

Amount 100

Date of Warrant Feby 7/89

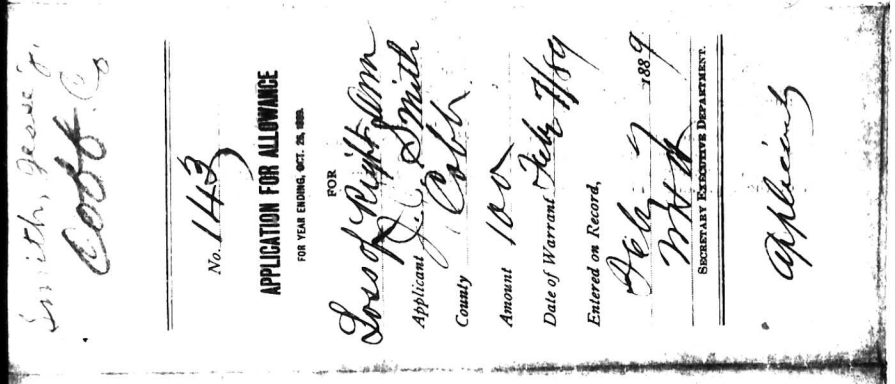
Entered on Record,

Feb 7 1889

W. H. H.

SECRETARY EXECUTIVE DEPARTMENT.

Applicant



No. 143

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING, OCT. 26, 1889.

FOR

Loss of Right Arm

Applicant J. J. Smith

County Cobb

Amount 100

Date of Warrant Feb 7 1889

Entered on Record,

Feb 7 1889

SECRETARY EXECUTIVE DEPARTMENT.

Applicant's

STATE OF GEORGIA,

Cobb County.

PERSONALLY appears Jessey J. Smith of Cobb county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continuously since the ____ day of ____ 1879; 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 22nd th Regiment of Ga. Volunteers Wrights 's Brigade; that whilst engaged in such military service, at the battle of Gettysburg in the State of Penn., on the 3rd day of July 186 , he was wounded as follows: By Canister Shot striking the arm above the wrist, from which amputation below Elbow was necessary and was done, also by shot striking upper bone and passing out near right hip bone, thereby causing rupture.

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

Sworn to and subscribed before me, this the 6th day of Feby 1889

J. J. his X Smith mark

Jill. Stowordny.

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

STATE OF GEORGIA,

Cobb County.

PERSONALLY comes before me Jill. Stone Ordinary of said county, N. N. Gober and E. J. Petze, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined J. J. Smith and after such examination say that the applicant has been injured as follows: Right arm shot off just below elbow joint & wounded in abdomen by a minnie ball, entering just to the left of umbilicus passing entirely through & out through the right illiac bone, & causing applicant to be ruptured ever since from effect of said wound. The right arm is entirely off & essentially useless.

Sworn to and subscribed before me, this 6th day of Feby 1889

Jill. Stone

ORDINARY.

N. N. Gober M. D.

E. J. Petze M. D.

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,

Cobb
County.

I, J. M. Stone, Ordinary of said county, do certify that I am well acquainted with J. J. Smith, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and that he is disabled to the extent he claims*, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit:

are persons of respectability, and that their statements are worthy of full credit and belief.

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

Given under my official signature and seal, this 6th day of July 1884

J. M. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

county, in said State, do hereby appoint

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

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

day of 188

(L. S.)

Executed in the presence of us:

)

)

DIRECTION:

Send money to me as follows, by

to P. O.

County, Georgia.

NOTES.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. J. Smith hereby authorize Ransom Acre of Fulton County Ga.

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5 day of Mch 1896.

J. J. his x mark Smith [L. S.]

Executed in presence of us
J. M. Stone
Only

Fulton 1895
J. Smith J. F.
ACT OF 24 OCT. 1887.
(For These Already Enrolled.)
No. ~~376~~ 345 Cobb Co.

SOLDIER'S PENSION.

1896.

Name J. J. Smith
County Cobb
Disability Loss right Arm
Amount, $ 100.
3/17 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Atty.

Geo. W. Harrison, State Printer, Atlanta.

No data

State of Georgia } I Ransom Acre
Fulton County } do hereby appoint
J. J. Coggins my lawful attorney
to collect the written pension
in favor of J. J. Smith and hereby
ratify & confirm whatever said
attorney may do in the premises.
This 15th day of March
1896.
Attest Tyre S. Jenning
Ransom Acre

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

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

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

[L. S.]

Executed in presence of

Fulton 1895
J. Smith J. F.
ACT OF 24 OCT. 1887.
(For These Already Enrolled.)
No. 2724

INVALID

SOLDIER'S PENSION.

1897.

Name J. J. Smith
County Cobb
Disability Loss right Arm
Amount, $ 100.
2/26 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Appt.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. J. Smith of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of 1853, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company E, of 22 Regiment of Ga Volunteers, Wright's Brigade; that whilst engaged in such military service in the State of Penn., on the 2nd day of July 1863, he was wounded, injured or diseased, as follows:

By Canister Shot striking the arm causing said arm to be amputated below the elbow.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Fulton ~~Cobb~~ county been allowed a pension of $100. dollars, for the year 1895.

Sworn to and subscribed before me, this, the 5 day of Mch 1896.

J. J. his x mark Smith

J. M. Stone Ony

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,
Cobb County.

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

Given under my official signature and seal, this 5th day of Mch 1896.

Affix your seal here.

J. M. Stone

Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. J. Smith of Cobb 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 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 E, of 22 Regiment of Ga. Volunteers, Wright's Brigade; that whilst engaged in such military service in the State of Penn., on the 4 day of July 1863 he was wounded, injured or diseased of follows:

By grape shot striking the right arm fracturing it so that it was amputated just below the elbow

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Cobb county been allowed an invalid pension of $100. Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 26 day of Feby 1897.

POST OFFICE J. J. his x mark Smith Dodgens P. O.

J. M. Stone Ony

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,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with J. J. Smith 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 26 day of Feby, 1897.

Affix your seal here.

J. M. Stone

Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. J. Smith hereby authorize J. W. Hardeman of Marietta, Ga.

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

at Marietta, Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22nd day of Feby 1898.

J. J. his X mark Smith [L. S.]

Executed in presence of
[illegible]

Pay [illegible] [illegible] [illegible]

ACT OF [illegible]
(For Those Already Enrolled.)
No. 2770

INVALID
SOLDIER'S PENSION.
1898.

Name J. J. Smith
County Cobb
Disability Right arm
Amount, $ 100
2/23 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
R. C. Irwin

GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. J. Smith hereby authorize D. T. Mangat of Marietta, Ga.

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 15th day of Feby 1899.

J. J. his X mark Smith [L. S.]

Executed in presence of
J. M. Stone

Pay to the order of W. A. Florence
Pay to the order of J. B. Davidson D. T. Mangat.
signed in the presence of A. J. Hallibaugh W. A. Florence

Smith J. J.
Cobb Co.

CODE SECTION 1250.
(For Those Already Enrolled.)
No. 2466

INVALID
SOLDIER'S PENSION.
1899.

Name J. J. Smith
County Cobb
Disability Loss arm
Amount, $ 100
4/17 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. B. Davidson

GEO. W. HARRISON, STATE PRINTER, ATLANTA

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. J. Smith of Cobb 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 since 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 E, of 22th Regiment of Ga. Volunteers, Rights's Brigade; that whilst engaged in such military service in the State of Penn., on the 2nd day of July 1863, he was wounded, injured or diseased as follows:

By Cannon shell striking right arm just above wrist joint and rendering it necessary to amputate arm below elbow

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Cobb county been allowed an invalid pension of $100. Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 22nd day of Feby. 1898. J. J. his Smith mark POST-OFFICE Marietta, Ga.

J. M. Stone Ordy

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,
Cobb County.

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

Given under my official signature and seal, this 22nd day of Feby. 1898.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. J. Smith of Cobb 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 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 E, of 22nd Regiment of Ga. Volunteers, Wrights's Brigade; that whilst engaged in such military service in the State of Penn., on the 2nd day of July 1863, he was wounded, injured or diseased as follows:

That while engaged at the battle of Gettysburg in Penn. was struck with Canister shot on right arm which caused said arm to be amputated near the Elbow

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 Cobb County been allowed an invalid pension of $100 Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 15th day of Feby 1899. J. J. his Smith mark POST-OFFICE Marietta Ga.

J. M. Stone Ordy

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,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with J. J. Smith 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 Feby 1899.

Affix your seal here

J. M. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. J. Smith hereby authorize J. M. Stone of Marietta, Ga.

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

at Marietta, Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26th day of February 1900.

J J his x mark Smith [L. S.]

Executed in presence of
T. J. Hamby

Smith, J. J.
Cobb Co.

CODE SECTION 1250.
(For Those Already Enrolled.)

No. 1299

INVALID
SOLDIER'S PENSION.
1900.

Name J. J. Smith
County Cobb
Disability Arm
Amount, $ 100
Warrant issued Mar 7 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

I _____ hereby authorize _____

_____ of _____

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

_____ by _____

at _____

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

day of _____ 1901.

_____ [L. S.]

Executed in presence of

_____

Smith, J. J.
Cobb Co.

CODE SECTION 1250.
(For Those Already Enrolled.)

No. 160

DISABLED
SOLDIER'S PENSION.
1901.

Name J. J. Smith
County Cobb
Disability Lep of Arm
Amount, $ 100
Jany 15 1901.

JOHN W. LINDSEY,
[redacted]
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. J. Smith of Cobb 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 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 E, of 22nd Regiment of Georgia Volunteers, Wright's Brigade; that whilst engaged in such military service in the State of Penn, on the 2nd day of July 1863, he was wounded, injured or diseased as follows:

That while engaged at the battle of Gettysburg in Penn. was struck with Canister-shot on right arm which caused said arm to be amputated near the elbow

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 Cobb County been allowed an invalid pension of $100. Dollars, for the year 189

Sworn to and subscribed before me, this the 26th day of February 1900. J. J. Smith POST OFFICE

J. M. Stone Ord.

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

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 26th day of February 1900.

J. M. Stone

Affix your seal here.

Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. J. Smith of Cobb 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 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 E, of 22th Regiment of Ga Volunteers, Wrights's Brigade; that whilst engaged in such military service in the State of Penn, on the 2nd day of July 1863, he was wounded, ~~injured~~ or diseased as follows:

That while engaged at the battle Gettysburg in Penn was struck with Canister Shot on right arm below which caused arm to be amputated near the elbow

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 Cobb County been allowed an invalid pension of $100 Dollars, for the year 1900.

Sworn to and subscribed before me, this the 15th day of January 1901. J. J. Smith Postoffice Mart

John Awtrey

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,
Cobb County.

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

Given under my official signature and seal, this 15th day of January 1901.

John Awtrey

Affix your seal here.

Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. J. Smith hereby authorize John Awtry of Marietta to receive and receipt for the pension paid hereon and request that he remit same to me by hand at his office

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1st day of Jany. 1902.

J. J. his x mark Smith [L. S.]

Executed in presence of
M Gaunt

Smith, J. J.
Cobb County

CODE SECTION 1250
(FOR THOSE ALREADY ENROLLED.)

No. 348

DISABLED
SOLDIER'S PENSION
1902.

Name J. J. Smith
County Cobb
Co. E Regiment 22
Disability
Amount, $ 100 1/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordy

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W. M. Kemp Guardian J. J. Smith hereby authorize W. H. Hamer of Marietta Ga to receive and receipt for the pension paid hereon and request that he remit same to me by hand at Marietta Ga

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 17 day of April 1903.

W. M. Kemp Guardian
J. J. Smith [L. S.]

Executed in presence of
J. M. Gaunt

Smith, J. J.
W. M. Kemp Guardian
Cobb County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 3254

DISABLED
SOLDIER'S PENSION
1903.

Name J. J. Smith
County Cobb
Co. E Regiment 22
Disability Loss of Arm
Amount, $ 160.00 4/30 1903.

JOHN W. LINDSEY.
Commissioner of Pensions.

WARRANT HANDED TO
Guardian

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears J J Smith of Cobb 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 ____ 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 E, of 22nd Regiment of Georgia Volunteers, Wright's Brigade; that whilst engaged in such military service in the State of Penn, on the 2nd day of July 1863, he was wounded, injured or diseased as follows: At the battle of Gettysburg in Penn was struck with Canister Shot on right Arm which Injury said Arm to be Amputated near the elbow

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 Cobb County, been allowed an invalid pension of $ 5.50 Dollars, for the year 1901.

Sworn to and subscribed before me, this the 3 day of Jan 1902. J J Smith Post-office Marietta Ga

John Atkinson

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,
Cobb County.

I, John Atkinson Ordinary of said County, do certify that I am well acquainted with J J Smith 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 3rd day of Jan 1902.

John Atkinson
Ordinary Cobb County.

Affix your seal here

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,
Cobb County.

Personally appears, J J Smith (Marietta Cobb Co Ga) of Cobb 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 E, of 22 th Regiment of Ga Volunteers ____'s Brigade; that whilst engaged in such military service in the State of ____, on the ____ day of ____ 186__, he was wounded, injured or diseased as follows: That the said J J Smith will on the Original Service set out to wit Nov 2nd 1863 which said Injury said J J Smith has been Granted $6.00 per Year from the State of Georgia

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 Cobb County, been allowed an invalid pension of $ 6.00 Dollars, for the year 1902.

Sworn to and subscribed before me, this the ____ day of Oct 1903. J J Smith Post-office ____

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

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this ____ day of Oct 1903.

John Atkinson
Ordinary Cobb County.

Affix your seal here

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, Cobb County.

I, Mary F. Smith wife of J. J. Smith hereby authorize of to receive and receipt for the pension paid hereon, and request that he remit same to by at.

In Witness Whereof, I have hereunto set my hand and seal, this 12 day of Jany 1905.

Mary F. her Smith [L.S.]
mark wife of J. J. Smith

Executed in the presence of
J. M. Gann

GEORGIA, Cobb County.

I, John Awtrey, Ordinary of said county, do certify that I personally know Mrs J. J. Smith, the applicant, and that she is the lawful ~~widow of~~ wife of J. J. Smith, and was on the Invalid Pension Roll of said Cobb County county, and was paid a Pension from Cobb county for 1904, and at the time of his ~~death~~ commitment to the Asylum on the 8th day of December 1904, a copy of funeral proceedings attached hereto, there was due to him and unpaid his Pension of 100.00 dollars from the State of Georgia, and I know J. A. Mogarty, the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 2 day of Feb 1904

John Awtrey
Cobb
Ordinay County.

Smith J. J.
Cobb Co. Cobb
(FOR THOSE ALREADY ENROLLED.)
Co. Milton Co. 1906
No. 3052

DISABLED
SOLDIER'S PENSION
1905.

Name J. J. Smith, Invalid by wife
County Cobb
Co. E Regiment 22
Disability
Amount, $100
JAN 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Judy

The Franklin Printing and Publishing Co., Atlanta
Geo. W. Harrison, Manager, for State Printer

NO DATA

Smith J. J.
Cobb Co. Cobb
No. 1311
190

Application for Pension
Due ~~Deceased~~ Soldier
Under Act 1891.

BY
Mrs. J. J. Smith
Widow of J. J. Smith
of County Cobb
Co. Reg't Vols.

Approved and Paid
23 1904
J. W. LINDSEY,
Commissioner of Pensions.
Lacy

GEORGIA, Cobb County.

I hereby authorize and constitute John Awtrey of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 1904, through my ~~deceased~~ Insane husband, who was on Invalid Pension Roll and paid from Cobb County for 1903

Witness my hand this 2 day of Feb 1904.

Attested before me:
J. M. Gann

Mrs J. J. her Smith
x mark

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,)
Cobb COUNTY.)

Personally appears Mary Smith wife of J J Smith who is now confined in the asylum of Cobb 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 ____ in Company G, of 22 th Regiment of ____ Volunteers ____'s Brigade; that whilst engaged in such military service in the State of ____, on the ____ day of ____ 186__ he was wounded, injured or ~~diseased~~ as follows:

Lost right arm at Gettysburg

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 100 Dollars, for the year 1904.

Sworn to and subscribed before me, this the 1st day of Jany 1905.

John A Wray
Ordinary Cobb County.

M F Smith wife of J J Smith
Post-office

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

STATE OF GEORGIA, }
Cobb COUNTY. }

I, John A Wray Ordinary of said County, do certify that I am well acquainted with M F Smith wife J J Smith now in the asylum 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 Jany 1905.

John A Wray
Ordinary Cobb County.

Affix your Seal here.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

APPLICATION FOR PENSIONS DUE DECEASED SOLDIER.

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Cobb County.

Personally before me come Mrs. J J Smith, of said county, after being duly sworn, on oath says that she is the ~~widow~~ wife of J J Smith who was duly enrolled as a Invalid Pensioner from the county of Cobb and was paid a Pension of One Hundred Dollars from Cobb county for 1903, and that the said J J Smith died in ~~Cobb~~ committed to the Sanitorium from county on the 8th day of December 1902 and at the time of his death a pension to said date he was drawing a pension for the loss of his right arm He was committed, and for prior to Pension of One Hundred Dollars was due him from Cobb county, and she makes this application that she may receive said pension as his deposit The same and unpaid for 1904. Applicant further swears that she married the said widow under Acts 1894 6514 Volume 4 Code Ga. Code Supplement 1895 Page 11 J J Smith on the ____ day of 1855, in Gwinnett county and State of Ga and resided with him from date of marriage to his ~~death~~ as his lawful wife, and is now his dependant ~~widow~~, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 2nd day of Feb 1904.

John A Wray
Ordinary Cobb County.

Mrs J J Smith her mark [L.S.]

AFFIDAVIT OF WITNESS.

GEORGIA, Cobb County.

Personally before me come J A Megarity, who on oath says that he knew J J Smith before he was committed to the asylum while in life and that he knows his wife Mrs. J J Smith, the above applicant; that he knows that the said Mrs J J Smith and J J Smith lived for Years as man and wife and were recognized as such, but does not know when they were married. were in due form of law married in the county of ____ in the State of ____ on the ____ day of ____ 18__, and that they resided together as husband and wife from date of marriage to the day of his ~~death~~ committment to the asylum on the 8th day of December 1902, and I now know that she is his dependant widow.

Sworn to and subscribed before me this 2nd day of February 1904.

John A Wray
Ordinary Cobb County.

J A Megarity

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

2nd. Ordinary must send in all cases certified copy of marriage license attached.

Cobb

Maimed Soldiers.

Audited Feb. 7th 1889.

Wm A Wright
COMPTROLLER GENERAL

Voucher No. 1113.

Amount $ 100.

Paid to Jesse J. Smith

For Loss of
Right Arm
Feby 7 1889

Included in Warrant No.

issued to Treasurer

1889.

WARRANT CLERK.

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

Application

J. M. Stone,
Ordinary and Probate Judge.

Office of Ordinary,
Cobb County, Ga.

Marietta, Ga. Feby 14 1889

Richd Johnson
Pension Comr.
These Papers
and these proofs
are all right
this is all done
in my presence.

J. M. Stone
Ord

No. 143

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Febry 7 1889

Mr. Jesse J. Smith, of the County of Cobb, 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 Right arm

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

TREASURER'S OFFICE PAID STATE OF GEORGIA

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

B. Gordon
GOVERNOR.

By the Governor
C. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

$100

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

One Hundred & 00/ Dollars,

per above voucher, this 7 of Febry 1889.

Jesse J. Smith

Wit
W. J. Speer

PROCEEDINGS IN LUNACY.

W A Oliver
VERSUS
J J Smith

STATE OF GEORGIA, Cobb County.

To the Ordinary of said County.

The Petition of W A Oliver showeth that J J Smith of Cobb county, has recently become Insane, and is therefore at this time a fit and proper subject to be committed to the Lunatic Asylum of this State.

That the Two nearest adult relatives of the said J J Smith are willing to this proceeding, and waive the usual notice required by law to be given, and consent that the case for good reasons be heard and determined at once. Your petitioner, therefore, prays that commission may be issued according to the Statute in such cases made and provided, and determine whether J J Smith is subject to be committed to said Asylum or not.

W A Oliver

Sworn to and subscribed before me, Nov 27th 1902

Ordinary.

STATE OF GEORGIA, Cobb County.

To the Sheriff or his Lawful Deputy, or Lawful Constable of said County.

W A Oliver having applied to me for Commission to enquire into the mental condition of J J Smith of said County, with the view of committing him to the Lunatic Asylum of said State, and having shown that the three usual notice required by law to be given the two nearest adult relatives of said J J Smith is waived by said relatives. You are hereby required to summon the following persons, as Jurors, to be and appear at the Residence of Geo J J Smith in said County, on Friday the 28 day of November 1902, at 2.30 o'clock, P M, promptly, to enquire into the mental condition of the said J J Smith

C E Johnson
Sanford Dodson
W A Olliver M D
W A Sauls
C B Dodson
Chas Mackey
Luther Nix
Jim Frisbee
Wm Daniell
J P Johnson
C C Reed
Jack Dickerson
Lawrence Power

William Moon
J W Reed
Jas Pitts
Virgil Mitchell

Given under my hand, November 27th 1902

[signature]
Ordinary.

W A Olliver
VERSUS
J J Smith

QUESTION OF INSANITY.

And now comes W A Olliver and says that J J Smith of Cobb County, is Insane, and of this he puts himself on the County.

W A Olliver

You and each of you do swear, that you will faithfully and impartially try the issue of insanity about to be submitted to you, and a true verdict give according to the evidence; So help you God.

W A Olliver M D
C C Reed
J P Daniell
C B Mackey
J B Frisbee
C E Johnson

Sworn to before me, November 28th 1902

[signature]
Ordinary.

CERTIFICATE OF JURY.

We, the Jury, find the defendant, J J Smith to be Insane, of General Dementia and a fit and proper person to be committed to the Lunatic Asylum of this State, and we further find that he has no sufficient means to defray the expenses of trying the case, and conveying to said Asylum, sufficient means to support or maintain him self in said Asylum.

C E Johnson
Foreman.

Nov 28th 1902

ORDER OF COURT.

WHEREUPON, it is Considered, Ordered and Adjudged by the Court, that J J Smith is Insane and a fit subject for the Lunatic Asylum, and as such, that he be committed to the Lunatic Asylum of this State by the Sheriff, his Deputy, or by some other proper person. And it is further adjudged, that the said J J Smith has not sufficient means with which to support him self in said Asylum.

[signature]
Ordinary.

November 29th 1904

Georgia
Cobb County } I J M Gann Clerk of the Court of Ordinary of Said County certify that the above and foregoing is a true copy of the proceedings in Lunacy of J J Smith as found on file in the ordinary ~~Con~~ office in said County.

Witness my hand & seal of office
This Feb 3 - 1904

J M Gann
Clerk Court Ordinary
Cobb County
Ga

No. 3

COBB COURT OF ORDINARY.

April TERM, 1903

W. M. Kemp

J. J. Smith

PETITION FOR LETTERS OF GUARDIANSHIP.

FILED IN OFFICE

February 7th 1903

J. M. Gaunt
Clerk Court ORDINARY.

Recorded in Book F
Page 379

Georgia
Cobb County

I J M Gaunt Clerk
Court Ordinary Cobb
County Georgia, Certify
that this sheet of written and printed matter
is a true copy of the application. Citation
and Order appointing W M Kemp
Guardian of the property of J J Smith
as found of record in the office of
the Ordinary of said County

J M Gaunt
Clerk Court Ordinary
Cobb County Ga

APPLICATION.

GEORGIA, COBB COUNTY.

To Hon John Ardrey Ordinary of said County:

THE PETITION OF W M Kemp shows

that J J Smith a resident of said County
lately become insane and was duly com-
mitted to the Georgia Sanitarium at Milledgeville
Ga where he is now confined, and that he has some property
and also a pension due him and that it is necessary ~~that~~
said County, aged respectively years, are the
a Guardian should be appointed to prevent the same from
~~children of~~ waste

late of said County deceased, and that they are entitled to receive from the estate of their

each the sum of

Dollars,

in and

that it is necessary that ~~they~~ he should have a guardian appointed to take charge of their ~~persons~~
and property.

WHEREFORE petitioner prays that citation may issue and be published in terms of the law, and if no sufficient reason be shown why he should not, that he be appointed the guardian of said minors.

W M Kemp
Petitioner.

ORDER FOR CITATION.

AT CHAMBERS Feb 9th 1893

Upon reading and considering the foregoing petition, ordered that citation issue as required by law.

John Avery
ORDINARY.

CITATION.

GEORGIA, COBB COUNTY.

TO ALL WHOM IT MAY CONCERN:

W M Kemp having in due form applied to the undersigned for the Guardianship of the ~~person and~~ property of J Smith a Lunatic now Confined in the Georgia Sanitarium

~~minor children of~~ late of said County deceased. Notice is hereby given that said application will be heard at my office on the first Monday in April next.

Witness my official signature, this 1st day of February 189

John Avery
ORDINARY.

ORDER.

April TERM, 1893

Upon reading and considering the application of W M Kemp for Letters of Guardianship for J Smith a Lunatic now Confined in the Georgia Sanitarium

and it appearing that citation was duly published, and no objections having been filed. It is ordered that W M Kemp be and he is hereby appointed Guardian of the ~~person and~~ property of the said ~~minor~~ Lunatic, and that Letters of Guardianship issue to him upon his taking and subscribing the oath and giving bond and security as required by law in the sum of Two Hundred and Fifty Dollars.

This 6th day of April 1893

John Avery
ORDINARY.

OATH.

GEORGIA, COBB COUNTY.

I, W M Kemp do swear that I will well and truly perform all the duties required of me as the Guardian of J Smith and will faithfully account with said J Smith for ~~his~~ estate. So help me God.

W M Kemp

Sworn to and subscribed before me, this 6th day of April 1893

J M Gann
Clerk Court of Cobb County Ga
ORDINARY.

Copy

PROCEEDINGS IN LUNACY.

W A Oliver

VERSUS

J J Smith

STATE OF GEORGIA, Cobb County.

To the Ordinary of said County.

The Petition of W A Oliver showeth that J J Smith of Cobb county, has recently become Insane, and is therefore at this time a fit and proper subject to be committed to the Lunatic Asylum of this State.

That the Three nearest adult relatives of the said J J Smith are willing to this proceeding, and waive the usual notice required by law to be given, and consent that the case for good reasons be heard and determined at once. Your petitioner, therefore, prays that commission may be issued according to the Statute in such cases made and provided, and determine whether J J Smith is subject to be committed to said Asylum or not.

W A Oliver

Sworn to and subscribed before me, November 27 1902

John Autrey
Ordinary.

STATE OF GEORGIA, Cobb County.

To the Sheriff or his Lawful Deputy, or Lawful Constable of said County.

W A Oliver having applied to me for Commission to enquire into the mental condition of J J Smith of said County, with the view of committing him to the Lunatic Asylum of said State, and having shown that the usual notice required by law to be given the three nearest adult relatives of said J J Smith is waived by said relatives. You are hereby required to summon the following persons, as Jurors, to be and appear at the Residence of said J J Smith in said County, on Friday the 28 day of November 1902, at 2.30 o'clock P M, promptly, to enquire into the mental condition of the said J J Smith

O. E. Johnson
Lanford Dodgen
W. A. Oliver M.D.
W. A. Sauls
John B. Dodgen
Charles Mackey
Luther Nix
Jim Forsbee
John Daniell
J. P. Johnson
O. E. Reed
Jack Dickerson
Lawrence Powers

William Moon
J. W. Reed
Robert Mitchell
Jas Pitts
Virgil Mitchell

Given under my hand, November 27 1902

John Antrey
Ordinary.

W. A. Oliver
VERSUS
J. J. Smith

QUESTION OF INSANITY.

And now comes W. A. Oliver and says that J. J. Smith of Cobb County, is Insane, and of this he puts himself on the County.

W. A. Oliver

You and each of you do swear, that you will faithfully and impartially try the issue of insanity about to be submitted to you, and a true verdict give according to the evidence; So help you God.

O. E. Reed
J. P. Daniell
W. A. Oliver M.D.
O. E. Mackey
J. B. Forsbee
O. E. Johnson

Sworn to before me, November 28th 1902

John Antrey
Ordinary.

CERTIFICATE OF JURY.

We, the Jury, find the defendant, J. J. Smith to be Insane, of General Dementia and a fit and proper person to be committed to the Lunatic Asylum of this State, and we further find that he has not sufficient means to defray the expenses of trying the case, and conveying himself to said Asylum, nor sufficient means to support or maintain him self in said Asylum.

O. E. Johnson
Foreman.

November 28 1902

ORDER OF COURT.

WHEREUPON, it is Considered, Ordered and Adjudged by the Court, that J. J. Smith is Insane and a fit subject for the Lunatic Asylum, and as such, that he be committed to the Lunatic Asylum of this State by the Sheriff, his Deputy, or by some other proper person. And it is further adjudged, that the said J. J. Smith has not sufficient means with which to support him self in said Asylum.

John Antrey
Ordinary.

November 28 1902

Georgia
Cobb County

I J M Gaun Clerk Court of Ordinary of Said County, Certify that the foregoing pages of written and printed matter is a true Copy of the proceeding in the Case of W. A. Oliver, vs J. J. Smith, charged with Lunacy, and the finding of the Jury and order of the Court in the Same, and that the Said J. J. Smith was duly Committed to and admitted into the Georgia Sanitarium under said proceedings. This April 16 1903

J. M. Gaun
Clerk Court Ordinary
Cobb County
Georgia

Georgia, Cobb County.

Personally comes W.M. Kemp, Guardian of J. J. Smith, an invalid pensioner of said County, and now an inmate of the State Sanitarium for the insane at Milledgeville, Georgia, which said affiant being duly sworn deposes and says that said J. J. Smith is on the invalid pension roll of said State and is entitled to the sum of one hundred dollars for the loss of the right arm, that said sum has not paid for the year 1903, and that affiant is the duly appointed and qualified guardian of the property of said J. J. Smith. Affiant makes this affidavit and application for the purpose of collecting said sum of money for the use of said pensioner and his family. A copy of said J. J. Smith's former application is hereto attached.

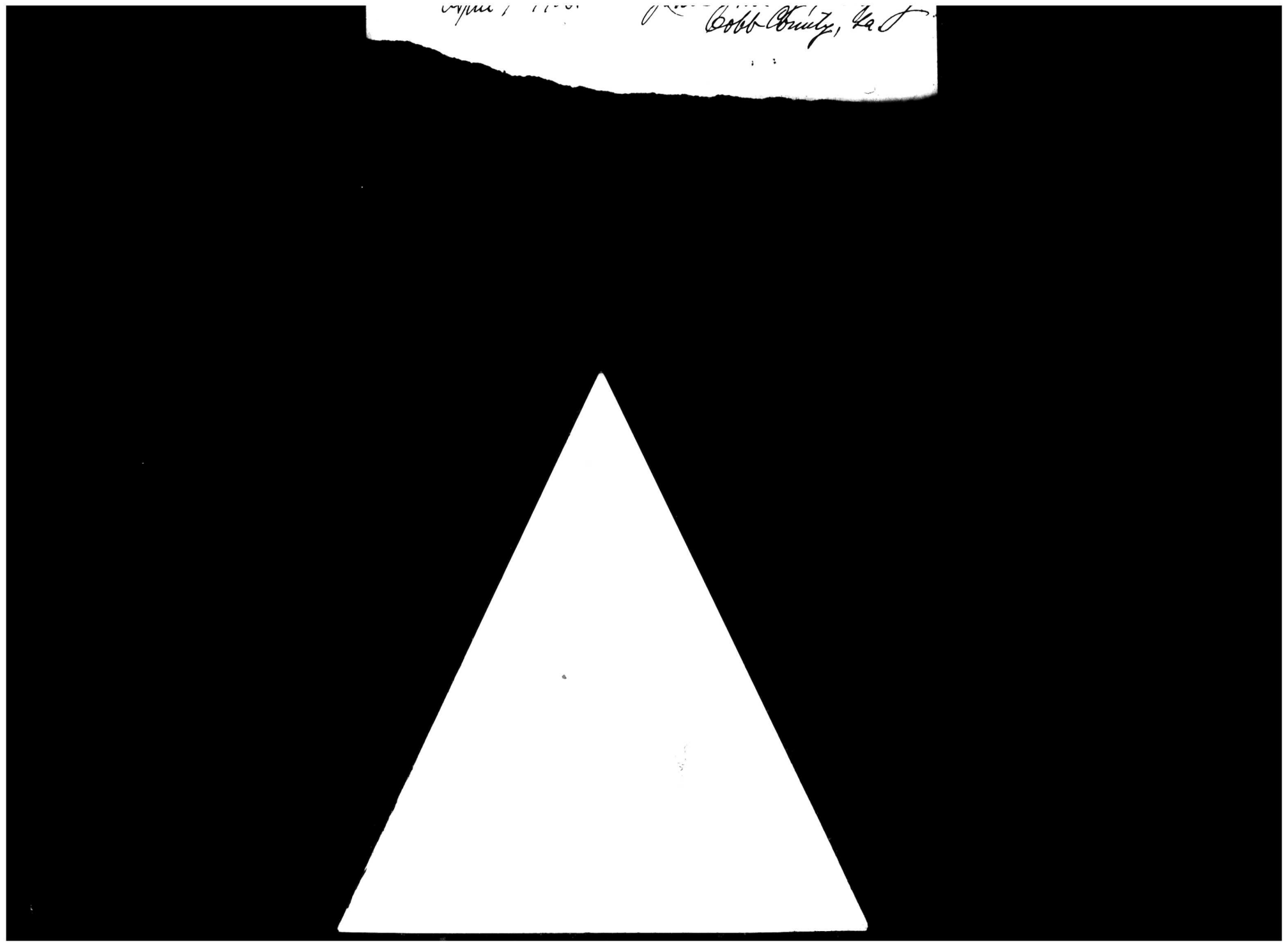
W.M. Kemp

Sworn to and subscribed before me this April 7th 1903. and I certify that the affiant, W.M. Kemp, is the duly qualified guardian of J. J. Smith, a lunatic confined in the Asylum of said State, and that said Smith has been a regular invalid pensioner residing in this County for a number of years.

April 7th 1903.

John Awtrey, Ordinary
Cobb County, Ga.

Application Pat



Smith, J. C.
Cobb Co.

No. 407 1911

Confederate Soldier's Application.

UNDER ACT 1910.

County Cobb
Name J. C. Smith
Company E
Regiment 1st Ga. State Troops
Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (Give County and Post-office) J. C. Smith, Marietta, Ga. R.F.D. #6

2. How long and since when have you been a continuous resident citizen of this State? All my life

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? This State

4. When and where and in what Company and Regiment did you enlist? (Give the arm and class of Service) 1862, Cobb Co. Co. E. 1st Ga. State Troops

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) until surrender from 1862 to 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? 1865 Columbus, Ga.

7. Were you actually present with your Command when it was surrendered or discharged? no

8. If you were not actually present, state specifically and clearly where you were. I was at home in Cobb Co. at surrender on Furlow

a. Where was your Command when you left it? At Macon, Ga. I was left there sick and was never able to return

b. When did you leave the Command? Nov. 1864

c. For what cause did you leave? I was sick and left in hospital

d. By whose authority did you leave? Dr. of Command.

e. For how long was your leave granted? In what way? I was left at Macon, Ga. sick. My wife came after me in March 1865 and was granted 20 days furlow and before time was [illegible] to surrender

f. Why did you not return to your Command after leave expired? Because of my Co's surrender

g. In what way were you prevented? By being surrendered and my being sick

h. What effort did you make to return? I was unable to go back before surrender

i. Were you captured during the war? no

j. If so, when, and where? In what prison were you held and when were you released?

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) 40 acres of land $700.00; 1 cow $20.00; household goods $40.00

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? Sold nothing

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). 40 acres of land $700.00; 1 cow $20.00; household goods $40.00

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? none

13. Are you drawing a pension of any amount from this State or the United States? no

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Yes; on acct of property

Sworn to and subscribed before me, this the 17 day of October 1910

J. C. his x mark Smith

J. M. Garner Ordinary,
of Cobb County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? W. G. Simpson, Marietta, Cobb Co. Ga.

2. How long and since when have you known J. C. Smith the applicant? about 50 years

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? 5 miles below Marietta, Ga, Cobb Co. Been in Ga. since I have known him. I know before he was

4. When, where and in what Company and Regiment did J. C. Smith enlist during war from 1861 to 1865? (Give date and place) 1862 Cobb Co. "Co. E. 1st Ga. State Troops

5. How did you obtain your information of this Service? By being in same Co. with him

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) 1862 to 1863 or 64- I left him there when I went with Lewis

7. When and where was his Command surrendered or discharged (give date and place) I do not know- I was in Fourth Calvary

8. Were you personally present at the Surrender? I was in Calvary

9. If not, where were you and how came you there? I was in Calvary until Surrender

10. Was the applicant personally present with his Command at surrender? I do not know

11. If not where was he and how came him there? I cannot tell

12. When did he leave his Command? I do not know Where was his Command when he left it? I do not know for what cause did he leave? Do not know By whose authority did he leave — and how long was he granted leave? — How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) By being present & knowing Applicant personally

13. In what way was he prevented from returning to his Command? — How do you know? —

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

15. Was applicant captured as a prisoner — If so, when and where? — In what prison was he held? — and when released? —

Sworn to and subscribed before me, this the 8 day of Feb 1912 } W. G. his X mark Simpson

J. M. Gann Ordinary,
of Cobb County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Cobb County.

Personally before me comes W. J. Wade & J. H. Hicks who on oath says that they are freeholders residing in said County and we know J. C. Smith the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.) 40 acres of land more or less $20.00 household goods $40.00

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) nothing

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

3. What was the price paid or stated to be paid? —

4. What relation is the party to applicant? —

5. What disposition was made of the proceeds of the sale? —

6. Was the disposition of this property made in good faith and full values? — or was it made to obtain a pension? —

Sworn to and subscribed before me, this the 8 day of Jan 1912 } W. J. Wade

J. M. Gann Ordinary, J. H. Hicks
of Cobb County.

ORDINARY'S CERTIFICATE.

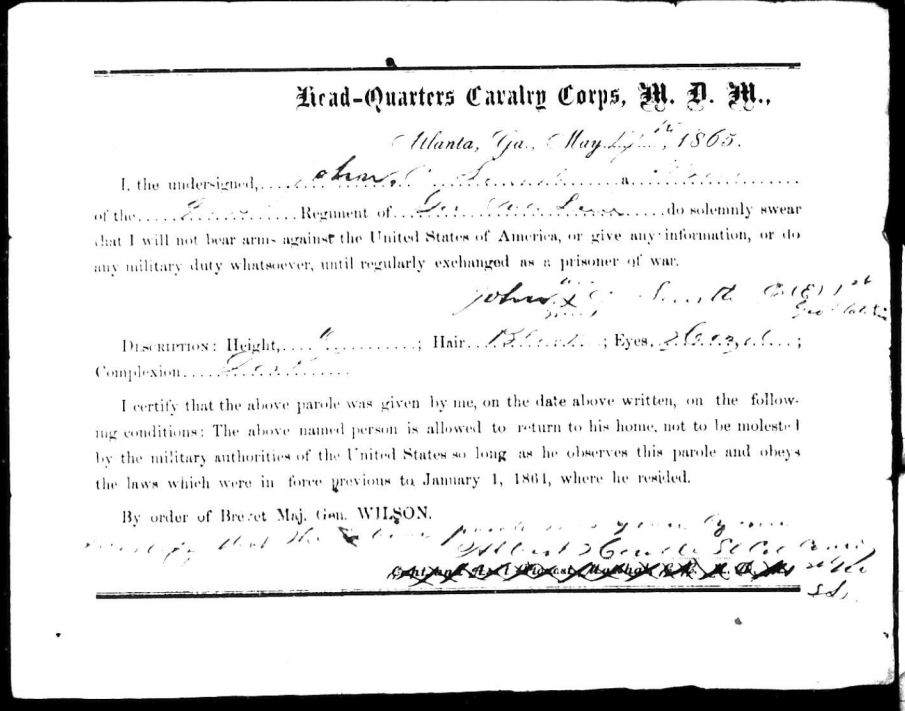
STATE OF GEORGIA,
Cobb County.

I, J. M. Gann Ordinary of said County, certify that I know the applicant J. C. Smith for Pension is the person he represents himself to be and resides in said County. That I also know W. G. Simpson & Morgan Smith the witness swearing to the service and W. J. Wade & J. H. Hicks who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of J. C. Smith shows that he and wife value for tax is in 1908 $220.00 for 1909 $240.00 for 1910 $240.00

Sworn under my hand and official seal of office this 8 day of Feb 1912

J. M. Gann Ordinary,
of Cobb County.

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



Head-Quarters Cavalry Corps, M. D. M.,

Atlanta, Ga., May 19th, 1865.

I, the undersigned, John C. Smith a Private of the [illegible] Regiment of Gen. [illegible] do solemnly swear that I will not bear arms against the United States of America, or give any information, or do any military duty whatsoever, until regularly exchanged as a prisoner of war.

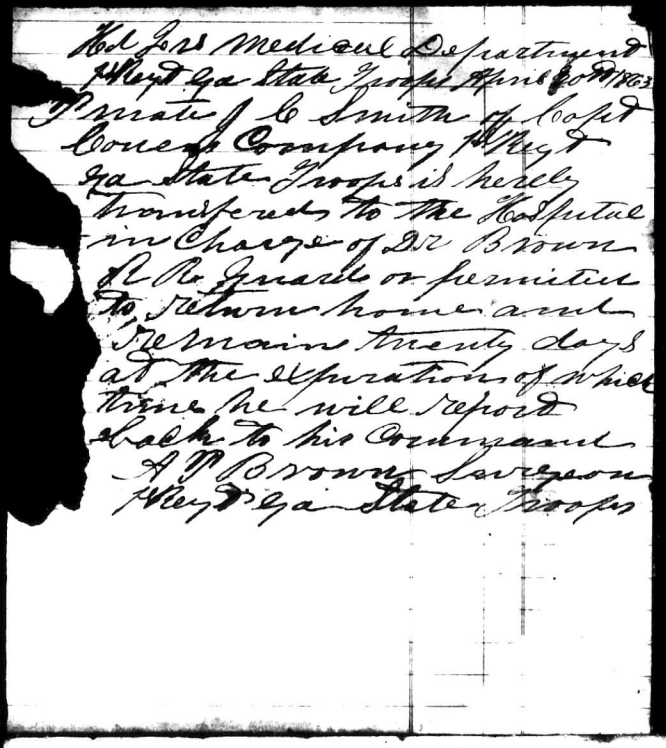
John C. Smith Co. (E) 1st Geo. State Tr.

DESCRIPTION: Height, [illegible]; Hair, Black; Eyes, Hazel; Complexion, Dark.

I certify that the above parole was given by me, on the date above written, on the following conditions: The above named person is allowed to return to his home, not to be molested by the military authorities of the United States so long as he observes this parole and obeys the laws which were in force previous to January 1, 1864, where he resided.

By order of Brevet Maj. Gen. WILSON.

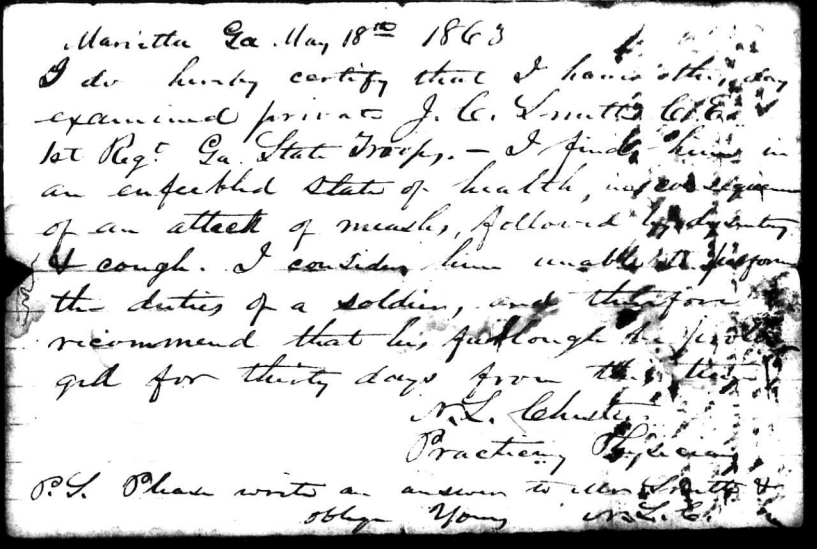
I certify that the above parole was given by me [illegible]



Albert [illegible] Co. [illegible]

~~Capt. and Asst. Quarter Master [illegible]~~

Hd Qrs Medical Department
1st Regt Ga State Troops April 20th 1863
Private J C Smith of Capt
Cowen's Company 1st Regt
Ga State Troops is hereby
transferred to the Hospital
in Charge of Dr Brown
R R Guard or permitted
to return home and
remain twenty days
at the expiration of which
time he will report
back to his Command
A P Brown Surgeon
1st Regt Ga State Troops



Marietta Ga. May 18th 1863

I do hereby certify that I have this day examined private J. C. Smith C.E. 1st Regt Ga. State Troops. — I find him in an enfeebled state of health, in consequence of an attack of measles, followed by dysentery & cough. I consider him unable to perform the duties of a soldier, and therefore recommend that his furlough be prolonged for thirty days from this time.

N. L. Christie
Practicing Physician

P.S. Please write an answer to Mr Smith & oblige Yours N. L. C.

1911
Smith, John C.
Cobb County
1911

Millgrove
Cobb Co
Geo

Camp Etowah Geo.
May 19th 1863.
Approved for Ten
(10) days only -
H. P. Broun
Surgeon 1st Regt Geo. S.T.

Marietta Ga May 16th 1863
I certify that J. C. Smith of Co E
has reported to me at this place
& I have examined him & recommend
that that this furlough be extended to
8th day June
H. P. Broun Surgeon
1st Regt State Troops

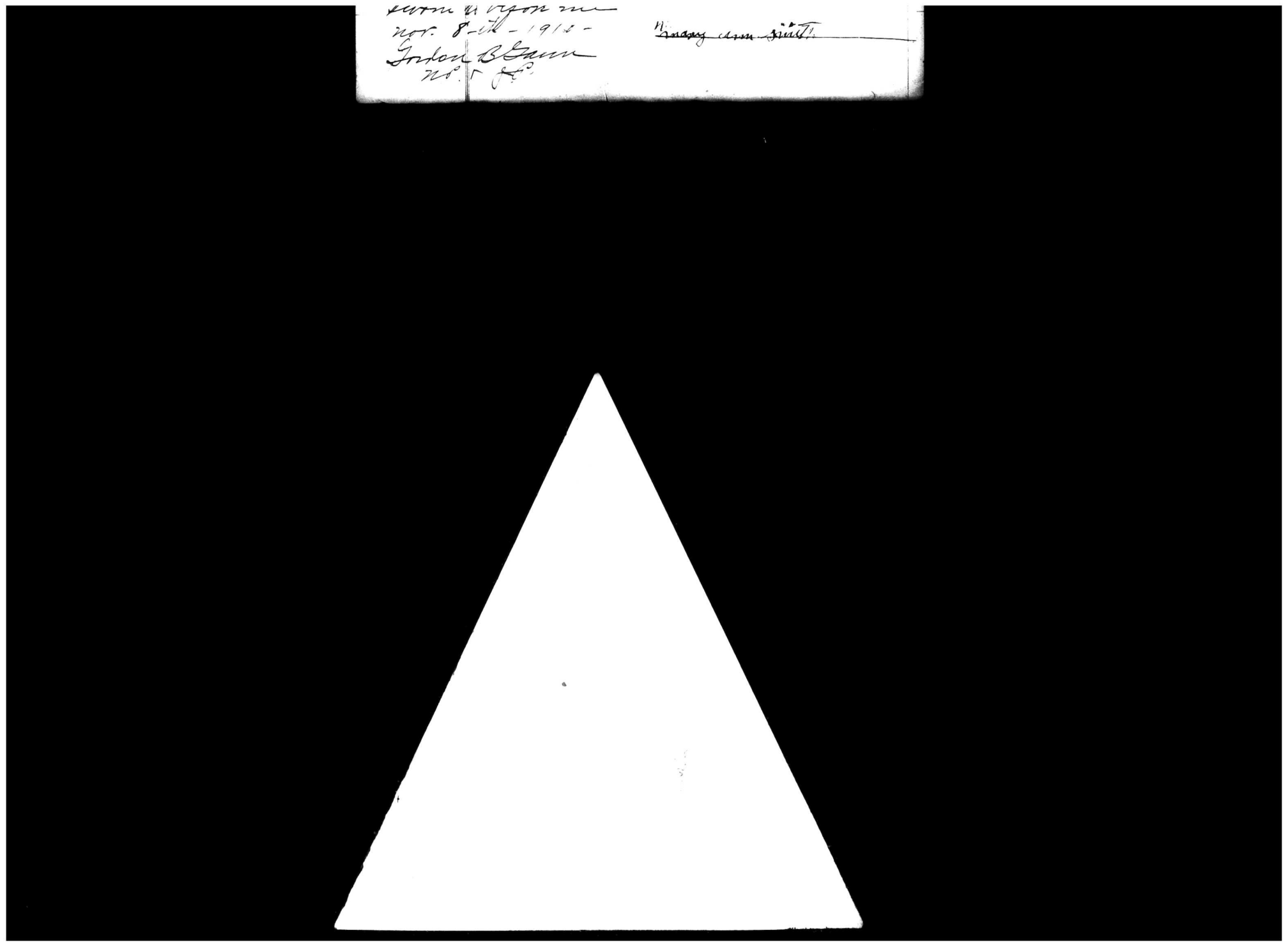
H. P. Broun
F. M. Cowen
Capt Co E

Georgia, Cobb County.

Personally appeared before the undersigned attesting officer, Mrs. Mary Ann Smith who being duly sworn on oath says that in February 1864 she was informed that her husband J. C. Smith was confined in the Confederate Hospital at Geneva Ga. and that she at once visited him and found him there very sick and that as soon as his condition would permit and the doctor would allow it, she got permission from the authorities (and also a permit which has been lost) to bring her said husband home and he remained home sick for several months unable to get out and do anything and was not able to out until after the war closed in June 15th - 1865 and some time thereafter the war was closed, said sickness only preventing him from returning to his company. He has been in very feeble health and has not walked a step in over a year.

Mary Ann Smith.

Sworn to before me
Nov. 8-th - 1910 -
Gordon B Gann
N. P. [illegible]



POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ COUNTY.

I, _____ hereby authorize

_____ of _____

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

at _____ by _____

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

_____ [L. S.]

Executed in presence of

_____

Smith Jordan - Cobb Co.
Dec'd Applicant
May 23 1908

No. _____

INDIGENT PENSION.

1907

Name Jordan Smith
County _____
Co. _____ Regt.
Approved _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

Filed in office
May 23 1908
This 19 day of May
Jordan Smith has made
Application for a Pension
under the Act of
January 1907
Examination required
in Ga January 1 1908
and application rejected
by reason of
Non Residence
Clerk of Pensions

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Cobb COUNTY.

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

1. What is your name and where do you reside? (Give State, County and Postoffice.) R. F. D. 4
Jordan Smith - Marietta Cobb County Ga.
2. How long and since when have you been a resident of this State?
I have resided in Ga Seven years since ca. Dec 1900
3. When and where were you born? Monroe County Georgia
4. When and where and in what company and regiment did you enlist or serve? I enlisted in on May 19 1835 Tennessee at Talladega Ala and was put in Capt Peter Hornes Company in the 3rd Alabama Cavalry
5. How long did you remain in such company and regiment? I served on to the end of the War
6. When and where was your company and regiment surrendered and discharged? in Alabama - near Jacksonville Ala
7. Were you present with your company and regiment when it was surrendered? yes
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?

Every Question MUST Be Answered.

9. How much can you earn (gross) per annum by your own exertions or labor? Very Little
10. What has been your occupation since 1865? I have worked at Farming
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty?" Age and Poverty and
12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind and when and where you lost your sight. Rheumatism
13. What property, real and personal, or income, do you possess, and its gross value? no real estate about $50 dollars of Household goods
14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? I have not owned any land since the War and have had no property have only made a living
15. In what County did you reside during those years, and what property did you then return for taxation? I lived in Randolph County Ala - nothing only my household and kitchen furniture
16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? by working at what ever I was able to do
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Very Little My Children helped me some
18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year? I have worked in a chair shop - 50 Cts per day
19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed? Yes I am only took my wife - My Children have all left me - My children are unable to help me they do not
20. Are you receiving any pension? If so, what amount and for what disability? no I am not
21. Have you ever made an application for pension before? Not in Georgia I received a $30.00 in Alabama
22. How many applications have you ever made and under what class? none except the one in Ala Georgia - when I lived there.

Sworn to and subscribed before me this the 21 day of October 1907

his
Jordan X Smith
mark
Applicant.

_____ Ordinary
of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb COUNTY.

John D. Sanders of said State and County, having been presented as a witness in support of the application of Jordan Smith for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? John D. Sanders - I reside in Cobb County Ga - nine miles east of Marietta Ga R.F.D. 7

2. Are you acquainted with Jordan Smith, the applicant; if so, how long have you known him? Yes, have known him all my life - 70 years

3. Where does he reside, and how long and since when has he been a resident of this State? He resides about 4 miles South West of Marietta Ga - he has been a resident of Ga seven years since Dec 1900

4. When, where and in what company and regiment did he enlist, and how do you know? In the 3rd Ala Cavalry in 1862 - I can not recall the date exactly - I know because we were put in the same Regt. Cap Peter Forneys Company.

5. Were you a member of the same company and regiment? yes I was

6. How long did he perform regular military duty? To the close of the war

7. When and where was his command surrendered? Jacksonville Ala in 1865 - paroled by Gen Cristley

8. Were you present when it surrendered? I was

9. Was applicant present? yes

10. If he was not present, where was he? —

When did he leave his command? — For what cause? —

By what authority he left? — How do you know all of this?

Because I knew him and was with him - from the time he came in to the end.

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

None that I know of

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907,

I do not know

and what disposition, if any, did he make of same? Don't know

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?

I know nothing of this

14. What is the applicant's occupation and physical condition? He makes plain chairs - he is about 73 years old. and is badly crippled in his left leg.

15. Is the applicant unable to support himself by labor of any sort; if so, why? He is not physically able to do manual labor and can't make a living any other way -

16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?

I don't know unless somebody helped him

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

This I can't answer

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code He is crippled - he can't work - and not being an educated man - can't do anything.

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

His family consists of himself and his wife - his children having all gone - none are at home with him

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

Sworn to and subscribed before me, this the 17th day of October 1907

John Awtrey Ordinary.

John his mark D. Sanders Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me W. M. Camp and C. D. Elder, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Jordan Smith, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Applicant - has left - leg is paralyzed and this [illegible] of useless. also can scarcely see this way.

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

Sworn to and subscribed before me, this the 21 day of October 1907

John Awtrey Ordinary.

W. M. Camp M.D.

C. D. Elder M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I, John Awtrey Ordinary, in and for said County, hereby certify that the applicant Jordan Smith resides in said County, and has been a bona fide resident of this State since the past 8 years day of 189 and that the witnesses, viz.: J D Sanders are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of Nothing County shows that applicant returned for taxation in his name in 1901 Dollars of property, and in 1902 Dollars of property; in 1903 Dollars of property; in 1904 Dollars of property; in 1905 Dollars of property; in 1906 Dollars of property; in 1907 Dollars of property.

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

Witness my hand and seal of office, this 21 day of October 1907

John Awtrey Ordinary,
of Cobb County.

NOTE.

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

20. What interest have you in the recovery of a [illegible]

Sworn to and subscribed before me, this the 14th day of October 1907

John A. Wray Ordinary.

John his mark D. Sanders Witness.

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

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

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

Smith, L. C. Mrs.
Cobb Co. or C. L.

C.R.

No.

WIDOW'S
Indigent Pension.
1901.

Name L C Smith

County Cobb

Widow of W. B. Smith
Co B - 41 - Ga Regt

Approved 4/8 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

3/7/01

POWER OF ATTORNEY.

STATE OF GEORGIA.
Cobb County.

I, Mrs. C. L. Smith hereby authorize John Cawthey of Cobb County, to receive and receipt for the pension allowed and that he remit the same to me at Rio Office by his check or registered mail.

Witness my hand this 29th day of January 1901.

Executed in presence of
Jas M. Gunn Ordinary,
County.

Mrs. C. L. Smith L. S.
Mark

SEAL

POWER OF ATTORNEY.

STATE OF GEORGIA.

Cobb County.

I, Mrs. C. L. Smith hereby authorize John Awtrey of Cobb County, to receive and receipt for the pension allowed and that he remit the same to me at his office by his check or registered mail.

Witness my hand this 29th day of Jany. 1901.

Executed in presence of

Jas M-Gann ~~Ordinary~~, ~~County~~.

Mrs. C. L. Smith her mark L. S.

SEAL.

Smith, L. C. Mrs.
Cobb Co. Ga.
T.A.

No.

WIDOW'S
Indigent Pension.
1901.

Name L C Smith
County Cobb
Widow of W B Smith
G B - 41st Ga Regt
Approved 4/8 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

Geo. W. Harrison, State Printer, Atlanta, Ga.
3/7/01

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

C. L. Smith of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (*Give State, County and Post Office.*) C. L. Smith; Cobb Co Ga

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

3. When and where were you born? March 1829 in Hall Co Ga

4. When and where was your husband born—state his full name, and when were you and he married? In 1828 in North Carolina Walter B Smith I was married in 1848 in Cobb Co Ga

5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? Marietta in March 1862 in Co B 41st Ga Vols

6. How long did your husband serve in said Company and Regiment? About 8 or 9 months

7. When and where did your husband's Company and Regiment surrender and was discharged? I do not know

8. Was your husband present at the time and place when his Company and Regiment surrendered? He was not

9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? He was at home running a mill had been discharged and later was

10. When and where did your husband die? In 1887 in Douglas Co Ga

11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty? Age Infirmity and Poverty

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

13. What has been your occupation since your husband's death? Keeping house with my Children

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

15. What property, real or personal, or income do you have or possess, and its gross value? Nothing None

16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899–1900, and what disposition, if any, by sale or gift, have you made of the same? Nothing Nothing None

17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation? Cobb County. None

18. How have you been supported since death of husband, and especially for 1899 and 1900? By my Children all of whom are over 21

19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? 60 or 75.00 None.

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

21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property? I live with 2 of my children. 1 Son and Daughter by their own labor. They have none

22. Have you ever made an application for pension before? Nor

23. How many applications have you made for a Pension, and under what class? None

Sworn to and subscribed before me this 29th day of January 1901

C. L. her Smith mark

John Awtrey Ordinary,
of Cobb County.

Questions for Witnesses.

STATE OF GEORGIA,
Cobb **County,**

B. W. Griggs & W. H. Richardson of said State and County, having been presented as a witness in support of the Application of Mrs. L. C. Smith for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? B. W. Griggs & W. H. Richardson
2. Are you acquainted with the applicant, Mrs. L. C. Smith Yes I know her from Character
If so, how long have you known her?
3. Where does she reside, and how long and since when has she been a resident of this State?
4. When and where was she born? do not know
5. Were you ever acquainted with her husband? Yes
6. Where did he reside in 1861? Cobb Co Ga
7. When and to whom was he married?
8. When and where was he born? We do not know
9. How long have you known him? From 62 until his death
10. When and where did Walter B Smith enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this?
In March 1862 in Moriettu Ga in Co B. 41st Ga
11. Were you a member of the same Company and Regiment? We were
12. How long did he perform regular military duty? About 8 or 9 months
13. When and where was his Company and Regiment surrendered and discharged from service?
Greens Bourough North Carolina
14. Were you with the command when it surrendered? We were not
15. Was W B Smith the husband of applicant present?
16. If not present, where was he? Cobb Co Ga
17. When and where did he leave his Command? The last 62 or first of 63 at Tupelo Miss
For what cause? He was discharged on account of disability
By whose authority he left? By authority of Medical Board
How do you know all this? (State fully and clearly) We were present at the time of his discharge
18. When and where did W B Smith die?
In Douglas Co Ga. in 1887
19. Where did he reside at his death and how long had he been a resident of Georgia at his death?
Douglas Co. Ga Since We had known him
20. Do you of your own knowledge know that applicant is the lawful widow of Mrs. Smith We are not a neighbor of Mrs Smith but from the knolledge we have of her we believe her to be
21. Has she remained unmarried since her soldier husband's death, and is now his widow?
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? We do not know
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? We do not
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? We do not know
25. What is applicant's physical condition and her chances and ability to earn a support? Wholy Incapacitated to support her self
26. Is applicant able to earn a support at labor of any sort, if not why? She is not
27. How was she supported for 1899 and 1900? We do not know
28. How much did applicant contribute to her support for last two years? do not know
29. Give a full and complete statement of applicant's physical condition? She is old and Paralyzed
30. What interest have you in the recovery of this pension by the applicant? none

Sworn to and subscribed before me this 29th day of January 1901
John Awtrey Ordinary,
Cobb County.

B. W. Griggs
W. H. Richardson
Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA,
County,

Personally before me comes W. M. Kemp. M.D. and J. D. Malone. M.D. both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this Partial Paralysis from which she is fast — unable to perform the usual avocation of life — she is very much enfeebled by her age

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 29th day of January 1901
John Awtrey Ordinary,
Cobb County.

W. M. Kemp M.D.
J. D. Malone M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb **County.**

I, John Awtrey, Ordinary in and for said county, hereby certify that the applicant, Mrs. L. C. Smith resides in said county, and has been a bona fide resident of this State since 1st day of January 1900, and that the witnesses, Mr. B. W. Griggs W. H. Richardson & J. M. Gaine are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses *before the same was signed and subscribed.*

I further certify that the tax digest of Cobb county shows that applicant returned for taxation in her own name in 1899 nothing dollars worth of property, and in 1900 nothing dollars worth of property.

Witness my hand and official seal, this 30th day of January 1901

{SEAL}

John Awtrey Ordinary,
Cobb County.

NOTES—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
5. ..... Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, ~~John Awhey~~ L C Smith, hereby authorize John Awhey of _____

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

In Witness Whereof, I have hereunto set my hand and seal, this 9 day of Jan 1902.

L C Smith [L. S.]
Mark

Executed in presence of

[illegible]

Smith L C
Cobb County

To Those Heretofore Paid.

1902.

No. 133

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. L C Smith
of
Cobb County,

Widow of _____ Regiment

Co. _____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

114 1902

AND HANDED TO

Only

GEO. W. HARRISON STATE PRINTER ATLANTA, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, L C Smith, hereby authorize John Awhey of _____

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

In Witness Whereof, I have hereunto set my hand and seal, this 9th day of January 1902.

L C Smith [L. S.]

Executed in presence of

[illegible]

Smith L C (Mrs)
Cobb County

To Those Heretofore Paid.

1902.

No. 157

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. L C Smith
of
Cobb County,

Widow of W B Smith

Co. O - 41 - Ga Vols Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

123 1902

AND HANDED TO

Only

GEO. W. HARRISON STATE PRINTER ATLANTA, GA.

Form No. 1

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, Cobb | PERSONALLY COMES MRS. L C Smith

Cobb [illegible] says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1829. That she is the Widow of W B Smith who was a soldier in Company B of the 41st Regiment of Ga Vol Volunteers, that he enlisted in said regiment on or about the month of March 18 2 and served in the Army up to About Jan 1863. That he died on the 18 day of April 1887

Owing to age Infirmity and poverty Deponent is unable to Support herself.

[illegible] said deceased soldier during his service in the Army as a [illegible] aforesaid, and that she became his wife in the year 48 Enrolled Cobb [illegible]

[illegible] 9th Jan John Autrey | L C her mark Smith

State of Georgia, Cobb County. | John Autrey Ordinary of said County, certify that I am well acquainted with Mrs. L C Smith who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereself to be, and that she has continuously resided in this State since the all day of 18

Given under my official signature and seal, this the 9th day of Jan 1902

John Autrey

Official Seal

Ordinary of Cobb County.

NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1902.

Form No. 1.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb | PERSONALLY COMES MRS. L C Smith

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since All her life. That she is the Widow of Walter B Smith who was a soldier in Company C of the 41 Regiment of Ga Vols Volunteers, that he enlisted in said regiment on or about the month of 186 , and served in the Army up to over 1 Year 186 . That he died on the day of 1887

Owing to Age Infirmity and poverty she is unable to support herself

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 1846.

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1902, and now apply for the pension provided by law for the year ending December 31, 1902.

Sworn to and subscribed before me, this 9th day of Jan 1903 | L C Smith

John Autrey, Ordinary. | Post-Office Webster

State of Georgia, Cobb County. | I, John Autrey Ordinary of said County, certify that I am well acquainted with Mrs. L C Smith, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 9th day of Jan 1903

John Autrey

Official Seal.

Ordinary of Cobb County.

NOTE.—All blanks must be filled.
Vouchers and affidavits must bear date after January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, L C Smith hereby authorize John Awtrey of to receive and receipt for the pension paid hereon and request that he remit same to at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12th day of Jan 1904.

L. C. Smith [L. S.]

Executed in presence of
John W. Gahan

Smith, L. C. (Mrs)
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. 312

INDIGENT WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO
Mrs L C Smith
OF
Cobb County,
Widow of B Smith
Co. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
JAN 25 1904,

AND HANDED TO
Cody

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, ~~John Awtrey~~ L C Smith hereby authorize L John Awtrey of to receive and receipt for the pension paid hereon, and request that he remit same to at

In Witness Whereof, I have hereunto set my hand and seal, this 3 day of Jany 1905.

L C Smith [L. S.]

Executed in presence of
Jno Gaine

Smith, L. C. (Mrs)
Cobb County

To Those Heretofore Paid.

1905.

No. 224

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO
Mrs L C Smith
OF
Cobb County,
Widow of
Co. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
JAN 23 1905.

AND HANDED TO
[illegible]

The Franklin Printing and Publishing Co. Atlanta.
Geo. W. Harrison, Manager, for State Printer.

FORM No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. L C Smith

who, being sworn, says on oath that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since all her life. That she is the Widow of W B Smith who was a soldier in Company of the Regiment of Volunteers, that he enlisted in said regiment on or about the month of 186, and served in the Army up to 186. That he died on the day of 18

Owing to age Infirmity and poverty She is unable to support herself

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 12 day of January 1904. John Awtrey Ordinary. } L. C. Smith Post Office

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. L C Smith who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the All her life day of 18

Given under my official signature and seal, this the 12 day of Jan 1904.

{ Official Seal }

John Awtrey
Ordinary of Cobb County

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

FORM No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } PERSONALLY COMES MRS. L C Smith

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since All her life. That she is the Widow of W B Smith who was a soldier in Company of the Regiment of Volunteers, that he enlisted in said regiment on or about the month of 186, and served in the Army up to 186. That he died on the day of 18

Age Infirmity and poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1850

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905

Sworn to and subscribed before me, this 3 day of Jany 1905. John Awtrey Ordinary. } L. C. Smith Post-Office

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. L C Smith, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 3 day of Jany 1905.

{ Official Seal. }

John Awtrey
Ordinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, L C Smith, hereby authorize John Awtrey of Marietta, Ga. to receive and receipt for the pension paid hereon, and request that he remit same to me at his office

In Witness Whereof, I have hereunto set my hand and seal, this 6 day of Jany 1906.

L. C. Smith [L. S.]

Executed in presence of
J M Gann

To Those Heretofore Paid.

1906.

No. 227

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO Mrs L C Smith OF Cobb County,

Widow of W. B. Smith.

Co. B, 41st Ga. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/22 1906,

AND HANDED TO

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, L C Smith, hereby authorize John Awtrey of to receive and receipt for the pension paid hereon, and request that he remit same to at

In Witness Whereof, I have hereunto set my hand and seal, this 9 day of Jany 1907.

L C Smith [L. S.]

Executed in presence of
J M Gann

Smith, M. C. (Mrs.)
Cobb County

To Those Heretofore Paid.

1907.

No. 190

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1907.

PAID TO Mrs L C Smith OF Cobb County,

Widow of W B Smith

Co. B 41 Ga Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/21 1907.

AND HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. L C Smith

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. That she is the Widow of W B Smith who was a soldier in Company B of the 41 Ga Regiment of Volunteers, that he enlisted in said regiment on or about the month of 186 and served in the Army up to 186 That he died on the day of 18

age Infirmity & poverty

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 6 day of Jany 1906. , Ordinary. } L. C. Smith Post Office

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. L. C. Smith, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1 day of Jany 1894

Given under my official signature and seal, this the 10 day of Jany 1906.

{ Official Seal } John Awtrey Ordinary of Cobb County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

Form No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. L C Smith

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since. That she is the Widow of W B Smith who was a soldier in Company B of the 41 Ga Regiment of Ga Vols Volunteers, that he enlisted in said regiment on or about the month of 186, and served in the Army up to 186 That he died on the day of 18

Infirmity & poverty

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

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me this 9 day of Jany 1907. John Awtrey, Ordinary. } L. C. Smith Post Office

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. L C Smith, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 18

Given under my official signature and seal, this the 9 day of Jany 1907

{ Official Seal } John Awtrey Ordinary of Cobb County.

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

OFFICE OF

JOHN AWTREY

ORDINARY, COBB COUNTY.

Marietta, Ga., 1904.

State of Georgia } J M Gann of said State
Cobb County } and County having been
presented as a witness in support
of the Application of Mrs L. C. Smith for
a pension under the act of 1900 and after having
been duly sworn true answers to make to the
following questions to wit 2-3-7-21-22-23 and
24 ~~also~~ No.

No 2 Question. are you acquainted with applicant. if so hol
long? Yes. I have known her 40 years

No 3. Where does she reside, and how long has shee been
a resident of this State: Ans She resides in Cobb
County Ga. and has been a resident of this State
40 Years to my own knolledge

Question 7. I do not know the time. She was the
wife of W.B Smith when I first knew her which
was 40 Years ago

Question 21 She has remained unmarried and
is now his widow

Question 22 Ans She has none; By living near her and ob
ring the dificulties she has had, even through the aid of her
Children to keep something to live on

Question 23 Answer: Nothing

Question 24 Answer: No

Question 25 " Wholy incapacitated to work for a living and no chance for her to support herself.

Question 26 " She is not

Question 27 " By her Children

Question 28 " Nothing

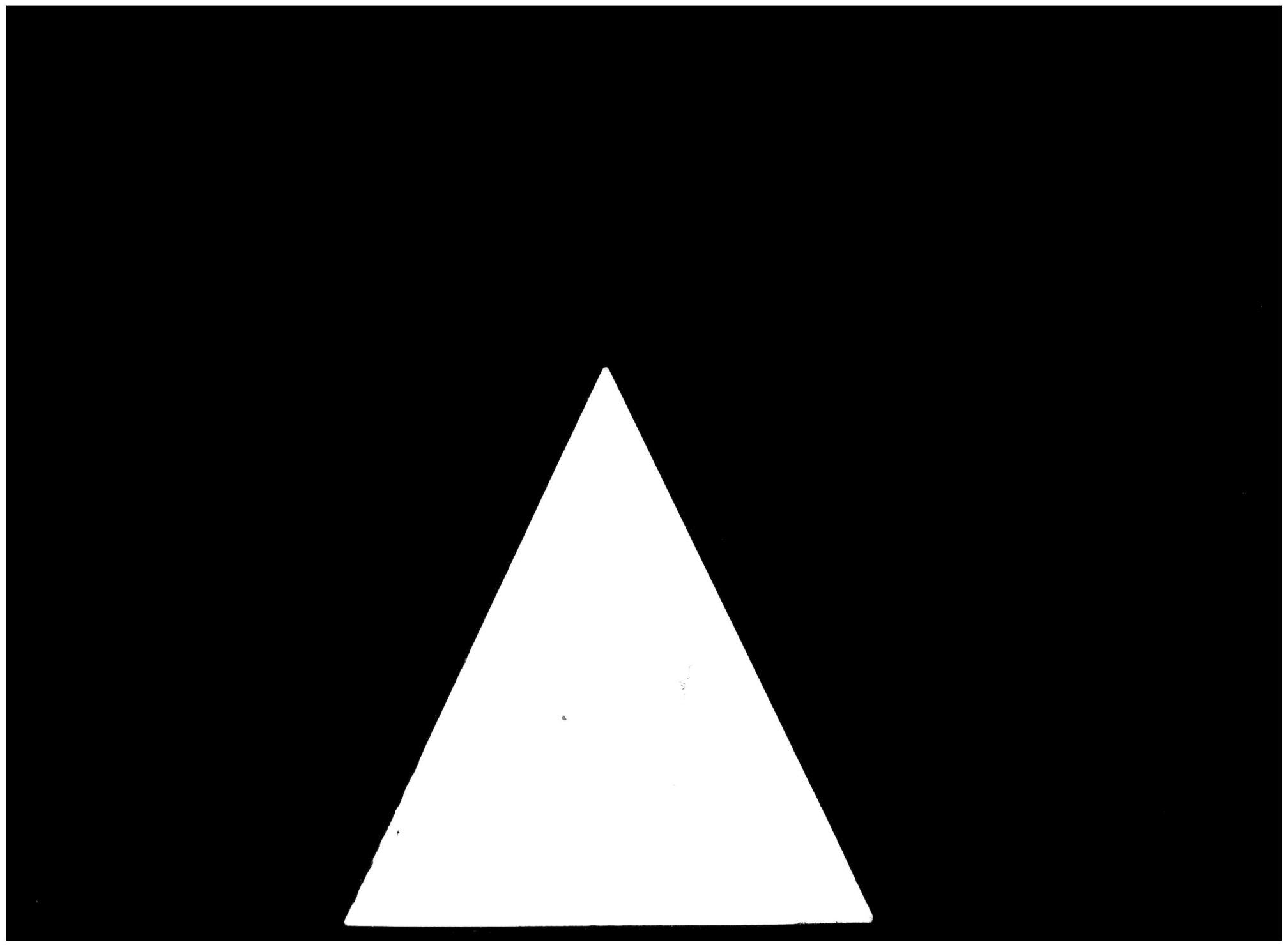
Question 29 " She is very badly palsied and her Age renders her unable to perform the ordinary requirements of a housekeeper

Question 30 - Ans none

Twoorn to and Subscribed before me this Jan 30th 1901

John Awtry
Ordy.

Jas M Gaure



POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Lewis J. Smith hereby authorize
~~J. H. Barfield~~ J. H. Stone of Cobb
to receive and receipt for the pension allowed and request that he remit same to me
at ~~Barfield~~ by J. H. Stone

Witness my hand and seal this 4 day of April 1895.

Executed in presence of
~~J. H. Barfield~~ J. H. Stone
Cobb

his
Lewis J. X Smith
mark

J. D. Holt

Approved Ret. Trans. 5-2
Reg. 3207
Smith Geo. Co.

INDIGENT PENSION
1895.

Name Lewis J. Smith
County Cobb
Ground
July 1 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Judge Stone
Geo. W. Harrison, State Printer, Atlanta.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office) Lewis J. Smith Marietta Cobb County Georgia
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Marietta Cobb Co. Ga. Sixty years
3. When and where were you born? Cherokee At Ga. Oct 15th 1834
4. Did you volunteer in the Confederate Army or in the Georgia Militia? Yes in the Confederate Army
5. When and where did you enlist? 1861 At Canton Ga
6. In what company and regiment did you enlist? Company D. 28 Ga Regiment
7. How long did you remain in that company and regiment? about Two years
8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer? I was transferred to the 28th Ga in 1864
9. For how long a period did you discharge regular military duty? about Four years
10. When, where and under what circumstances were you discharged from service? 1865 I was discharged at Greensborough N.C. when Gen J. E. Johnson surrendered
11. What is your present occupation? Farming
12. How much can you earn per annum by your own exertions or labor? nothing
13. What has been your occupation since 1865? Farming
14. What sum would be necessary for your support for this pension Year, and how much are you able to contribute thereto either in labor or income? I need all the State allows I can not contribute ~~anything~~ anything
15. What is your present physical condition and how long have you been in such condition? I am Suffering from blood poison and have been in this condition ever since the War
16. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Age, Poverty & infirmity
17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? Ever since the war. During the same period, Infirmity of body Consists in blood poison having settled in the legs until it amounts to Scrofula. I am to such an extent I under ~~stand~~ if applicant was able to labor
18. What property, effects or income do you possess? None
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same? I had no property in 1893 or 1894
20. In what County did you reside during those years and what property did you then return for taxation? I resided Cobb Co. returned no property
21. How were you supported during the years 1893 and 1894? by the labor of my wife & 3 little girl children
22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? I dont know how much it cost & contributed nothing
23. What was your employment during 1893 and 1894? What pay did you receive in each year? I was not able do any thing & received no pay
24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? I am married have 3 children all girls - ages - 11 - 10 & 7 years - By daily labor on farm

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?

None —

Sworn to and subscribed before me this the 4th day of April 1895. } Lewis T. his + mark Smith Applicant.

J. M. Stone Ordinary

of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, Cobb County.

James L. Hughes, of said State and County, having been presented as a witness in support of the application of Lewis T. Smith for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? James L. Hughes — Kennesaw Cobb Co. Ga.

2. Are you acquainted with Lewis T. Smith, the applicant, if so how long have you known him? Yes — have known him 50 years

3. Where does he reside, and how long has he been a resident of this State? Cobb Co. Ga. been resident of this state ever since I have known him

4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Yes — he was in the same Company with me for over Two years

5. When, where and in what company and regiment did he enlist? In 1861 at Canton Ga. he enlisted in Co. D — 28 Ga Reg.

6. Were you a member of the same company and regiment? I was

7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? He served in the above Company two years or more & performed the duties of a Soldier — Was then transferred to the 23rd Ga Regt

8. What property, effects or income has the applicant? (Give your means of knowledge.) None — Such is the reliable information that I have.

9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? My information is that he had nothing

10. What is the applicant's occupation and physical condition? What little he is capable of doing is on a farm & his physical condition almost helpless

11. Is the applicant unable to support himself by labor of any sort, if so, why? Yes — for the reasons above given

12. How was he supported during the years 1893 and 1894? By the labor of his little girl children

13. What portion of his support for these two years was derived from his own labor or income? From my knowledge of the man I would say nothing

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? Hist his affliction from blood poison — And his weak mind.

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

Sworn to and subscribed before me, this the 4th day of April 1895. } Jas L. Hughes, Applicant.

J. M. Stone Ordy

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, Cobb County.

Personally came before me J. J. M. Goss M.D. and J. D. Malone M.D., both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully Lewis T. Smith, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

On examination I find Mr. Louis T. Smith with enlarged lower limbs to that extent that he is not able to labor to any great extent, if at all.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 4th day of April 1895 } J. D. Malone M.D.

J. M. Stone Ordy

J. J. M. Goss M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Cobb County.

I, J. M. Stone, Ordinary in and for said County, hereby certify that the applicant Lewis T. Smith resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz. Jas L. Hughes, J. J. M. Goss M.D. & J. D. Malone M.D. are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1893, Nothing dollars of property, and in 1894, Nothing dollars of property.

Witness my hand and seal of office, this 4 day of April 1895.

J. M. Stone Ordinary

of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

I, L. J. Smith hereby authorize J. M. Stone

of Hamilton Ga.

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

me by time

at

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

day of January 1897. L. J. Smith [L. S.]

Executed in presence of

J. M. Fleming

Smith, L. J.
Cobb County

(For Those Already Enrolled.)
ACT OF 15 DEC., 1894.

No. 465

INDIGENT
Soldier's Pension.

1897.

Name L. J. Smith
County Cobb

1/6 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Stone

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears L. T. Smith of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continously ever since the 18 day of Oct. 1834 that he is 62 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Enlisted Co. R. 2 8th Trans. to) during the war between the States, and served for the term of Entire War in Company D, of 13th Regiment of Ga. Vols.; that his physical condition is as follows: by and on account of fever falling in legs reading me unable to work and from poverty.

that his property consists of the following items

Nothing

of the value of ——— Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Cobb county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, the 7th day of Jany 1897. L. T. Smith

J. M. Gone Ordinary.

STATE OF GEORGIA,
Cobb County.

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

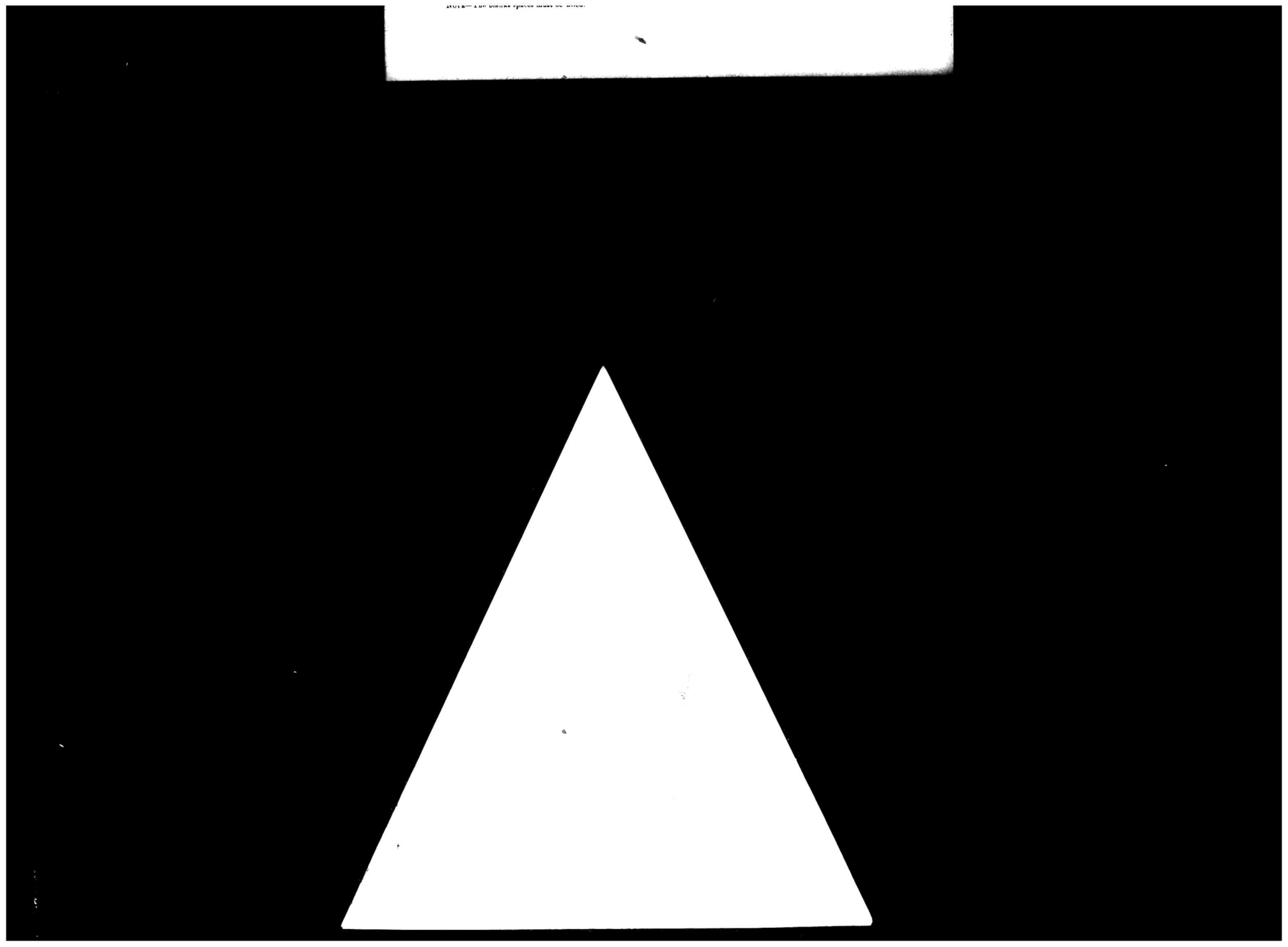
Given under my official signature and seal, this 7th day of Jany. 1897.

Affix your seal here.

J. M. Gone

Ordinary Cobb County.

NOTE—The blanks spaces must be filled.



Form No. 2.

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

STATE OF GEORGIA, County of Cobb.

I, J. H. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Louisa L. Smith 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 Pinkney Smith 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 13th day of July 1893.

{SEAL} J. H. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Louisa L. Smith of Cobb County, in said State, do hereby appoint J. H. Stone Ordy. of Cobb 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 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 13th day of July, 1893 Louisa L. X Smith [L.S.]

mark

Executed in the presence of us:
W. O. Robinson
W. H. Robinson

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

_____

Smith Louisa L.
Cobb County
FOR THOSE HERETOFORE PAID.

1893.
(Ex. Pension Act 1891)
No. 15083

Widows' Pension,

for year ending February 15th, 1893.

—PAID TO—
Mrs. Louisa L. Smith
—OF—
Cobb County.

Warrant Issued 7/13 1893
AND HANDED TO
J. H. Stone

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally comes Mrs. Louisa A Smith

who being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has *resided* in said State continuously ever since June 10th 1821 That she is the Widow of Pinekney Smith who was a Soldier in Company "K" of the 42nd Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of March 4th 1862 and served in the Army up to July 4th 1863 That he lost his life on the day of 18 (*State here full particulars of the husband's death, when, where and from what cause.*) (

That on the 10th June 1863 he was wounded in Seige of Vicksburg and from effect of his wound was sent home and died 15th March 1864

Applicant drew from Fulton County in 1892

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 1844; 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 3rd day of February 1893.
J H Stone Ordinary.

Louisa A Smith
her mark
Post-office Smyrna Ga

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Louisa G. Smith 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 Pinkney Smith 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 6th day of Feby 1894.

J. M. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mrs. Louisa G. Smith of Cobb County in said State, do hereby appoint J. M. Stone of Marietta 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 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 6th day of Feby 1894.

Mrs. Louisa G. her x mark Smith [L. S.]

Executed in the presence of us:

[illegible]

DIRECTIONS.

Send amount by to me at , and oblige

Smith, Louisa G.
Cobb County

FOR THOSE HERETOFORE PAID.

1894.

No. 815

WIDOWS' PENSION,

for year ending February 15th, 1894.

PAID TO

Mrs. Louisa G. Smith

OF

Cobb County.

WARRANT ISSUED

2/13 1894,

AND HANDED TO

[illegible]

Geo. W. Harrison, State Printer, Atlanta.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Louisa G. Smith 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 Pinkney Smith 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 29th day of Jany 1895.

SEAL

J. M. Stone Ordinary.

Form No. 3

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Louisa G. Smith of Cobb County in said State, do hereby appoint J. M. Stone of Marietta 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 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 29th day of Jany 1895.

Louisa G. her x mark Smith [L. S.]

Executed in the presence of us:

W. W. Robinson

DIRECTIONS.

Send amount by to me at , and oblige

Smith, Louisa G.
Cobb Co.

FOR THOSE HERETOFORE PAID.

1895.

No. 4851

WIDOW'S PENSION,

for year ending Febuary 15th, 1895.

PAID TO

Mrs. Louisa G. Smith

OF

Cobb County.

widow of Pinkney Smith

WARRANT ISSUED

28 Jy 1895.

AND HANDED TO

[illegible]

Geo. W. Harrison, State Printer.

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally comes Mrs.
County of Cobb Louisa G Smith

who being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has *resided* in said State continuously ever since June 1821 That she is the Widow of Pinkney Smith who was a Soldier in Company K of the 42 Regiment of Ga. Volunteers, that he enlisted in said Regiment on or about the month of Mch. 1862 and served in the Army up to June 1863 That he lost his life on the 15th day of Mch 1869 (*State here full particulars of the husband's death, when, where and from what cause.*) (

That while in the Confederate Army at Vicksburg Miss. he was wounded in the head and law and died from the effects of said wound on the 15th day of March 1869.

)

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, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this 6th day of July 1894.
J. M. Stone Ordinary.

Mrs Louisa G her X mark Smith
Post-office Smyrna Ga.

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of Cobb Louisa G Smith

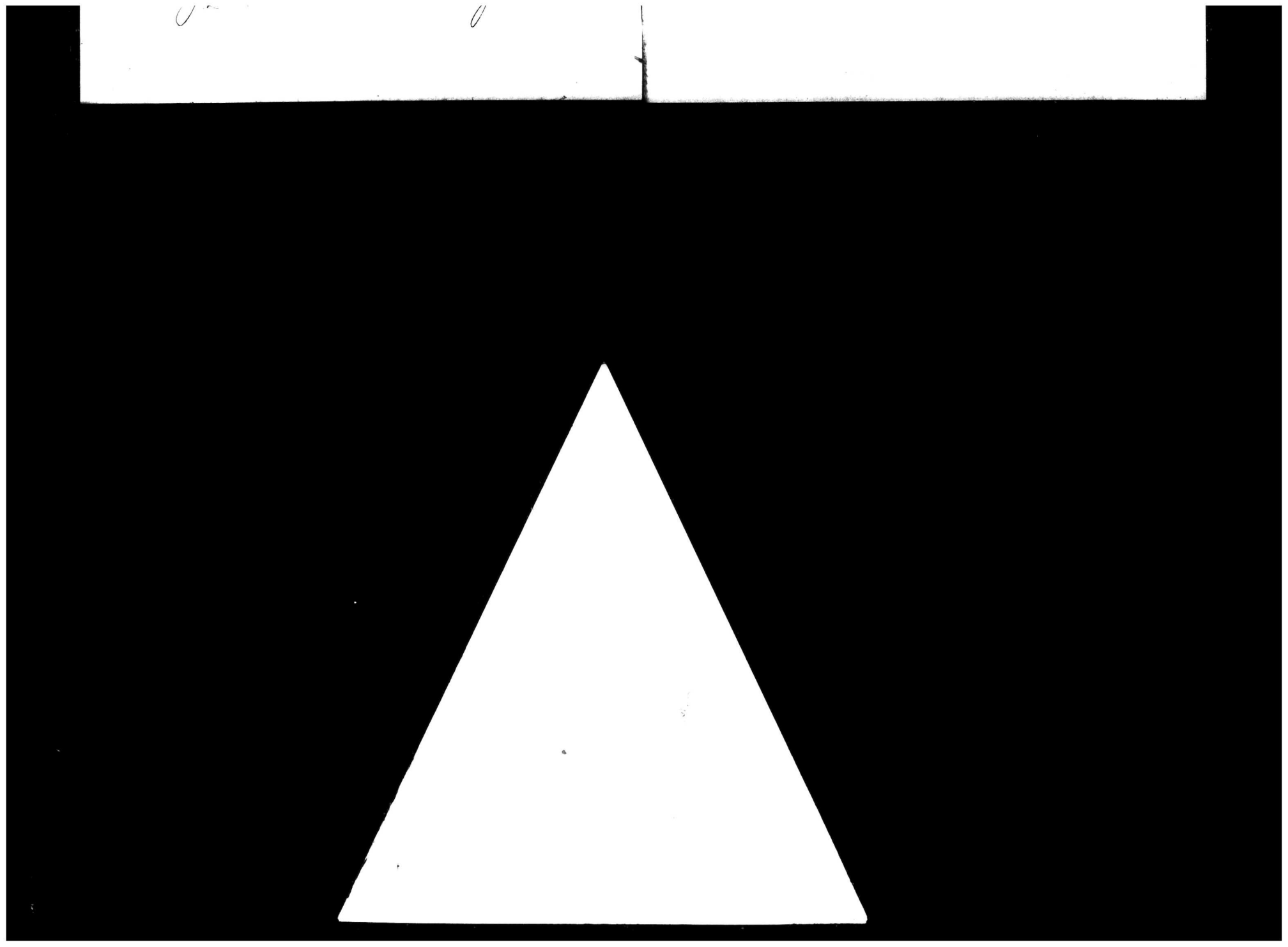
who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has *resided* in said State continuously ever since 1841 That she is the Widow of Pinkney Smith who was a Soldier in Company K of the 42nd Regiment of Ga Volunteers, that he enlisted in said Regiment on or about the month of Mch. 1862 and served in the Army up to June 1863 That he lost his life on the 15th day of Mch 1869 (*State here full particulars of the husband's death, when, where and from what cause.*) (

That while in the Confederate Army during the Siege at Vicksburg Miss, he was shot in the left eye, ball coming out under the right jaw from which wound he never recovered and died from said wound on the 15th day of Mch 1869.

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 1845 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 29th day of Jany 1895.
J. M. Stone Ordinary.

Louisa G her X mark Smith
Post-office Smyrna Ga



Ent 94,63.
64.

Smith, Martha J.
Apr 1920
Cobb Co.

No.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Cobb

Name Martha J Smith

Widow of John T. Smith

Company 9

Regiment 28 Ga Bat

Approved

ENTERED ROSTER OFFICE

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-30-1919

Ordinary's Certificate

STATE OF GEORGIA,
Cobb COUNTY }

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

Sworn under my hand and official seal of office this 29 day of Oct 1919

(SEAL) J. McGann Ordinary,
Cobb County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Ordinary's Certificate

STATE OF GEORGIA, Cobb COUNTY

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

Sworn under my hand and official seal of office this 19 day of Oct 1910

SEAL

J. W. Gann Ordinary,
Cobb County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1881, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Rec'd Feb 2 Mar 1 Prod Cobb Co.

No.

Widow's Pension

Under Act 1910—as Amended by Act of 1919

County Cobb

Name Martha J. Smith

Widow of John T. Smith

Company D

Regiment 28 Ga Bn

Approved

REGISTERED 1910

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

Oct 20, 1910

Cobb 2114 63

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

Questions for Applicant

STATE OF GEORGIA, Cobb COUNTY.

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

1. What is your name, and where do you reside? Martha J. Smith, Marietta Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? Jany 21 1873. Cobb County John T. Smith
   a. Have you married since the death of first and soldier husband? No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) August 1863, Cobb County Ga, in Co D 28th Ga Battalion Infantry
5. When and where did the commands of your husband surrender or discharge from the army? At Greensborough N.C. April 26th 1865.
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes
7. If he was not present state clearly where he was? He was present
8. Where was his command when he left? Greensborough N. C.
   a. For what cause did he leave his command? Army Surrendered
   b. By whose authority did he leave his command? —
   c. For how long was he granted leave of absence? —
   e. What was his physical condition when he left his command? Dont know
   f. What effort did he make to return to his command? —
   g. In what way was he prevented from going back to Command —
   h. Was he captured by the enemy at any time? No
   i. If so, when and where captured and where held as a prisoner, and when and for what cause released? —
   j. When and where did your first husband die? Sept 20 1888. in Cobb Co Ga
   k. Were you residing together when he died? Yes
   l. If not, how long had you resided apart? —
   m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No

If so, when and for what cause were you or your husband placed on the roll? —

Sworn to and subscribed before me this the 18 day of December 1919

Martha J. Smith

J. W. Gann Ordinary

of Cobb County.

(SEAL)

Find the Record of Marriage

J. W. Gann. Ordinary

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,
Cobb COUNTY

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

1. What is your name and where do you reside? F. J. Inzer, Marietta Ga

2. How long and since when have you known Martha J Smith applicant? from her Childhood

3. How long and since when has she continuously resided in this State? (Give date.) all her life

4. When and to whom was she married? John T. Smith How do you know? I knew both her & her husband when they married

5. How long and since when did you know John T. Smith her husband? 60 years or more

6. When and where did John T. Smith the husband of applicant, die? Cobb Co. Ga

7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes

8. If not, how long did they live apart before his death? they were living together Were they divorced? + +

9. When, where and in what Company and Regiment did John T. Smith enlist? August 1863, Cobb Co in Co. I. 28th Ga. Battalion Infty

10. Were you a member of the same Company? Yes

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? Until about Feby 1865 when our Regiment & 47 Ga. and 1st Ga Regulars were combined and formed at Ga Regulars to close of war

12. When and where did his Command surrender, and was discharged? April 26 1865 Greensborough N. C.

13. Were you personally present when it was surrendered? Yes If not, where were you Iron there and how came you there?

14. Was the husband of applicant personally present at surrender? Yes If not where was he? he was present When, where and for what cause did he leave Command? (Give date) By whose authority did he leave his Command? And how long was he granted leave? Discharged for good How do you know all this? I was with him all this.

15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? War was over

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the 18 day of September 1914

F. J. Inzer his mark

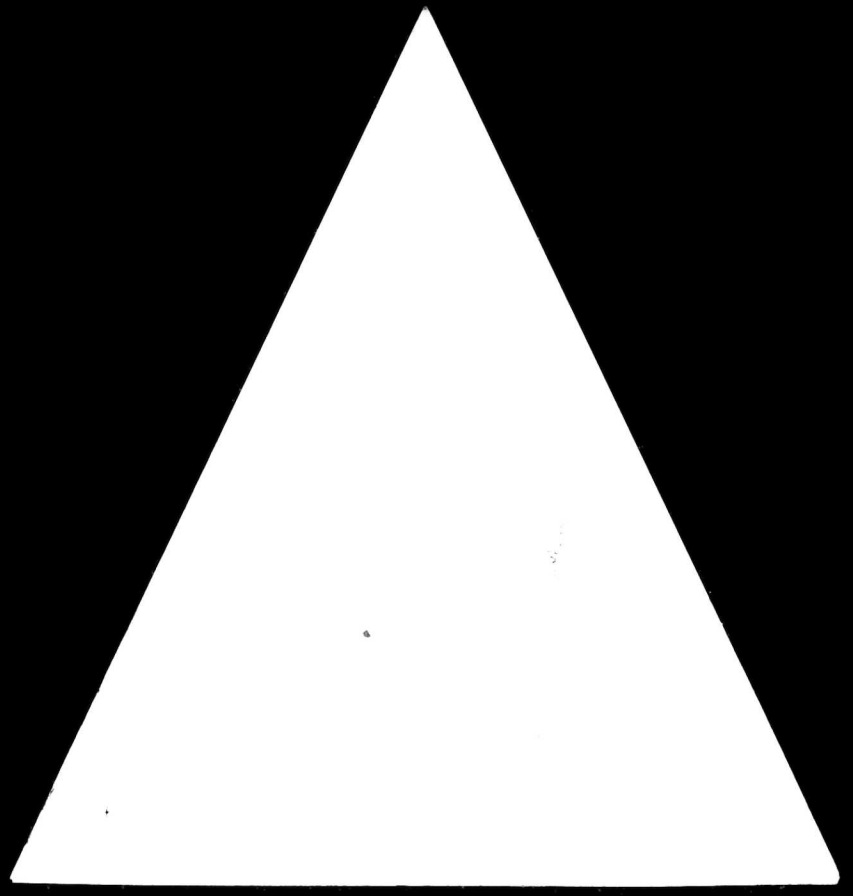
J. M. Gann Ordinary of Cobb County

(SEAL)

..... Ordinary

of Cobb County.

(SEAL)



Smith, Mary A. (Mrs.)
Cobb County
1925

Application for Pension Due Deceased Pensioner

(UNDER ACT 1904)

(To pay expenses of last illness or funeral)

J. M. Gann Ordinary

For Mary A. Smith

of [illegible] County

Old or New Class?

Died 6/29/23 192

Amount $ 10.00

Approved and ordered paid.

1921.

J. W. LINDSEY,
Commissioner of Pensions.

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

Index Printing Co., Atlanta, Ga.

Application for Pension Due to a Deceased Pensioner

(Under the Act of August 15, 1904)

To Be Paid to the Ordinary for Funeral Expenses and Expenses of Last Illness.

GEORGIA, Cobb County.

Personally before me, the Ordinary of said County, comes Lemon Smith of said County, who, after being sworn, on oath says that he knew Mary A Smith of said County, and that said pensioner was on the Indigent Pension Roll of Cobb County at the time of death, which occurred in Cobb County, in this State, on the 29th day of June 1923, and that a Pension of 100.00 Dollars was due pensioner and unpaid at the time of pensioner's death. That ~~he left~~ no widow or ~~dependent children surviving~~, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of $149.00, per sworn statement fully and completely itemized, hereto attached.

Sworn to and subscribed before me this 20 day of July 1923. J Lemon Smith

J M Gazaway Ordinary. Cobb County.

AFFIDAVIT OF ORDINARY

GEORGIA, Cobb County.

I, J M Gazaway Ordinary of said County, do certify that I personally know J Lemon Smith, who is a resident citizen of said County, and that said person is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew Mary A Smith while in life and that this was the same person whose name appears on the Indigent Widows Pension Roll of Cobb County, and was paid a Pension of 100.00 Dollars in said County for 1922, and I now believe said pensioner to be dead.

Given under my hand and official seal, this 20 day of July, 1923.

(SEAL) J M Gazaway Ordinary. Cobb County.

INSTRUCTIONS:

1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and died without owning sufficient property to pay such expenses. The widow of a soldier, if she is living, has prior claim over these expenses, and must make application on yellow blank.

2nd. Require those claiming accounts for expenses of last illness, and expenses of funeral, to make out their account in fully itemized form, giving each item and the value of it, and each date.

3rd. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.

4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unpaid," etc.)

"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of ..... who died without owning sufficient property to pay this bill."

5th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.

6th. The completed voucher, this blank and the bills, must be sent to the Pension Office for approval and no money must be paid out until it is returned to you as your authority to make the payment.

7th. The Ordinary signs pay-roll, as Ordinary, for the pension and then disburses the money himself and takes receipts.

8th. Accept no bills for nursing until you write the Pension Office, stating the circumstances in very great detail. Pensioner's children, or children-in-law, must not charge the State for doing only what the law and common humanity demand of them.

9th. Return this application, and attached bills, with your final settlement to the Pension Office.

10th. Ordinary should see that the back of this blank, when folded, is filled out.

11th. Funeral expenses of deceased "new" pensioners covering all or part of both the 1920 and 1921 pensions require two separate sets of this voucher and bills—one set to be filed in the Pension Office with the pension papers of each year.

Statement

ACWORTH, GA. June 29 1923

Mrs. Mary A Smith

By Lemon Smith

In Account with

J. F. Collins & Son

Furniture, House Furnishings, Stoves, Etc.

FUNERAL DIRECTORS & EMBALMERS

1923

Mar 7	Coffin	70 00
	Robe	12 50
	Embalming	15 00
	Hearse & Service	10 00
July 20	Bal on Acct	60 00
		107 50

Personally appeared before me J F Collins of the firm of J F Collins & Son who deposeth and saith that the above and foregoing acct is just and true and unpaid

Signed J F Collins

Sworn to and subscribed before me this June 29-1923

J A Reed N.P. Cobb Co Ga.

Received of forty dollars, in full bill for services rendered to Mrs. Mary A. Smith, during her last illness, being part of pension due her at the time of her death.

This, July 21, 1923.

E. M. Bailey M.D.

Pensioner's children, or children-in-law, must not charge the State for doing [illegible]
mand of them.

9th. Return this application, and attached bills, with your final settlement to the Pension Office.

10th. Ordinary should see that the back of this blank, when folded, is filled out.

11th. Funeral expenses of deceased "new" pensioners covering all or part of both the 1930 and 1931 pensions require two separate sets of this voucher and bills—one set to be filed in the Pension Office with the pension papers of each year.

Smith, M. L.
Cobb Co.

OK for 1911

No.

Write for Co Record

Confederate

Soldier's Application.

UNDER ACT 1910.

County Cobb

Name M L Smith

Company F

Regiment 6th N. C. Cavalry

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

8/30/10

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (Give County and Post-office).
M L Smith Marietta Cobb County

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

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) July 16. 1862 Co B Changed to Elliots B & 6th N Carolina Cavalry

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) until April 16 1865 When we received information of his surrender

6. When and where was your Company and Regiment surrendered or discharged from the Service?
At Ridgeway N.C. Disbanded we were between Sherman & Grant

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were I was present

a. Where was your Command when you left it? At Ridgeway N.C.

b. When did you leave the Command? April 16 1865

c. For what cause did you leave?

d. By whose authority did you leave? By Order Gen Baker we were in between Sherman & Grant and Lee Hood Surrendered & Gen Baker our Commander disbanded us

e. For how long was your leave granted? In what way?

f. Why did you not return to your Command after leave expired?

g. In what way were you prevented?

h. What effort did you make to return?

i. Were you captured during the war? No

j. If so, when, and where? In what prison were you held and when were you released?

9. What property of every discription was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.)
41 acres of land value $1000.00 Wagon $15.00
1 Horse " 75.00 2 Yearlings 15.00
1 Cow " 25.00 1 Hog 10.00 Total $1140.00

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? None

11. What property of any discription of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list).
40 acres of land Value 1000.00 Wagon 15.00
1 Horse " 75.00 2 Yearlings 15.00
1 Cow " 25.00 1 Hog 10.00 Total $1140.00

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None except rent of farm 75 to 90 Dollars

13. Are you drawing a pension of any amount from this State or the United States?

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 20th day of August 1910

J M Gann Ordinary,
of Cobb County.

his
M L Smith
mark

M L Smith Co. B 6th N Carolina Cavalry
Was discharged by Gen Baker
at the Surrender of Gen Lee's Army
at Ridgeway N.C.

Smith M.L.
Co. B 6th N.C. Cav.

Discharge
Writ for Pension

Confederate Soldier's Application.

UNDER ACT 1910.

County Cobb
Name M L Smith
Company E
Regiment 6th N C Cavalry

Approved

J. W. LINDSEY,
Commissioner of Pensions

8-25-10

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Cherokee County,

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

1. What is your name and where do you reside? Robt M. Scroggs, Cherokee County Ga
2. How long and since when have you known M. L. Smith the applicant? known him 55 years
3. Where does he now reside, and since when has he been a bonafide, continuing resident in this State and how do you know? Resides in Cobb Co. Ga. been a continuing resident of this State for 12 years.
4. When, where and in what Company and Regiment did M. L. Smith enlist during war from 1861 to 1865? (Give date and place). July 16, 1862, Ft. Hembree N.C. Com. B. - 6th N.C. Cavalry Com. B. was later changed to Letter G.
5. How did you obtain your information of this Service? I enlisted at same time, and remained with him till the surrender
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) till April 16th 1865, when the Com was disbanded
7. When and where was his Command surrendered or discharged (give date and place) Ridgeway N.C. - April 16th 1865.
8. Were you personally present at the Surrender? yes
9. If not, where were you and how came you there? —
10. Was the applicant personally present with his Command at surrender? yes
11. If not where was he and how came him there? —
12. When did he leave his Command? April 16, 1865 Where was his Command when he left it? Ridgeway N.C. for what cause did he leave? disbanded By whose authority did he leave — and how long was he granted leave? — How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) of my own knowledge, by being in service with him.
13. In what way was he prevented from returning to his Command? — How do you know? —
14. What effort did he make to return to his Command and how do you know? —
15. Was applicant captured as a prisoner No — If so, when and where? — In what prison was he held? — and when released?

Sworn to and subscribed before me, this the 25 day of Aug 1910 R. M. Scroggs
W. J. Webb Ordinary.
of Cherokee County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
Cobb County.

Personally before me comes Cook James & J. M. Hardage who on oath says that they are free holders residing in said County and we know M. L. Smith the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.)

40 Land Value $1000.00 1. Wagon 15.00
1 Horse 75
1 Cow & yearling 35

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov. 1908? (State it fully by items.) None
2. When and to whom was it sold or given to? —
3. What was the price paid or stated to be paid? —
4. What relation is the party to applicant? —
5. What disposition was made of the proceeds of the sale? —
6. Was the disposition of this property made in good faith and full values? — or was it made to obtain a pension? —

Sworn to and subscribed before me, this the 20th day of August 1910 W. C. James
J. M. Gann Ordinary. J. M. Hardage
of Cobb County.

ORDINARY'S CERTIFICATE.

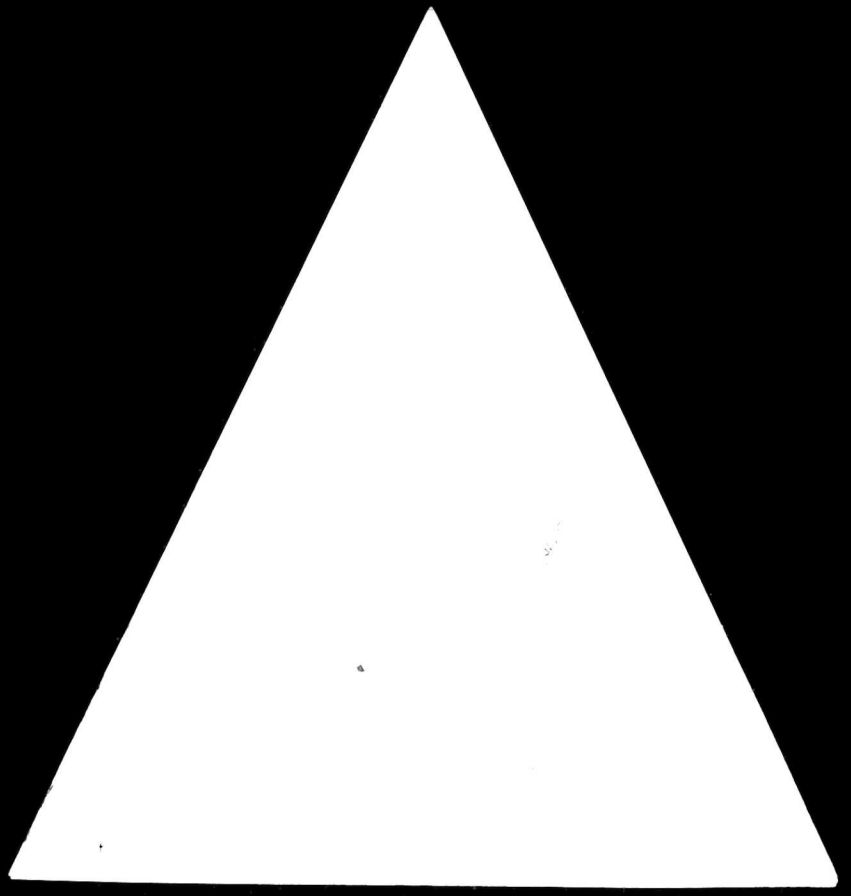
STATE OF GEORGIA,
Cobb County.

I, J. M. Gann Ordinary of said County, certify that I know the applicant M. L. Smith for Pension is the person he represents himself to be and resides in said County. That I also know the witness swearing to the service and W. C. James and J. M. Hardage who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Cobb County shows that M. L. Smith and wife value for tax is in 1908 $385.00 for 1909 $520.00 for 1910 $630.00

Sworn under my hand and official seal of office this 26 day of August 1910.
J. M. Gann Ordinary.
of Cobb County.

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

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.



Smith, Newton H.
Cobb Co

No.

INDIGENT PENSION

1898.

Name N. H. Smith

County Cobb

Approved Sept 1898 1898.
for 1901

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/15-1902

1/28.98 - 12/19.98

Pension Office 8/1 1898
The physical condition as described leaves doubt as to whether applicant can earn a support at any kind of labor or occupation
Rich. Johnson
Com. of Pensions

Pension Office 7/11 1899
The statute says that the proofs must show an inability to earn a support at any kind of labor — It has not been so stated nor does it follow from the physical condition as described
Rich. Johnson
Com. of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA, } Cobb COUNTY, } N. H. Smith hereby authorize

I, Joe Stone of Marietta Ga

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

at by Trim

Witness my hand and seal this 18th day of Aug 1898.

Executed in presence of E. M. Flanagan } N. H. Smith [L.S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, N. H. Smith hereby authorize
Bill Stone of Marietta Ga
to receive and receipt for the pension allowed and request that he remit same to me
by Stone

Witness my hand and seal this 15th day of Aug 1898.

Executed in presence of
J. M. [illegible]
[illegible]

N. H. Smith [L.S.]

Pension Office 8/11 1898
The physical condition as
set forth by claimant must be
to which applicant can
earn a support at any kind
of labor, is occupation
Robt. H. Duncan
Comr. of Pensions

INDIGENT PENSION
1898.

Name N. H. Smith

County Cobb

Approved Aug 15 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

1/18-1900
1/28.98 - 12/19.98

Questions for Applicant.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office.)
Newton H. Smith - I reside in Marietta, Cobb Co Ga,
2. How long and since when have you been a resident of this State? I have been a resident of this State all my life
3. When and where were you born? I was born in Pumpkin Co Ga July 11th 1839.
4. When and where and in what company and regiment did you enlist or serve? I enlisted in Pumpkin Co Ga in December 1861 in Company H. 14th Battallion of South Carolina - Heavy Artillery - Confederate Army -
5. How long did you remain in such company and regiment? I remained in said Company and Battallion about three and a half years & until the Surrender in North Carolina in 1865
6. For how long a period did you discharge regular military duty? About 3½ Years
7. When, where and under what circumstances were you discharged from service? I was Surrendered with my Command at [illegible] N. Carolina in 1865 -
8. What is your present occupation? I have no regular occupation - I do what I can to live -
9. How much can you earn (gross) per annum by your own exertions or labor? I can not earn anything by labor
10. What has been your occupation since 1865? I farmed as long as I was able -
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Infirmity & poverty -
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
I am ruptured on both sides - to such an extent that I can not perform any manual labor - My ruptures were caused by lifting One hundred and twenty four pound Cannon balls at Fort Sullivan Island near Charleston S. C.
13. What property, effects or income do you possess and its gross value? None at all
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897 and what disposition, if any, did you make of same? I owned only one old horse during those years and a one horse wagon in which I labored Bills mainly paid for.
15. In what County did you reside during those years and what property did you then return for taxation? I lived in Cobb Co Ga during those years - I have for 15 yrs -
16. How were you supported during the years 1896 and 1897? By my children & what little I could do
17. How much did your support cost for each of those years and what portion did you contribute thereto by your own labor or income? I would Say about Sixty or Sixty five dollars - Boughton Contributed $10.00 to Support
18. What was your employment during 1896 and 1897? What pay did you receive in each year? I had no employment I was not able to work but worked a little on a very small scale -
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have a wife - and four children living with me & rent, James - aged 23 yrs - Rosa - 17 years old. Nearly 16 years old and Taylor - 13 years old - Working at such jobs as they can get. They have no homestead
20. Are you receiving any pension, if so, what amount and for what disability? None to date

Every Question MUST be Answered

Sworn to and subscribed before me this the 18 day of Aug 1898.
Bill Stone Ordinary.
of Cobb County.

N. H. Smith Applicant.
Marietta Ga

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
(illegible) County.

E. J. Simpson, of said State and County, having been presented as a witness in support of the application of Newton N. Smith for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? E. J. Simpson. I reside in Cobb County Ga
2. Are you acquainted with Newton N. Smith, the applicant, if so how long have you known him? Have Known him thirty six years
3. Where does he reside, and how long and since when has he been a resident of this State? He resides in Marietta Cobb Co Ga. He has resided in this State ever since I have known him.
4. When, where and in what company and regiment did he enlist, and how do you know? He enlisted in Lumpkin Co Ga in December 1861 in Co. A. 14th South Carolina Regt Hamptons Legion Heavy Artillery Confederate I was a Private of this Co
5. Were you a member of the same company and regiment? I was a Private of the same Company
6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier and the time and circumstances of his discharge from the service? He was in performance of Regular Military duty for three and a half years. And was Surrendered with Gen Command at Greensborough North Carolina in 1865.
7. What property, effects or income has the applicant? (Give your means of knowledge.) He has no property or effects or income. I know this statement
8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? He nothing but an old horse and wagon during the years - 1896 and 1897.
9. Has he conveyed away any of his property in the last three years, if so, what was it and to whom? He has not Conveyed away any property during the last three years
10. What is the applicant's occupation and physical condition? He has no regular occupation, as does whatever he is able to make a little money - He is ruptured on both sides.
11. Is the applicant unable to support himself by labor of any sort, if so, why? He is unable to support himself by labor of any sort by reason of his being ruptured on both sides.
12. How was he supported during the years 1896 and 1897? Mainly by his children and what little he could make.
13. What portion of his support for these two years was derived from his own labor or income? Comparatively (illegible) Some little by Contributed by Neighbors to help on (illegible) & Small Way - or peddling when he could get anything to peddle on
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He Was ruptured on both sides by Morris Island Work Charleston S.C. in August 1863 by lifting heavy Cannon balls for Siege Guns.
15. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this the (illegible) day of (illegible) 1898.

E. J. Simpson Witness.

(illegible) Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me A. E. Johnson M.D. and E. J. Seitz M.D., both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully N. N. Smith, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

On examination I find the applicant, ruptured in both sides. In our opinion he is unable to labor

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the 18th day of January 1898.

A. E. Johnson M.D.
E. J. Seitz M.D.

(illegible) Ordinary.

ORDINARYS' CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, (illegible) Stone, Ordinary in and for said County, hereby certify that the applicant N. N. Smith resides in said County, and has been a bona fide resident of this State since the I understand all his life and that the witnesses, viz.: E. J. Simpson A. E. Johnson M.D. and E. J. Seitz M.D. are of trust worthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1896 Nothing Dollars of property, and in 1897 $25. (Personalty) Dollars of property.

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

Witness my hand and seal of office, this 15th day of Jan. 1898.

W. M. Stone Ordinary of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, N N Smith hereby authorize John Awtrey
of Cobb County
to receive and receipt for the pension allowed and request that he remit same to
at his Office in Marietta
by hand

Witness my hand and seal, this 3rd day of January 1901.

N N Smith [L. S.]

Executed in presence of
J M Gann

Smith, Neuton H.
Cobb Co.

CODE SECTION 184
(For Those Already Enrolled.)

No. 250

INDIGENT
SOLDIER'S PENSION.
1901.

Name N N Smith
County Cobb

WARRANT ISSUED
June 18 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Awtrey

Geo. W. Harrison, State Printer, Atlanta.

no date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears N H Smith of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of All his life 1839; that he is 61 years old and by occupation a that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 Years in Company A, of ~~Regiment~~ Battalion of 14th South Carolina Reg; that his physical condition is as follows: On account Infirmity age and Poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Cobb county been allowed a pension for the year 1901 N H Smith

Sworn to and subscribed before me, this the 3rd day of January 1901.

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with N H Smith 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 3rd day of January 1901.

Affix your seal here

John Awtrey Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, N. H. Smith hereby authorize John Awtry of

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

at

by

Witness my hand and seal, this 9 day of Jany. 1902.

N. H. Smith [L. S.]

Executed in presence of

J M Gann

Smith, N. H.
Cobb County

CODE SECTION 1234
(FOR THOSE ALREADY ENROLLED.)

No. 475

INDIGENT
SOLDIER'S PENSION
1902.

Name N. H. Smith
County Cobb
Co. A Regiment Lucas' Basin.

WARRANT ISSUED
1/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Only

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb **County.**

Personally appears N H Smith of Cobb County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1839; that he is 62 years old and by occupation a ____ that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 4 Years in Company A, of Lucas Batt Heavy Artillery Confederate Army, of 11th South Carolina Regt; that his physical condition is as follows: On account Infirmity age and poverty he is unable to Support himself

that his property consists of the following items

Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 9 day of Jany 1902.

N. H. Smith

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb **County.**

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with N. H. Smith 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 9 day of Jany 1902.

Affix your seal here

John Awtrey
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. H. Smith hereby authorize
John Awtrey of Marietta, Ga.
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 2nd day of Jany 1903.
N. H. Smith [L. S.]

Executed in presence of

Smith, N. H.
Cobb County
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 5 1/2

INDIGENT
SOLDIER'S PENSION
1903.

Name N. H. Smith
County Cobb
Co. 4th Regiment Cavalry

WARRANT ISSUED
1/3 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Clerk

Geo. Harrison, State Printer, Atlanta.

Smith, N. H.
Cobb Co

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, N. H. Smith hereby authorize
Jno Awtrey of Marietta
to receive and receipt for the pension allowed and request that he remit same to
the at his office
by Hand

Witness my hand and seal, this 1st day of January 1904.
N. H. Smith [L. S.]

Executed in presence of
J. M. Gann

Smith, N. H.
Cobb Co
CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
No. 5 1/2

INDIGENT
SOLDIER'S PENSION
1904.

Name N. H. Smith
County Cobb
Co. 4th Regiment Cavalry

WARRANT ISSUED
1/2 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Clerk

Geo. W. Harrison, State Printer, Atlanta.

No date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb ~~N H Smith~~ County.

Personally appears N H Smith of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1839; that he is 63 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 yrs in Company A, of Lucas Battery of 14th S.C. Regs.; that his physical condition is as follows: from infirmity & poverty he cannot himself

Heavy artillery

that his property consists of the following items: Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cobb county been allowed a pension for the year 1902

Sworn to and subscribed before me, this the 2 day of Jany 1903. N H Smith
John Hurtey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Hurtey Ordinary of said County, do certify that I am well acquainted with N H Smith 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 2nd day of January 1903.

Affix your Seal here

John Hurtey
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears N H Smith of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of All his life 1839; that he is 63 years old and by occupation a , that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of — yrs in Company A, of Lucas Battery of 14th South Carolina Regs; that his physical condition is as follows: On account of infirmity age and poverty he is unable to support himself

Heavy artillery

that his property consists of the following items: Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 1st day of January 1904. N H Smith
John Hurtey Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Hurtey Ordinary of said County, do certify that I am well acquainted with N H Smith 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 1904.

Affix your Seal here.

John Hurtey
Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY,

I, N. H. Smith hereby authorize
John Austin of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 2 day of Jany 1905.

N. H. Smith [L. S.]

Executed in the presence of
J. McGann

Smith, N. H.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)
Fulton Co - 1906
No. 665

INDIGENT
SOLDIER'S PENSION
1905.

Name N. H. Smith
County Cobb
Co. A Regiment 4th Batty

WARRANT ISSUED
1/23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT [redacted] TO
Only [illegible]

GEO. W. HARRISON, MANAGER, FOR [illegible] ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears N H Smith of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ..... day of ..... 1839; that he is 65 years old and by occupation a ....., that he enlisted in the military service of the Confederate States (or of the State of .....) during the war between the States, and served for the term of 4 Years in Company A, of Lucas Battalion Heavy Artillery Regiment of 14 South Carolina Regulars; that his physical condition is as follows: Infirmity and Poverty

that his property consists of the following items: Nothing

of the value of ..... Dollars. I am now earning, by my labor, ... Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 2 day of Jany 1905. N H Smith

John Ardrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 10 day of Jany 1905.

John Ardrey
Ordinary Cobb County.

Affix your seal here

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

Georgia
Cobb County } Personally appeared before me the undersigned, Ordinary in and for said County - P. T. Anderson who, being sworn says on oath that he is well acquainted with N. H. Smith - applicant for pension, and knows that he suffers from double rupture - Deponent says, that he knows that said Smith is incapable of performing manual labor of any kind.

Sworn to & subscribed before me this January 6th 1900

J. M. Stone
Ordy

P. T. his X mark Anderson

Additional Testimony—

Georgia
Cobb County. } Personally appeared before me the Undersigned, A. E. Johnson & E. J. Setze who being sworn says on oath that they have examined N. H. Smith and find that he is ruptured on both sides (double hernia) and that he is essentially and positively incapable of performing manual labor to any such extent as would enable him to earn a support by manual labor.

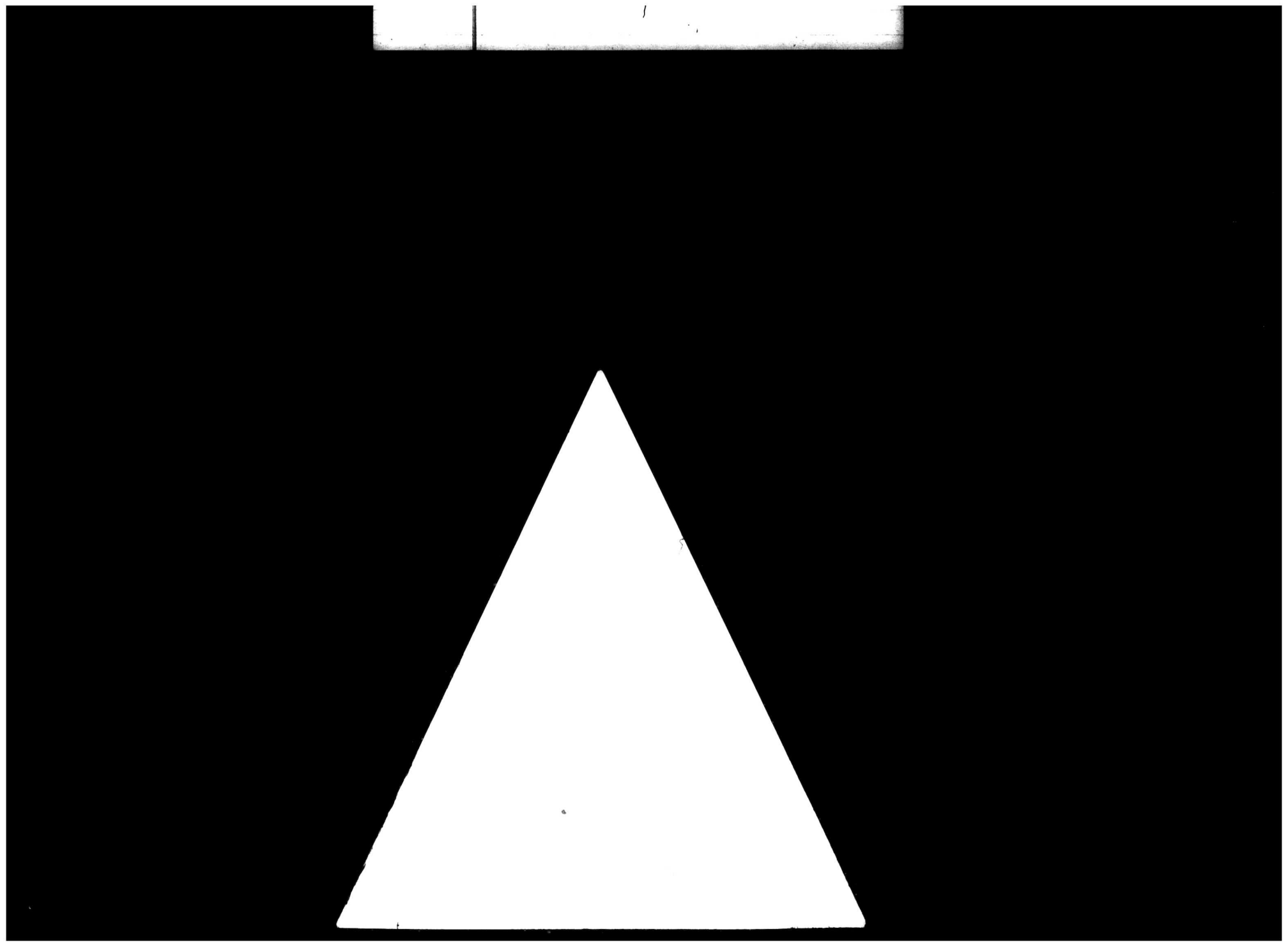
Sworn to & Subscribed before me This 17th November 17th 1898. J. M. Stone Ordy.

A. E. Johnson M. D
E. J. Setze M.D

Personally appeared before me E. J. Setze M. D. who being sworn says that N. H. Smith is incapable of manual labor of any kind on account of double hernia.

Sworn to & Subscribed before me this 17th January 17th 1898. J. M. Stone Ordy.

E. J. Setze M.D.



Smith, T. M. - Cobb County

Disapproved
10/27-1909

Code Section 1250.

No.

INVALID

SOLDIER'S PENSION,

190

Name T M Smith

County Cobb

Co. D 7th Ga Regt.

Disability Loss of Arm

Amount, $

190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta

9-2-09.

Pension Office
10/27-1909

The final loss of applicant's arm was not the result of the wound sized in Service - but was the result of an accident after the war. He is receiving a Pension of $[illegible] for a [illegible] by a wound [illegible] Service [illegible] allows [illegible]

[illegible]

[illegible] of Pens.

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA, County.

I, hereby authorize

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

at

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

day of 190

[L. S.]

Executed in the presence of

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

I _____ hereby authorize _____

of _____ to receive and receipt for the pension allowed and

request that he remit same to _____ by _____

at _____

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

day of _____ 190__

_____ [L. S.]

Executed in the presence of

_____

_____

Code Section 1250.

No.

INVALID

SOLDIER'S PENSION,

190__

Name J M Smith

County Cobb

Co. D 7 Ga Regt.

Disability Gun S Shot

Amount, $ _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

Geo. W. Harrison, State Printer, Atlanta

9-2-09.

Smith, J.M. Cobb County
Geo. Appl. 1 cert
12-17-09 - 1909

Form No. 1.

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

The Instructions as Set Out in the Notes Must be Observed.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears J. M. Smith of said Cobb County, State of Georgia, who being duly sworn, says on oath that he was born on the 11th day of April 1837, that he is a *bona fide* citizen and resident of Georgia, and has been continuously since the 11th day of April 1837, that he enlisted in the military service of the Confederate States (or the State of _____) on the _____ day of May 1861, during the war between the States, and served in Company C of 7th Regiment of Ga Volunteers, Bartows Brigade, and was honorably discharged on the 27th day of June 1862; that whilst engaged in such military service, and in line of duty in the State of Virginia, on the 27th day of June 1862 he was disabled or wounded as follows: At the battle of Gaines's Mill near Richmond Va a Shell from the enemys guns exploded - Killing a man and Shattering a Musket - the barrel of which Shattered deponents arm and hand to such an extent that the same was entirely useless and practically worthless. Deponent further says that he is unable to perform Manual Labor, & after the War undertook to care for a Hope for Capt J. A. Anderson for a Living and that said injury so injured said Wrist arm as to make it necessary to Amputate the arm. This injury would not have occured if he could have used said arm. Therefore he asks that he be reinstated to his original allowance of one hundred dollars

Where was command surrendered? At Appomattox C.H.

Was applicant present? No If not, where was he? At Home How come there? Because of injured arm

And by whose authority? State fully: By Medical board at Gainesville ~~Texas~~ at Richmond Va.

Deponent desires to participate in the benefits of Section 1250 of the Code, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ending October 26th, 190__

Sworn to and subscribed before me, this the 30th day of Aug 1909

J. M. Smith his mark

Ordinary. Post Office

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

NOTE.—Do not trouble to mention wounds which do not disable.

NOTE.—The Ordinary will see that *all* blank spaces are filled when the affidavits are signed.

Form No. 2.

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears before me, the undersigned Ordinary in and for said County J. A. G. Anderson and _____ personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say under oath, that they are personally and well acquainted with J. M. Smith whose application is herewith presented for a pension, ~~that he~~ has resided in this State continuously since the prior to the war between the States day of _____ 18__, that he served in Company B of the 7th _____ Regiment of Ga Vols Bartows Brigade, and from our personal knowledge he, while in line of duty, was injured by the service as follows: *(Give full statement, and tell in your own language when, where, and how the injury happened, or the disease was contracted, and to what extent applicant is disabled from work as a direct result thereof. If he does any labor or can do any, state what.)*

Was Wounded at Garnetts Farm near Richmond Va on June 1862. by the explosion of Shell which Shattered a Musket the Shattered his right hand and arm to such an extent as to render it entirely useless. After the War he took to Carpenter work but the injury rendering it necessary to amputate the arm, the ball was Poperly Cared from the wound in Cobb

I certify that J. M. Smith was a member of my company & Regiment & wounded as Stated above he was a good & faithful soldier while in the service & I believe his statements to be true. Thos J. Hardage Capt. Co

Where was applicant's command surrendered? _____

Was he with it? _____ Were all of you present? _____

If not, where was he? _____

Where were you all?

How do you know the facts you state to be true?

We personally know above stated facts. We were with him in the army and have known him ever since.

He was honorably discharged or retired from the service on _____ day of _____ 186__. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 18__. We have no interest in the recovery of a pension by him.

John A G Anderson
Sworn to and subscribed before me, this 31 day of August 1909
Saxon A Anderson
J M Gann Ordinary.
Thos J Hardage Capt Co D 7th Ga Regt

NOTE 1.—The Ordinary will see that the full text of the affidavit is understood by the witnesses, and that they are legally qualified to the same.
2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.
3.—All blank spaces *must* be filled when signed.
4.—Three witnesses are required.

1

Form No. 3.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA,
Cobb County.

PERSONALLY comes before me J M Gann Ordinary of said County, Gilbert Tennent MD and W B Bishop, both known to me as reputable physicians of said County, who, being severally sworn, say on oath, that they have carefully examined _____ and after such personal examination, say that the present condition of applicant is as follows: _____

His right arm amputated above Elbow

and that such condition is permanent. Said condition arises from the following facts: He was shot in battle and lost his arm

He thinks has not more than a fourth of his arm left by the bullet cut off as stated above

We have treated applicant professionally for forty years, and his condition, as above stated, does not arise from hereditary or congenital causes, or from vicious or intemperate habits.

Sworn to and subscribed before me, this 31 day of August 1909
J M Gann Ordinary.

Gilbert Tennent MD
W B Bishop

NOTE 1.—*State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state its location, character and present condition. If from disease, give its nature and character, and its causes or origin, as understood by affiants.*
NOTE 2.—The physicians will be careful to fill every blank space in oath.

Form No. 4.

STATE OF GEORGIA,
Cobb County.

I, J M Gann, Ordinary of said County, do certify that I am well acquainted with J. M. Smith the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and he is disabled, as he claims*, and I know he is the individual he represents himself to be, and that he resides in this County and has been a bona fide resident since the for More than 28 years to my knowledge day of _____ 18__.

I also certify that the witnesses, to wit: John A. G. Anderson, Saxon A. Anderson and Thos J Hardage are persons of respectability, that their statements are worthy of full credit and belief, *and that the full text of the affidavit was read to and understood by them before they signed the same.*

Given under my official signature and seal, this 31 day of August 1909

J M Gann
Ordinary Cobb County.

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

NOTE 1.—The Ordinary will see that the full text of the affidavit is understood by the witnesses, and that they are legally qualified to the same.

2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.

3.—All blank spaces *must* be filled when signed.

4.—Three witnesses are required.

Ordinary Cobb County.

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

Approved
Rich Johnson
Sec
No. 394
Smith, W. T.
Cobb Co

INDIGENT PENSION

1895.

Name W. T. Smith

County Cobb

Ground Infirmity & Poverty
Aug 11 1896
July 4th 1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO

Judy Stone

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W. T. Smith hereby authorize
Ex. Frey of Marietta Ga.
to receive and receipt for the pension allowed and request that he remit same to me
at Brannon's Sta. by Money Order.

Witness my hand and seal this 4th day of July 1895.

Executed in presence of
J. M. Stone
Ony
W. T. his + Smith
mk

Pay to J. M. Stone - Ordinary.
Jany 10. 1896 Ex. Frey.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, John M. Stone, Ordinary in and for said County, hereby certify that the applicant W. T. Smith resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: W. T. McDaniell, Jno. H. Simpson M.D. & Geo. L. Ezzard M.D. are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1893, Lived in Milton Co. dollars of property, and in 1894, Nothing dollars of property.

Witness my hand and seal of office, this 5 day of July 1895.

J. M. Stone Ordinary

of Cobb County.

NOTE.

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

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me Jno H. Simpson M.D. and Geo L Ezzard M.D. both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully W. T. Smith, applicant for pension under the Act of 1894, and after such personal examination, say that his precise physical condition is as follows:

Has been shot through neck affecting spine, also shot in right hand. His eyesight is very poor, making it impossible for him to see well enough to turn around, his crop in plowing.

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 4th day of July 1895.

J. M. Stone Ordy

Jno H. Simpson M.D.
Geo. L. Ezzard M.D.

10. What is the applicant's occupation and physical condition? Farming — Shot in the neck & hand and has a affected spine & back — caused by service in the war — He is also nearly blind

11. Is the applicant unable to support himself by labor of any sort, if so, why? Yes — He is not able to support himself because of his physical condition — He has no other occupation beside farming —

12. How was he supported during the years 1893 and 1894? Farming — renting land on shares — halves —

13. What portion of his support for these two years was derived from his own labor or income? Not much — not more than a half of his support —

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? He is now 59 yrs. old — nearly blind — very feeble — was shot in the neck at the battle of Gettysburg Penna — and in the hand at the battle of the wilderness — He was also in the big blow-up at the siege of Petersburg in the state of Va — Besides these causes he is very poor and not able to support himself —

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

Sworn to and subscribed before me, this the 4th day of July 1895.

J. M. Storm
Ony

W. H. his x mark McDaniel

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Cobb County.

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

1. What is your name and where do you reside? (give State, County and post office) W. T. Smith, I reside in Cobb Co. Ga. Brannon's P.O. Cherokee Co. but get my mail at

2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Same place - and lived in this state all my life.

3. When and where were you born? Hall Co. Ga. Mch. 29 1836.

4. Did you volunteer in the Confederate Army or in the Georgia Militia? Confederate Army.

5. When and where did you enlist? May - 1861 - at Gainesville, Ga.

6. In what company and regiment did you enlist? Co. "A" - 11th Ga. regiment -

7. How long did you remain in that company and regiment? Three years, 10 mos. & 19 days.

8. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge, or transfer? Neither

9. For how long a period did you discharge regular military duty? 3 yrs. 10 mos. 19 days.

10. When, where and under what circumstances were you discharged from service? At Lee's Surrender, 9th day of April - 1865 -

11. What is your present occupation? Farming -

12. How much can you earn per annum by your own exertions or labor? Very little probably about one fourth of a hand which would about $40.00

13. What has been your occupation since 1865? Farming -

14. What sum would be necessary for your support for this pension year, and how much are you able to contribute thereto either in labor or income? Probably sixty or seventy dollars - I could contribute $35.00 or $40.00 - I have no income -

20. In what County did you reside during those years and what property did you then return for taxation?
I was in Milton, Co. Ga - in 1893 -
" " " Cobb " " " 1894 -

21. How were you supported during the years 1893 and 1894? By my own efforts & by my children farming on rented land on halves.

22. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Probably about $60.00 or $70.00 - I contributed about $35.00 or $40.00 by my own labor -

23. What was your employment during 1893 and 1894? What pay did you receive in each year? Farming & received one half of what the land made not rented -

24. Are you married and have you a family? If so, is your wife living and how many children have you? Give age and sex of children and their means of support? Yes - wife living - eight Children - Charlie - 29 - male - supports himself - Harrison - 27 - male - supports himself - Carrie - 23 - female - married supported by her husband - Theo - 20 - male - I support her - Minnie, 18, female I support her - Henry - 16 - male - I support him - George - 14 - male - I support him - Minor - 8 - male - I support him -

25. Are you receiving a pension under any law of this State, if so what amount and for what disability? None

26. Are you receiving any aid from your County, and if so, how much? Did you ever apply for such aid? None — No -

Sworn to and subscribed before me this the 4th day of July 1895.

W. T. his X mark Smith Applicant.

J. M. Stone Ordinary of Cobb County.

15. What is your present physical condition and how long have you been in such condition? My physical condition is very bad & has been so continuously since the war- I was shot by the enemy through the neck- causing me much pain both in neck & head- This occurred at the battle of Gettysburg Penn on the 3rd of July 1863- Also in the battle of the Wilderness in the state of Va. on the 5th day of May 1864 I was shot in the right hand tearing it & fingers and fracturing the bones and losing one finger- Also at the battle of Petersburg in the state of Va. on the 21st day of July 64 I was falling over a fence while making a charge upon the enemy and it was known up giving me considerable shock injuring my back and spine generally- this causing me & causing me intense now suffering and much pain- All of these ailments and permanent disabilities rendering me almost wholly unable to perform the duties of the ordinary modes of life- My occupation is farming, renting land and of the receipts of farm work I can't make more than one fourth of a hand-

16. Upon which of the following grounds do you base your application for pension, viz.: first, "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? Second infirmity & poverty- I am now 59 yrs. old-

17. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third state whether you are totally blind and when and where you lost your sight? I claim under second ground- the answer is very fully set out in answer to Question No. 15- (See)

18. What property, effects or income do you possess? My household and Kitchen furniture valued at about $20.00-

19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any did you make of same? The same as in answer 18. and none other-

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb County.

W.H. McDaniell, of said State and County, having been presented as a witness in support of the application of W.F. Smith for pension under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? W.H. McDaniell- Cobb Co. Ga-

2. Are you acquainted with W.F. Smith, the applicant, if so how long have you known him? Yes- Know him since 1861-

3. Where does he reside, and how long has he been a resident of this State? In Cobb Co- He has lived here ever since I knew him-

4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Yes, sir. I was with him, side by side, all during the army-

5. When, where and in what company and regiment did he enlist? May- 1861- Gainesville Hall Co. Company "A" 11th Ga regiment-

6. Were you a member of the same company and regiment? Yes-

7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? He served there from May 1861- until Lee's surrender the 9th day of April 1865- He performed the duties of a soldier well was never discharged nor furloughed nor suspended-

8. What property, effects or income has the applicant? (Give your means of knowledge.) None- owns a little household & kitchen furniture- no income, nor other effects- I live in six miles of him & know positively the above facts-

9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition, if any, did he make of same? None except as mentioned in answer to Question No. 8- (See)

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W. T. Smith hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 5th day of Jany 1897.

W. T. his x Smith [L. S.]
mk

Executed in presence of
G. M. Fleming

Smith, W. T.
Cobb County

ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)

No. 961

INDIGENT
Soldier's Pension.
1897.

Name W. T. Smith
County Cobb

1/16 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Stone
SEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

POWER OF ATTORNEY.

State of Georgia,
Cobb County.

I, W. T. Smith hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 17th day of Jany 1898.

W. T. his x Smith [L. S.]
mk

Executed in presence of
G. M. Fleming

Smith, W. T.
Cobb Co.

ACT OF 15 DEC., 1894.
(For Those Already Enrolled.)

NO. 774

INDIGENT
SOLDIER'S PENSION,
1898.

Name W. T. Smith
County Cobb

WARRANT ISSUED
1/21 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. S.
SEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears W. T. Smith of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continously ever since the 29th day of Mch. 1836; that he is 60 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of Ga.) during the war between the States, and served for the term of 3 yrs 10m & 20d in Company A, of 11 th Regiment of Ga. Vols.; that his physical condition is as follows: by wound, by being hurt while in the Army - Nearly blind and general disability.

that his property consists of the following items

None

of the value of — Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1897. I have heretofore as a resident of Cobb county been allowed a pension for the year 1896.

Sworn to and subscribed before me, this, the 5th day of Jany 1897.

W. T. his X mark Smith

J. M. Stone Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 5th day of Jany 1897.

Affix your seal here.

J. M. Stone

Ordinary Cobb County.

NOTE.—The blanks spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears W. T. Smith of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 29 day of Mch. 1836; that he is 61 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of Nearly 4 yrs in Company A, of 11 th Regiment of Ga. Vols.; that his physical condition is as follows: On account of infirmity and poverty and disease he is unable to support himself in any way

that his property consists of the following items

Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1898. I have heretofore as a resident of Cobb county been allowed a pension for the year 1897

Sworn to and subscribed before me, this, the 17th day of Jany 1898.

W. T. his X mark Smith

J. M. Stone Ordinary.

Brannons P.O.
Cherokee Co.

State of Georgia,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with W. T. Smith 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 17th day of Jany. 1898.

Affix your seal here.

J. M. Stone

Ordinary Cobb County.

NOTE.—The blank spaces must be filled.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, W. J. Smith, hereby authorize J. M. Stone of Cobb to receive and receipt for the pension allowed, and request that he remit same to me at

by Himself

Witness my hand and seal this 10 day of Jany 1899.

Executed in presence of

W. J. X Smith (L. S.)

mk

Smith, W. J.
Cobb Co.

CODE SEC. 1254.
(For Those Already Enrolled.)

No. 144

INDIGENT
SOLDIER'S PENSION,
1899.

Name W. J. Smith
County Cobb

WARRANT ISSUED
144 1899

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. Stone Agt

Geo. W. Harrison, State Printer, Atlanta.

No date

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, W. J. Smith hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension allowed, and request that he remit same to me at

by Himself

Witness my hand and seal, this 20 day of Jany 1900.

W. J. X Smith [L. S.]

mk

Executed in presence of

T. J. Hawley

Smith, W. J.
Cobb Co.

CODE SEC. 1254.
(For Those Already Enrolled.)

NO. 1641

INDIGENT
SOLDIER'S PENSION,
1900.

Name W. J. Smith
County Cobb

WARRANT ISSUED
Jany 20 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Self

Geo. W. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears W. T. Smith of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 29th day of March 1836; that he is 67 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 4 Yrs in Company A, of 11 th Regiment of Ga vols; that his physical condition is as follows: On account of age infirmity & poverty he is unable to support himself.

that his property consists of the following items Nothing

of the value of ~~~~ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1899. I have heretofore as a resident of Cobb county been allowed a pension for the year 1898

Sworn to and subscribed before me, this, the 10th day of Jany 1899. W. T. his x mark Smith

J. M. Stone Ordinary. Brannons P.O.

State of Georgia,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with W. T. Smith 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 Jany 1899.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears W. T. Smith of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 29th day of March 1836; that he is 63 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 4 years in Company A, of 11 th Regiment of Ga. Vols.; that his physical condition is as follows: On account of age, infirmity and poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of ~~~~ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cobb county been allowed a pension for the year 1899

Sworn to and subscribed before me, this, the 15th day of January 1900. W. T. his x mark Smith

J. M. Stone Ordinary.

State of Georgia,
Cobb County.

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

Given under my official signature and seal, this 15th day of January 1900.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1900.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W. J. Smith hereby authorize John Awtry of Marietta to receive and receipt for the pension allowed and request that he remit same to me at his office by hand

Witness my hand and seal, this 8th day of Jany. 1901.
W J Smith [L. S.]

Executed in presence of
Jas M Gann

Smith W. J.
Cobb Co.

CODE SECTION 154
(For Those Already Enrolled.)
No. 246

INDIGENT
SOLDIER'S PENSION.
1901.

Name W J Smith
County Cobb

WARRANT ISSUED
Jan 15 1901.
JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Judy

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears W. J. Smith of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 29th day of March 1836; that he is 65 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 yrs. in Company G, of 11 th Regiment of Ga. Vols.; that his physical condition is as follows: On account of age infirmity & poverty he is unable to support himself

that his property consists of the following items Nothing

of the value of — Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Cobb county been allowed a pension for the year 1900.

W J Smith

Sworn to and subscribed before me, this the day of 1901.

John Awtry Ordinary.

STATE OF GEORGIA,
Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with W. J. Smith 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 8th day of Jany. 1901

John Awtry
Ordinary Cobb County.

Affix your seal here

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W T Smith hereby authorize John Awtrey of to receive and receipt for the pension allowed and request that he remit same to at by

Witness my hand and seal, this 3rd day of January 1902.

W T Smith [L. S.]

Executed in presence of
J. M. Vance

Smith, W. T.
John Awtrey

(FOR THOSE ALREADY ENROLLED.)

No. 87

INDIGENT
SOLDIER'S PENSION
1902.

Name W. T. Smith
County Cobb
Co. A Regiment 11th

WARRANT ISSUED
1/6 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. W. Harrison, State Printer, Atlanta.

Notation

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W T Smith hereby authorize John Awtrey of to receive and receipt for the pension allowed and request that he remit same to at by

Witness my hand and seal, this day of Jan 1903.

W T Smith [L. S.]
Mark

Executed in presence of
M Gann

Smith, W. T.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 308

INDIGENT
SOLDIER'S PENSION
1903.

Name W. T. Smith
County Cobb
Co. A Regiment 11th

WARRANT ISSUED
23 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. Harrison, State Printer, Atlanta.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, }
Cobb County. }

Personally appears W J Smith of Cobb County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 29 day of March 1836; that he is 65 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 Years in Company A, of 11 th Regiment of Ga Vols ; that his physical condition is as follows: On account of Age Infirmity and Poverty he is unable to Support himself

that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of county been allowed a pension for the year 1

Sworn to and subscribed before me, this the 3rd day of January 1902. } W J Smith

John Awtrey Ordinary.

STATE OF GEORGIA, }
Cobb County. }

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

Given under my official signature and seal, this 3rd day of January 1902.

John Awtrey
Ordinary Cobb County.

Affix your seal here

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, }
Cobb County. }

Personally appears W. J. Smith of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 29 day of March 1836; that he is 66 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 years in Company A, of 11 th Regiment of Ga. Vols ; that his physical condition is as follows: from infirmity & poverty he cannot earn support

that his property consists of the following items: Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cobb county been allowed a pension for the year 1 902

Sworn to and subscribed before me, this the 1st day of Jan 1903. } W J Smith

John Awtrey Ordinary.

STATE OF GEORGIA, }
Cobb County. }

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

Given under my official signature and seal, this 1st day of Jan 1903.

John Awtrey
Ordinary Cobb County.

Affix your Seal here

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W T Smith hereby authorize
John Awtrey of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 8th day of January 1904.

W T Smith [L. S.]

Executed in presence of

Smith, W. T.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. [illegible]

INDIGENT
SOLDIER'S PENSION
1904.

Name W T Smith
County Cobb
Co. A 11th Regiment Ga.
Vols.

WARRANT ISSUED
1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
only

Geo. W. Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, W T Smith hereby authorize
John Awtrey of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 6th day of January 1905.

W T Smith [L. S.]

Executed in the presence of
J M Garner

Smith, W. T.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 761

INDIGENT
SOLDIER'S PENSION
1905.

Name W T Smith
County Cobb
Co. A Regiment 11th

WARRANT ISSUED
JAN 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
[illegible] **County.**

Personally appears [illegible] of [illegible] County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the [illegible] day of [illegible] 18[illegible]; that he is [illegible] years old and by occupation a [illegible], that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of [illegible] in Company [illegible], of [illegible] th Regiment of [illegible]; that his physical condition is as follows: [illegible]

that his property consists of the following items: [illegible]

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of [illegible] County been allowed a pension for the year 1[illegible]

Sworn to and subscribed before me, this the 5th day of [illegible] 1904.
[illegible] Ordinary.

W. T. Smith

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 5th day of January 1904.

John Awtrey
Ordinary Cobb County.

Affix your Seal here.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb **County.**

Personally appears W. T. Smith of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1836; that he is 68 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 years in Company A, of 11 th Regiment of Ga Vols; that his physical condition is as follows: Age Infirmity and Poverty

that his property consists of the following items: nothing

of the value of Dollars. I am now earning, by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 6th day of January 1905.
John Awtrey Ordinary.

W. T. Smith

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with W. T. Smith 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 January 1905.

John Awtrey
Ordinary Cobb County.

Affix your Seal here.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, W. T. Smith hereby authorize
John Awbrey of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 8 day of Jany 1906.

W. T. Smith [L. S.]

Executed in the presence of
J. M. Gann

Smith, W. T.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 714

INDIGENT
SOLDIER'S PENSION
1906.

Name W. T. Smith
County Cobb
Co. A 11 Ga Regiment

WARRANT ISSUED
1/22 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordy

THE FRANKLIN PRINTING AND PUBLISHING CO. GEO. W. HARRISON, MGR.

no title

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, W. T. Smith, hereby authorize
John Awbrey of
to receive and receipt for the pension allowed, and request that he remit same to
at
by

WITNESS my hand and seal, this 12 day of Jany 1907.

W. T. Smith [L. S.]

Executed in presence of
J. M. Gann

Smith, W. T.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 655

INDIGENT
SOLDIER'S PENSION
1907.

Name W. T. Smith
County Cobb
Co. B 41 Ga Regiment

WARRANT ISSUED
JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
O

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears W T Smith of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company A, of 11 Ga Regiment of ____; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items:

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 8 day of January 1906.

W T Smith

John A Wtrey Ordinary.

State of Georgia,
____ County.

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

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

Affix your seal here

Ordinary ____ County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Cobb County.

Personally appears W T Smith of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company A, of 11 Ga Regiment of Ga Vols; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items:

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 12 day of Jany 1907.

John A Wtrey Ordinary.

W T Smith

State of Georgia,
Cobb County.

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

Given under my official signature and seal this 12 day of Jany 1907.

John A Wtrey

Affix your seal here

Ordinary Cobb County.

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

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

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

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

Know all Men by these Presents, That I, Mary Smithson of Cobb County County, in said State, do hereby appoint Hon W. A. Wright of Fulton 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 10th day of ~~10th~~ Feb 1893

Mary Smithson L. S.

Executed in the presence of us:
J. M. Stone Cty

DIRECTIONS.

If allowed, send amount by So Expr M.O. or Check to me at Acworth Ga, and oblige

Mary Smithson

Ex. Dept. Atlanta Ga
Feby. 17, 1893
Returned for full proof
Is not the disease
of which Mr Smithson
died inherited in most
cases.
What is his family
history?
Was he not diseased
when he entered?
Do the witnesses
solutely know that
the war caused his
disease?
Good full proof
W. H. Hansen
Sec.

Smithson, Mary
Cobb County
1893
Check 14183
No. 430
Wrong Proof

Widows' Pension.

for year ending February 15th, 1893,

—PAID TO—

Mrs. Mary Smithson

—OF—

Cobb COUNTY.

Warrant Issued

1893

AND HANDED TO

Wm

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Cobb COUNTY. }

Know all Men by these Presents, That I, Mary Smithson of Cobb County, in said State, do hereby appoint Hon W.A. Wright of Fulton 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 10th day of Dec 1892

Mary Smithson L. S.

Executed in the presence of us
J.H. Stone
[illegible]

DIRECTIONS.

If allowed, send amount by So Express M.O. or check to me at Acworth Ga, and oblige

Mary Smithson

Ord. Dept. A.N. Mar. 4 1893
Mary Smithson
Widow of the deceased
Application for Widow's Pension
Act approved Dec. 23, 1890
Questions
What is her family history?
Was he ever married before? When? To whom?
Has any former wife been living since?
Did he contribute to her support?
Did he abandon her? When?
Has she been married since his death? When?
Where has she resided since the war? Where since 1865?
Where is she now residing?
Where was he born?
Where did he reside before the war?
Where did he reside at the time of his enlistment?
What was his age at enlistment?
What was his occupation?
Was he drafted or did he enlist?
When and where did he enlist?
In what company, regiment, brigade, division, corps and army did he serve?
What was the character of his service as to fidelity, courage, etc.?
When and where was he wounded?
When and where was he captured?
When and where was he released?
When and where was he exchanged?
When and where was he paroled?
When and where was he discharged?
When and where did he die?
What was the cause of his death?
Was he in the hospital during his last illness?
Where?
Was he under the care of a physician?
Who?
Was he in destitute circumstances?
Has she any property?
Value?
Has she any children under 16 years of age?
How many?
Names?
Ages?
Where do they live?
Are they dependent upon her?
Has she any children over 16 years of age?
How many?
Names?
Ages?
Where do they live?
Are they dependent upon her?
Has she any children who are dead

Form No. 2.

Affidavit for Three Witnesses.

State of Georgia, County of Cobb

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

Geo L Storey, B Rainey and E. R. Stovall (each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, FROM THEIR OWN PERSONAL KNOWLEDGE Mrs. Mary Smithson, of the County of Cobb State of Georgia, is the widow of E. T. Smithson, who was a soldier in Company C of the 41st Regiment of Georgia Volunteers. That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 4th day of March 1862 That while in said service, or by reason of said service in the Army, he lost his life as follows: That a short while after he enlisted he was taken sick with a severe attack of Pneumonia and sent to the Hospital at Tupelo Miss and in July 1862 was furloughed to go Confederate for discharge the exact date of which we cannot state but it was in the 1st of March 1862 that he was taken sick and carried to the Hospital at Tupelo Miss & was there when he suffered from a severe attack of Pneumonia and was furloughed to the Confederate and discharged from the service the latter part of July 1862 in a very feeble state of health that after this we will be able to state when death as we heard the affiant say to a Mr. [illegible] he was afraid he would not live to get home. He [illegible] paralyzed for and has a couple

Our opportunity for knowing the facts stated in reference to death of applicant's husband were that we were in the service together and I seeing him occasionally after the war Closed.

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

Sworn to and subscribed before me, this, the 10th day of Feby 1893

Geo L Storey
B. Rainey
E R Stovall

J. H. Stone
Ordinary.

NOTE. Witnesses must not testify about things they may believe, but confine their statements to such facts as they personally know.

2. If the husband died after the war of wounds or disease, state fully and particularly how you, as witnesses, know the service as a soldier was the immediate cause of his death.

Form No. 3.

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

State of Georgia, County of Cobb

I, J. H. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Mary Smithson 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 11th day of July, 1893

SEAL

J. H. Stone
Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.

Those whose husbands were killed in service.

Those whose husbands died *in the army* of wounds or disease contracted in the service.

Those whose husbands went to the army and have never been heard from since the war.

Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.

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

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

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

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

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

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

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

If proofs must be made out of the State, the witnesses must be sworn before a *Judge of a Court of Record under Seal*, and the witnesses must be certified to as reliable, and that their signatures are genuine.

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

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

By order of the Governor.

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

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. H. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Mary Smithson 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 Edmund F. Smithson 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 25 day of Feby, 1894.

[SEAL] J. H. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mary Smithson of Acworth Cobb County in said State, do hereby appoint of Marietta Cobb Co. Ga J. H. Stone 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 25 day of Feby 1894.

Mary Smithson [L. S.]

Executed in the presence of us:

R. M. Mitchell
Penn Mitchell

DIRECTIONS.

Send amount by to me at , and oblige

Smithson, Mary
Cobb Co.

FOR THOSE HERETOFORE PAID.

1894.

No. 913

WIDOWS' PENSION,

for year ending February 15th, 1894.

—PAID TO—

Mrs. Mary Smithson

—OF—

Cobb County.

WARRANT ISSUED 2/3 1894,

AND HANDED TO

Geo. W. HARRISON, State Printer, Atlanta.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. H. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Mary Smithson 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 Edmund F. Smithson 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 22nd day of Jany 1895.

[SEAL] J. H. Stone Ordinary.

Form No. 3

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, Mary Smithson of Cobb County in said State, do hereby appoint of Marietta Ga J. H. Stone 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 22nd day of Jany 1895. X Mary Smithson X [L. S.]

Executed in the presence of us:

R. M. Mitchell

DIRECTIONS.

Send amount by to me at , and oblige

Smithson, Mary
Cobb Co.

FOR THOSE HERETOFORE PAID.

1895.

No. 487

WIDOW'S PENSION,

for year ending February 15th, 1895.

—PAID TO—

Mrs. Mary Smithson

—OF—

Cobb County.

widow of E. F. Smithson

WARRANT ISSUED 24 Jany 1895.

AND HANDED TO

Geo. W. Harrison, State Printer.

Form No. 1

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally comes Mrs. Mary Smithson

who being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has *resided* in said State continuously ever since Janry 18 46 That she is the Widow of Edmund F. Smithson who was a Soldier in Company C of the 41st Regiment of Georgia Volunteers, that he enlisted in said Regiment on or about the month of March 186 2 and served in the Army up to about August 186 2 That he lost his life on the day of 18 (*State here full particulars of the husband's death, when, where and from what cause.*) (

That from exposure he was taken sick with Pneumonia which terminated on his lungs and terminated into Consumption from which he died May 18 1869

)

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 5~~2~~; 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 2[illegible] day of Feby 1894.
J M Stone Ordinary.

Mary Smithson
Post-office Acworth Ga

Form 1.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally comes Mrs. Mary Smithson

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has *resided* in said State continuously ever since 1846 That she is the Widow of Edmund F. Smithson who was a Soldier in Company C. of the 41st Regiment of Geo Volunteers, that he enlisted in said Regiment on or about the month of March 186 2 and served in the Army up to August 186 2 That he lost his life on the 18th day of May 1869 (*State here full particulars of the husband's death, when, where and from what cause*) (

While in the Service of the Confederate States in the State of Mississippi in the Spring of 1863 and from exposure he he Contracted a severe case of Pneumonia which upon his Lungs and terminated in Consumption from which he died -

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 52 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension 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 22 day of Janry 1895.
J M Stone Ordinary.

Mary Smithson
Post-office Acworth Ga

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Mary Smithson 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 Edmund F. Smithson 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 5th day of Feby 1896.

{SEAL} J. M. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, Mrs. Mary Smithson hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him

In Witness Whereof, I have hereunto set my hand and seal, this 5th day of Feby 1896.

× Mary Smitheon × [L.S.]

Executed in the presence of

G M Fleming

Smithson, Mary
Cobb County
FOR THOSE HERETOFORE PAID.

1896.

No. 3557

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

Mrs. Mary Smithson

OF

Cobb County,

widow of Edmund F. Smith

WARRANT ISSUED

1896.

AND HANDED TO

Geo. W. Harrison, State Printer.

Form No. 2.

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

STATE OF GEORGIA, County of Cobb

I, J. M. Stone Ordinary in and for said County of Cobb State of Georgia, hereby certify that I am acquainted with Mrs. Mary Smithson 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 Edmund F. Smithson 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 15th day of Feby 1897.

{SEAL} J. M. Stone Ordinary.

Form No. 3.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, Mary Smithson hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him

In Witness Whereof, I have hereunto set my hand and seal, this 15th day of Feby 1897.

× Mary Smithson × [L. S.]

Executed in the presence of

G M Fleming

Smithson Mary
Cobb County
FOR THOSE HERETOFORE PAID.

1897.

No. 3556

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

Mrs. Mary Smithson

OF

Cobb County,

widow of Edmund F. Smith

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

1897.

AND HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form I.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb

Personally Comes Mrs. Mary Smithson

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846 That she is the Widow of Edmund F. Smithson who was a Soldier in Company C of the 41st Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of March 1864 and served in the Army up to August 1862 That he lost his life on the 18th day of May 1869 (State here full particulars of the husband's death, when, where and from what cause.) From Exposure in the army while on the Marches in Mississippi in the early Spring of 1862 He was stricken with a severe spell of the Pneumonia which settled on his lungs — He was discharged and came home and finally died of the disease contracted in May 1869 as above stated

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cobb 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 5 day of Feby 1896. J. M. Stone Ordinary.

Mary Smithson × Post-office Acworth Ga.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb

Personally Comes Mrs. Mary Smithson

who being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846 That she is the Widow of Edmund F. Smithson who was a Soldier in Company C of the 41st Regiment of Ga. Volunteers, that enlisted in said regiment on or about the month of March 1864 and served in the Army up to August 1862 That he lost his life on the 18th day of May 1869 (State here full particulars of the husband's death, when, where and from what cause)

That in the Spring 1862 near Corinth Mississippi he was taken with a Spell of Pneumonia, which settled on his lungs and finally developed into a lung trouble which terminated his life

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1852, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Cobb 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 15 day of Feby 1897. J. M. Stone Ordinary.

Mary Smithson × Post-office

POWER OF ATTORNEY.

State of Georgia, Cobb County.

I, Mary Smithson hereby authorize J M Stone of Marietta Ga to receive and receipt for the pension paid hereon and request that he remit same to me by him

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 4th day of Feby 1898.

Mary Smithson [L. S.]

Executed in the presence of

Smithson, Mary
Cobb County

For Those Heretofore Paid.

1898.

NO. 3421

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO Mrs. Mary Smithson

OF Edmund F. Smithson County, Cobb Co.

Widow of

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED Feby 8 1898.

AND HANDED TO JMS

GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

State of Georgia, Cobb County.

I, Mrs. Mary Smithson hereby authorize J M Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1st day of Feby 1899.

x Mary Smithson x [L. S.]

Executed in presence of

Smithson, Mary
Cobb County

For Those Heretofore Paid.

1899.

NO. 2162

WIDOW'S PENSION,

For year ending February 15th, 1899.

PAID TO Mrs. Mary Smithson

Cobb County

Widow of Edmund Smithson

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED 1/30 1899.

AND HANDED TO JMS

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. Mary Smithson

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846 That she is the Widow of Edmund F. Smithson who was a Soldier in Company C of the 41st Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of March 186 7 and served in the Army up to August 1862 That he lost his life on the 18th day of May 1869 (State here full particulars of the husband's death, when, where and from what cause.) That from Exposure in Mississippi in the Spring of 1862 While in the Service of the Confederate States he was attacked with Pneumonia which settled on his lungs and brought on Consumption of which he died ~~the~~ 18th day of May 1869.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852

I have been allowed a pension as a resident of Cobb 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 7th day of Feby 1898. J. M. Stone Ordinary. } Mary Smithson Post-Office Acworth Ga

State of Georgia, Cobb County. } I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs Mary Smithson who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1846

Given under my official signature and seal this the 7th day of Feby 1898.

J. M. Stone

{ Official Seal. }

Ordinary of Cobb County.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. Mary Smithson

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846 That she is the Widow of Edmund Smithson who was a soldier in Company C. of the 41st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to August 1862 That he lost his life on the 18th day of May 1869 (State here full particulars of the husband's death, when, where and from what cause.) He died at his home in Acworth Cobb County Georgia on the 18th day of May 1869. He died of the Hemorage of the lungs brought on from Exposure and Spell of Pneumonia While in the Service of the Confederate army while in Mississippi.

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852.

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

Sworn to and subscribed before me, this 1st day of Feby, 1899. J. M. Stone Ordinary. } Mary Smithson Post-Office Acworth Ga

State of Georgia, Cobb County. } I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. Mary Smithson who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1846

Given under my official signature and seal this the 1st day of Feby, 1899.

J. M. Stone

{ Official Seal. }

Ordinary of Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Mary Smithson hereby authorize
Jul Stone of Marietta Ga
to receive and receipt for the pension paid hereon and request that he remit same to
me by him

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10
day of Feby 1900.

X Mrs Mary Smithson [L. S.]

Executed in presence of

Smithson, Mary
Cobb County
To Those Heretofore Paid.

1900.

NO. 2006

WIDOW'S PENSION,

For year ending February 15th, 1900.
PAID TO
Mrs. Mary Smithson
OF
Cobb County,
Widow of Edward Smithson

JNO. W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
Feb 16 1900,
AND HANDED TO
[illegible]

so. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally Comes Mrs. Mary Smithson

who, being sworn, says on oath, that she is a bona fide resident of said county of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846. That she is the Widow of Edmund Smithson who was a soldier in Company C of the 41st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862 and served in the Army up to August 1862 That he lost his life on the 18th day of May 1869 (*State here particulars of the husband's death, when, where and from what cause*) He died at his home in Acworth, Cobb County, Ga. on the 18th May 1869, He died of Hemorage of the lungs brought on from exposure and spell of pneumonia fever while in the service of Confederate army while in Mississippi

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852.

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

Sworn to and subscribed before me, this 10th day of Feby 1900.
J M Stone Ordinary

X Mrs Mary Smithson
Post Office Acworth Ga

State of Georgia, Cobb County. } I J. M. Stone Ordinary of said County, certify that I am well acquainted with Mrs. Mary Smithson, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of 1846

Given under my official signature and seal, this the 10th day of Feby 1900.

J M Stone
Ordinary of Cobb County.

Official Seal.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Mary Smithson hereby authorize John Awtrey of

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

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

Mary Smithson [L. S.]

Executed in presence of
R M Mitchell

To Those Heretofore Paid.

1901.

No. 146.

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. Mary Smithson
OF
Cobb County.

Widow of

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
Jan 25 1901,
AND HANDED TO
Awtrey

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

Smithson Mary
Cobb County

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Mary Smithson hereby authorize John Awtrey of Marietta

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

at

In Witness Whereof, I have hereunto set my hand and seal, this 14th day of Jany 1902.

Mary her X Smithson [L. S.]
mark

Executed in presence of

To Those Heretofore Paid.

1902.

No. 2000

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO
Mrs. Mary Smithson
OF
Cobb County,

Widow of
Co. Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/16 1902
AND HANDED TO
Awtrey

GEO. W. HARRISON, STEAM PRINTER, ATLANTA, GA.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally Comes Mrs. Mary Smithson

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846. That she is the Widow of Edmund Smithson who was a soldier in Company C of the 41st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to August 1862. That he lost his life on the 18th day of May 1869 (State here particulars of the husband's death, when, where and from what cause). He died at his home in Acworth Cobb County Georgia on the 18th of May 1869 of disease of Hemorrage of the Lungs brought on from exposure and Shell of Pneumonia while in the Service of Confederate army while in Mississippi

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852

I have been allowed a pension as a resident of Cobb County for the year ending February 15th 1[illegible], and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 9th day of January 1901.
John Awtry Ordinary.

Mary Smithson
Post Office Acworth Ga.

State of Georgia,
Cobb County.

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

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

John Awtry
Ordinary of Cobb County.

Official Seal.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb

Personally comes Mrs. Mary Smithson

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846. That she is the Widow of Edmund Smithson who was a soldier in Company C of the 41st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to August 1862. That he lost his life on the 18th day of May 1869 (State here particulars of the husband's death, when, where and from what cause) He died at his home in Acworth Cobb County Georgia on the 18th day of May 1869 of disease of Hemorrage of the Lungs brought on from exposure and Shell of Pneumonia while in service of Confederate Army while in Mississippi

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852

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

Sworn to and subscribed before me, this 14th day of Jany. 1902.
John Awtry, Ordinary.

Mary (his mark) Smithson
Post-Office Acworth

State of Georgia,
Cobb County.

I John Awtry Ordinary of said County, certify that I am well acquainted with Mrs. Mary Smithson, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents hereself to be, and that she has continuously resided in this State since the day of 18

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

John Awtry
Ordinary of Cobb County.

Official Seal.

NOTE.—All blank spaces must be filled.
Voucher and affidavit must bear date after January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

Mary Smithson, hereby authorize John Autery of to receive and receipt for the pension paid hereon, and request that he remit same to at

In Witness Whereof, I have hereunto set my hand and seal, this 13th day of January 1903.

Mary Smithson. [L. S.]

Executed in presence of

Smithson Mary
Cobb County

To Those Heretofore Paid

1903.

No. 225

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO
Mrs. Mary Smithson
OF
Cobb County,
Widow of Edmund Smithson
Co. C. 41st Regiment Ga. Vols.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/23 1903.
AND HANDED TO
Cody

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

Mary Smithson hereby authorize John Autery of to receive and receipt for the pension paid hereon, and request that he remit same to at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22nd day of January 1904.

Mary Smithson [L. S.]
Mark

Executed in presence of

Smithson Mary
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. 274

WIDOW'S PENSION

FOR
YEAR ENDING DECEMBER 31, 1904.

PAID TO
Mrs. Mary Smithson
OF
Cobb County,
Widow of Edmund Smithson
Co. C. 41st Regiment Ga. Vols.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/25 1904,
AND HANDED TO
Only

Geo. W. Harrison, State Printer, Atlanta.

Form No. 1.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. Mary Smithson

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846. That she is the Widow of Edmund Smithson who was a soldier in Company C of the 41st Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to August 1862. That he lost his life on the 18 day of May 1869 (State here particulars of the husband's death, when, where and from what cause.)

He died at his home in Acworth Cobb County Georgia on the 18 day of May 1869 He died of Hemorrage of the Lungs brought on from exposure and Spell of Pneumonia while in the Service of Confederate Army in Mississippi

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852

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

Sworn to and subscribed before me, this 13th day of Jany 1903. John Awtrey, Ordinary. } Mary Smithson. Post-Office Acworth

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

Given under my official signature and seal, this the 13th day of Jany 1903.

{ Official Seal. } John Awtrey Ordinary of Cobb County.

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

Form No. 1.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. Mary Smithson

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846. That she is the Widow of Edmund Smithson who was a soldier in Company C of the 41 Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of March 1862, and served in the Army up to August 1862. That he lost his life on the 18 day of May 1869 (State here particulars of the husband's death, when, where and from what cause.)

He died at his home in Acworth Ga, He died of Hemorrhage of the lungs brought on from exposure and Bronchitis while in the Service

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852

I have been paid a pension as a resident of Cobb County for the year ending December 31, 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 22nd day of Jany 1904. John Awtrey Ordinary. } Mary her x mark Smithson Post Office Acworth

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. Mary Smithson who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of May Year 18

Given under my official signature and seal, this the 22nd day of January 1904.

{ Official Seal } John Awtrey Ordinary of Cobb County

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Mary Smithson, hereby authorize
John Hartley of Marietta, Ga.
to receive and receipt for the pension paid hereon, and request that he remit same to
at

In Witness Whereof, I have hereunto set my hand and seal, this 17th
day of January 1905. Mary X Smithson [L. S.]
mark

Executed in presence of

Smithson, Mary
Cobb County
Ga

To Those Heretofore Paid.

1905.

No. 264

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO Mrs. Mary Smithson
OF Cobb County,
Widow of Edmund Smithson
Co. H 1st Regiment Ga. Vols.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/23 1905.

AND HANDED TO

THE FRANKLIN PRINTING AND PUBLISHING CO. ATLANTA.
GEO. W. HARRISON, MANAGER, FOR STATE PRINTER.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Mary Smithson, hereby authorize
John Hartley of Marietta, Ga.
to receive and receipt for the pension paid hereon, and request that he remit same to
me at Acworth, Ga.

In Witness Whereof, I have hereunto set my hand and seal, this 20
day of January 1906. Mary Smithson [L. S.]

Executed in presence of
J. M. Hann

Smithson, Mary
Cobb Co. Ga.

To Those Heretofore Paid.

1906.

No. 181

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO Mrs. Mary Smithson
OF Cobb County,
Widow of D. F. Smithson
Co. C 41 Regiment Ga. Vols.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/12 1906,

AND HANDED TO

THE FRANKLIN PRINTING AND PUBLISHING CO. GEO. W. HARRISON, MGR.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. Mary Smithson

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since 1846. That she is the Widow of Edmund Smithson who was a soldier in Company of the 41st Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of Spring of 1862, and served in the Army up to 1862. That he lost his life on the day of 1869. (State here particulars of the husband's death, when, where and from what cause.)

Died From disease Contracted in war

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1852

I have been paid a pension as a resident of Cobb County for the year ending December 31, 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me, this 17th day of January 1905. John Awtrey, Ordinary. } Mary her X mark Smithson Post-Office

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. Mary Smithson, Who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1st day of January 1894

Given under my official signature and seal, this the 17th day of January 1905.

John Awtrey

Official Seal. Ordinary of Cobb County.

NOTE.—All blank spaces must be filled.
Voucher and Affidavit must bear date after January 1st, 1905.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. Mary Smithson

who, being sworn, says on oath that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since. That she is the Widow of E F Smithson who was a soldier in Company C of the 41 Ga Regiment of Volunteers, that he enlisted in said regiment on or about the month of 186 and served in the Army up to 186 That he lost his life on the day of 18 (State here particulars of the husband's death, when, where and from what cause.)

Died of Disease

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

I have been paid a pension as a resident of Cobb County, for the year ending December 31, 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me this 20 day of Jany. 1906. John Awtrey, Ordinary. } Mary Smithson Post Office Acwarth Ga

State of Georgia, Cobb County. } I, John Awtrey Ordinary of said County, certify that I am well acquainted with Mrs. Mary Smithson, who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 1 day of January 1894

Given under my official signature and seal, this the 20 day of January 1906.

John Awtrey

Official Seal Ordinary of Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Mary Smithson hereby authorize John Awbry

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

In Witness Whereof, I have hereunto set my hand and seal, this 17 day of Jany 1907.

Mrs Mary Smithson [L. S.]

Executed in presence of
J M Gann

Smithson, Mary
Cobb County

To Those Heretofore Paid.

1907.

No. 163

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO
Mrs Mary Smithson
OF
Cobb County,

Widow of C F Smithson
Co. C 41 Ga Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1/2 1907,
AND HANDED TO
C

Geo W. Harrison, State Printer, Atlanta.

Form No. 1

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Cobb } Personally comes Mrs. Mary Smithson

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since. That she is the Widow of E. D. Smithson who was a soldier in Company C of the 44 Ga Regiment of Volounteers, that he enlisted in said regiment on or about the month of 186__, and served in the Army up to 186__. That he lost his life on the day of 18__. (*State here particulars of the husband's death, when, where and from what cause.*)

Died of Disease Contracted

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

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

Sworn to and subscribed before me this day of 1907.
, Ordinary.

mrs Mary Smithson
Post Office Acworth Ga

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

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

{ Official Seal }

Ordinary of County.

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

Georgia
Fulton County } In person Came before me the undersigned Ordinary in and for the County of Fulton Mrs Mary Smithson Claimant and widow of Edwd F Smithson deceased. And Jefferson Cain and Elizabeth J Cain all of whom says on oath that they knew the said Edwd F Smithson, before and at the time he enlisted in the Confederate service on or about the 1st day of March 1862 and that at the time he enlisted he was sound in health and had no Symptoms of the disease of Tuberculosis or Consumption

That said disease was not inherited in his case but had its Origin in the Spell of Pneumonia he had in Mississippi and the exposures attending his service in the Spring of 1862. That none of his family died or was in any way affected with the disease. That his father lived to be Quite old and died of years

That his mother lived to the age of Eighty four Years and died of old age. He had two brothers and two Sisters One of his brothers now living and is Quite an old man, the other One died of Fever

Georgia
Cobb County } In person Came before me the undersigned Ordinary in and for said County Dr Augustus Smith who says under oath that he was family Physician of Edwd F Smithson after his return from the army and till his death in 1869.

That he had a thorough knowledge of Case Phthisis Pulmonalis and which gave way subjecting to frequent Cases of fever and which was the Cause of his death. Sworn to before me this 10th day of Feb 1893

A Smith MD

J M Elsom Ordy
Cobb Co Ga.

In addition to the foregoing affidavit I do hereby certify that Edward F Smithson died on or about the 18th day of May 1869 from Tuberculosis or Consumption which was brought by reason of his exposures in the service of the Confederacy. This Feb 25th 1893

A Smith MD

during an epidemic of that disease in 1854 One of his sisters died of Cancer when she was about 67 or 68 years old, the other one lived to be about Eighty years old and died suddenly. The witnesses are much positive and emphatic that he died of the disease caused by the war. That he is the father of four children all of whom are sound and no symptom of hereditary disease.

Sworn to and subscribed before me this 7th 21st 1893 } Mary Smithson
EG Cair

W. L. Calhoun
Ordinary

Georgia Fulton County
I certify that the foregoing witnesses are truthful and entitled to full faith and credit. Given under my official signature and seal of office. February 21st 1893
W. L. Calhoun
Ordinary

FORM 32.

CERTIFICATE OF EXEMPTION FOR A DRAFTED PERSON ON ACCOUNT OF DISABILITY.

This is to certify, That Edmund Smithson, of [illegible] county, State of [illegible], having been drafted, and claiming exemption on account of disability, has been carefully examined, and is found to be unfit for military duty by reason of Developed Tuberculosis, and, in consequence thereof, he is exempt from service under the present draft.

[illegible]
Provost Marshal and President of Board of Enrollment.

[illegible]
Member of Board of Enrollment.

[illegible]
Surgeon of Board of Enrollment.

DATED at [illegible], this 29th day of [illegible], 1864

in 1854 One of his sisters died of Cancer when she was about 67 or 68 years old, the other one lived to be about Eighty years old and died suddenly. The witnesses are much positive and emphatic that he died of the disease caused by the war. That he is the father of four children all of whom are sound and no symptom of hereditary disease.

Sworn to and subscribed before me this Feb 21st 1893 } Mary Smithson
EG Cair

W. L. Calhoun
Ordinary

Georgia – Fulton County
I certify that the foregoing witnesses are truthful and entitled to full faith and credit. Given under my official signature and seal of office. February 21st 1893
W. L. Calhoun
Ordinary

FORM 32.

CERTIFICATE OF EXEMPTION FOR A DRAFTED PERSON ON ACCOUNT OF DISABILITY.

This is to certify, That Edmund Smithson of [illegible] county, State of [illegible], having been drafted, and claiming exemption on account of disability, has been carefully examined, and is found to be unfit for military duty by reason of Developed Tuberculosis, and, in consequence thereof, he is exempt from service under the present draft.

[illegible]
Provost Marshal, and President of Board of Enrollment.

[illegible]
Member of Board of Enrollment.

[illegible]
Surgeon of Board of Enrollment.

DATED at [illegible], this 29th day of [illegible], 1864.

BAD COPY***OR***LIGHT PRINT

BAD COPY***OR**LIGHT PRINT

SURGEON'S CERTIFICATE OF EXEMPTION.

Carterville, Ma., [illegible], 186 .

[illegible] Conscript from.....

State of..... [illegible] examined by us, is hereby declared

to be exempt [illegible] military duty on account [illegible]

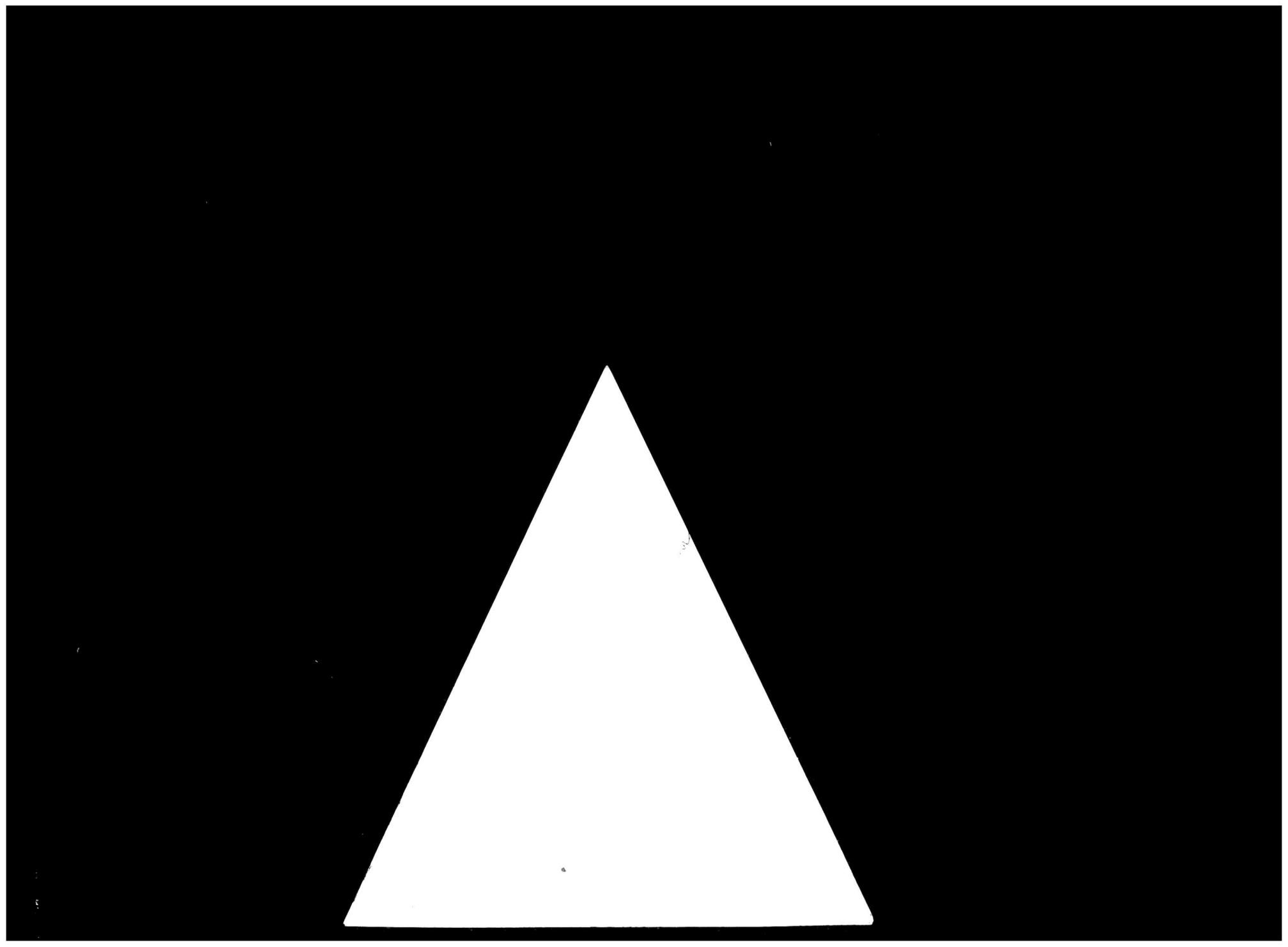
We furthermore declare this disability [illegible] and that the said

[illegible] be liable to further examination

(unless specially ordered by the Examining Board.)

[illegible]

P. A. C. S., Board of Examination 10th Cong. District



Snellgrove, Elizabeth
Amended July
24th 1902.

No.
Died May 29 - 1902

WIDOW'S
Indigent Pension.
1901.

Name Elizabeth Snellgrove
County Cobb Co
Widow of R H Snellgrove

Approved 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

1901.

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

3/7/01 4/19/02

Office Comm of Pension
3/29 - 1901

All widows, must be sworn to before the Ordy of the County of Witness residence, & by the Ordinary Certified under the seal of his Court before it can be considered here

J W Lindsey
Comm of Pension

POWER OF ATTORNEY.

STATE OF GEORGIA.

_____ ***County.***

I, _____ hereby authorize _____

of _____ County, to receive and receipt for the pension allowed and that he remit the same to me at _____ by his check or registered mail.

Witness my hand this _____ day of _____ 190__

Executed in presence of

_____ Ordinary, _____ L. S.

_____ County.

SEAL

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

I, hereby authorize

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

Witness my hand this day of 190

Executed in presence of

Ordinary,

County.

L. S.

SEAL

Spellings Elizabeth
Applicant for
2nd Feb 1902.

No. Paid May 29 1902

WIDOW'S

Indigent Pension.

1901.

Name Elizabeth Sullyard

County Cobb Co

Widow of W H Sullyard

Approved 1901.

JOHN W. LINDSEY, Commissioner of Pensions.

WARRANT HANDED TO 1901

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

4/29/02

3/7/01

Oppin Comm of Penn
[illegible]
1911 continues to draw
same in Ogeechee Co only
of the County of Chatham
Pension, by the Ordinary
Certificate issuing from
Court of Ord in Ogeechee
upon her
usual fee
W H Lindsey
Cain & Pond

Questions for Applicant.

STATE OF GEORGIA,

Cobb County.

Elisebeth Sullygrove of said State and County, desiring to avail herself of the Pension allowed to Indigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (*Give State, County and Post Office.*) Elisebeth Sullygrove Cobb Co Ga
2. How long and since when have you been a resident of this State? all my life
3. When and where were you born? July 1837 in Jackson Co Ga
4. When and where was your husband born—state his full name, and when were you and he married? Mar 14. 1855 Hall Co Ga. Robert Leycket Sullygrove
5. When and where, and in what Company and Regiment did your husband enlist or serve during the war between the States? March 1862 Moultrie Ga. in Co B. 43rd Ga Vols
6. How long did your husband serve in said Company and Regiment? Three Years
7. When and where did your husband's Company and Regiment surrender and was discharged? I do not know
8. Was your husband present at the time and place when his Company and Regiment surrendered? He was not
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? He was taken during the Siege of Atlanta and was coming back with the but I do not know or remember what for.
10. When and where did your husband die? 1894 - In Chrokee Co Ga
11. Which of the following grounds do you base your application for Pension, viz: First—Age and Poverty; Second—Infirmity and Poverty, or Third—Blindness and Poverty? Age Infirmity and Poverty
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon the third, state whether you are totally blind, and when and where you lost your sight. I have for several Yrs but for 2 Yrs have been under treatment of Physician regular for past 2 years
13. What has been your occupation since your husband's death? Picking Cotton hoeing Washing as long as I was able
14. How much can you earn gross, by your own exertion or labor? nothing
15. What property, real or personal, or income do you have or possess, and its gross value? None
16. What property, real or personal, did you possess at death of husband or he left you, and of the year 1899–1900, and what disposition, if any, by sale or gift, have you made of the same? None
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation? Cobb Co
18. How have you been supported since death of husband, and especially for 1899 and 1900? By being such labor as I could as long as I could but for
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? Sixty or Fifty dollars I would think nothing
20. What was your employment during 1899 and 1900—how much did you receive for each year? Nothing I was not able
21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property? I live with my son and Daughter
22. Have you ever made an application for pension before? Yes
23. How many applications have you made for a Pension, and under what class? One

Sworn to and subscribed before me this 17 day of Feb 1901

John Awtrey Ordinary,

of Cobb County.

Elisebeth her x Sullygrove mark

I was born in Jackson Co Ga

Questions for Witnesses.

STATE OF GEORGIA, Cobb County.

S H Sargent of said State and County, having been presented as a witness in support of the Application of Mrs. Elisabeth Snellgrove for a Pension under the Act of 1900, and after having been duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? S. H. Sargent. I reside in Cobb County, Ga.
2. Are you acquainted with the applicant, Mrs. Elisabeth Snellgrove? Yes.
If so, how long have you known her? Ever since she was a Child.
3. Where does she reside, and how long and since when has she been a resident of this State? She resides in Marietta, Cobb County. Has lived in this State all her life.
4. When and where was she born? She was born in Jackson about about 1841.
5. Were you ever acquainted with her husband? Yes Sir.
6. Where did he reside in 1861? In Cherokee County, Ga.
7. When and to whom was he married? He was married to the applicant in 1857 or 1857.
8. When and where was he born? He was born in Hall County. Dont know the date.
9. How long have you known him? Ever since he was a little boy.
10. When and where did Robert H. Snellgrove enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this? He enlisted in Cherokee County, May 1862, Co. B. 43rd Regt. Ga. Vols.
11. Were you a member of the same Company and Regiment? Yes Sir.
12. How long did he perform regular military duty? About three years.
13. When and where was his Company and Regiment surrendered and discharged from service? Near Raleigh N.C. May 1865, with Johnson's Army.
14. Were you with the command when it surrendered? Yes Sir.
15. Was Robert H. Snellgrove the husband of applicant present? No.
16. If not present, where was he? I dont know
17. When and where did he leave his Command? I dont know
For what cause? Dont know
By whose authority he left? Dont know
How do you know all this? (State fully and clearly.)
18. When and where did Robert H. Snellgrove die? In Cherokee County, Ga. In 1894
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? In Cherokee County, Ga. Had resided in State all his life.
20. Do you of your own knowledge know that applicant is the lawful widow of Robert H. Snellgrove? Yes Sir.
21. Has she remained unmarried since her soldier husband's death, and is now his widow? Yes.
22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? She has but very little. Just a little household & kitchen furniture. I know it by being acquainted with her affairs.
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? She had about what she has now.
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to whom? She has not that I know of
25. What is applicant's physical condition and her chances and ability to earn a support? Quite bad.
26. Is applicant able to earn a support at labor of any sort, if not why? I dont think she is able, on account of disability.
27. How was she supported for 1899 and 1900? By her son.
28. How much did applicant contribute to her support for last two years? Very little
29. Give a full and complete statement of applicant's physical condition? She is nearly always sick, and not able to work.
30. What interest have you in the recovery of this pension by the applicant? Not any.

Sworn to and subscribed before me this 11th day of Feby 1901
John Awtry Ordinary,
Cobb County.

S. H. his x mark Sargent
Witnesses.

Affidavits of Physicians.

STATE OF GEORGIA, County.

Personally before me comes John H Simpson and W M Kemp both known to me to be reputable physicians of said county, who, being severally sworn, say on oath that they have examined carefully Mrs. Elizabeth Snellgrove applicant for a Pension under Act of 1900, and after such personal examination say that her physical condition is this 63 years old & from age & chronic indigestion is not able to make a living

and we have no interest in said pension if allowed.

Sworn to and subscribed before me this 15 day of March 1901
John Awtry Ordinary,
Cobb County.

John H Simpson M.D.
W. M. Kemp M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, Cobb County.

I, John Awtry, Ordinary in and for said county, hereby certify that the applicant, Mrs. Elisabeth Snellgrove resides in said county, and has been a bona fide resident of this State since day of 18____, and that the witnesses, Mr. S H Sargent are of trustworthy character, and that their statements are entitled to full faith and credit.

I do further certify that before answering the foregoing questions, the applicant and said witnesses took the oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses *before the same was signed and subscribed.*

I further certify that the tax digest of Cobb county shows that applicant returned for taxation in her own name in 1899 Nothing dollars worth of property, and in 1900 Nothing dollars worth of property.

Witness my hand and official seal, this 16 day of March 1901

{SEAL}

John Awtry Ordinary,
Cobb County.

NOTES—1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth; So help you God."
2. Additional affidavits may be attached, if blank spaces are insufficient.
3. All affidavits must be made before Ordinary.
4. Only widows who were the wives of the dead husbands while they were soldiers need apply—and are now widows. Those married since 26th April, 1865, not entitled.
5. ..... Witnesses and two Physicians are necessary to make out claims.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Elizabeth Snellgrove, hereby authorize
John Newby of Cobb County
to receive and receipt for the pension paid hereon, and request that he remit same to
at

In Witness Whereof, I have hereunto set my hand and seal, this 3rd
day of January 1903.

her
Elizabeth Snellgrove [L. S.]
mark

Executed in the presence of

Snellgrove, Elizabeth
Cobb County

To Those Heretofore Paid.

1903.

No. 166

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO
Mrs. Elizabeth Snellgrove
OF
Cobb County,
Widow of Robert Snellgrove
Co. B 43rd Ga. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
1903
AND HANDED TO

GEO. W. HARRISON, STATE PRINTER & BINDER, GA.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Elizabeth Snellgrove, hereby authorize
John Newby of
to receive and receipt for the pension paid hereon, and request that he remit same to
at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2
day of Jan 1904.

her
Elizabeth Snellgrove [L. S.]
mark

Executed in presence of
J M Gann

Snellgrove, Elizabeth
Cobb County

TO THOSE HERETOFORE PAID.

1904.

No. 218

INDIGENT
WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904.

PAID TO
Mrs Elizabeth Snellgrove
OF
Cobb County,
Widow of Pvt Snellgrove
Co. B 43 Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
JAN 25 1904,
AND HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

FORM No. 1.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Cobb

PERSONALLY COMES MRS. Elizabeth Snellgrove

who, being sworn, says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since All her life. That she is the Widow of Robert Snellgrove who was a soldier in Company B of the 4 Ga Regiment of Ga. Volunteers, that he enlisted in said regiment on or about the month of May 186 2, and served in the Army up to 186 5. That he died on the 30th day of August 1894 from age, infirmity & poverty she is unable to support herself

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 58

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1903.

Sworn to and subscribed before me, this 2nd day of Jany 1903. John Autry, Ordinary.

her
Elizabeth X Snellgrove
mark
Post Office Marietta, Ga.

State of Georgia, Cobb County.

I, John Autry Ordinary of said County, certify that I am well acquainted with Mrs Elizabeth Snellgrove, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 185 day of Janay 1900.

Given under my official signature and seal, this the 2nd day of Jany 1903.

John Autry
Ordinary of Cobb County.

{Official Seal}

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

FORM No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of Cobb

PERSONALLY COMES MRS. Elisabeth Snellgrove

who, being sworn, says on oath that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since All her life. That she is the Widow of Robert Snellgrove who was a soldier in Company B of the 43 Ga Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of May 186 2, and served in the Army up to 186 5. That he died on the 30 day of August 1894 Age Infirmity and Poverty She is unable to Support Himself

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1858

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1904.

Sworn to and subscribed before me, this 2 day of Jany 1904. John Autry, Ordinary.

her
Elisabeth X Snellgrove
mark
Post Office
Sworn

State of Georgia, Cobb County.

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

Given under my official signature and seal, this the 2 day of Jany 1904.

John Autry
Ordinary of Cobb County

{Official Seal}

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Elizabeth Snellgrove, hereby authorize John Awkey of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this 3 day of Jany 1905.

Elizabeth her X mark Snellgrove [L. S.]

Executed in presence of
N. Dame

To Those Heretofore Paid.

1905.

No. 2251

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO Mrs. Elizabeth Snellgrove OF Cobb County,

Widow of _____ Co. _____ Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED JAN 23 1905.

AND HANDED TO _____

THE FRANKLIN PRINTING AND PUBLISHING CO. ATLANTA.
GEO. W. HARRISON, MANAGER, FOR STATE PRINTER.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, Elizabeth Snellgrove, hereby authorize John Awkey of Marietta, Ga. to receive and receipt for the pension paid hereon, and request that he remit same to _____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this 11 day of January 1906.

Elizabeth her X mark Snellgrove [L. S.]

Executed in presence of _____

Snellgrove, Elizabeth
Cobb Co.

To Those Heretofore Paid.

1906.

No. 228

INDIGENT WIDOW'S PENSION,

For year ending Dec. 31, 1906.

PAID TO Mrs. Elizabeth Snellgrove OF Cobb County,

Widow of N H Snellgrove Co. B 43 Ga. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED 1/22 1906,

AND HANDED TO Ody

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

Form No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } Personally comes Mrs. Elisabeth Smallgroove

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb State of Georgia, and that she has RESIDED in said State continuously ever since . That she is the Widow of Robert Smallgroove who was a soldier in Company B of the 43 Regiment of G Volunteers, that he enlisted in said regiment on or about the month of 186 and served in the Army up to 186 That he died on the day of 18

Age Infirmity & Poverty

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18 68

I have been allowed an Indigent pension as a resident of Cobb County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905

Sworn to and subscribed before me, this 3 day of January 1905. John Dudley, Ordinary. } her Elisabeth X Smallgroove mark

Post Office

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

Given under my official signature and seal, this the 3 day of January 1905.

{ Official Seal. } John Dudley Ordinary of Cobb County.

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

Form No. 2.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Cobb } **Personally comes Mrs.** Elizabeth Smallgroove

who, being sworn says on oath, that she is a bona fide resident of said County of Cobb **State of Georgia, and that she has RESIDED in said State continuously ever since** all her life **That she is the Widow of** R H Smallgroove **who was a soldier in Company** B **of the** 43rd **Regiment of** Ga. **Volunteers, that he enlisted in said regiment on or about the month of** 186 2, **and served in the Army up to** April 186 5 **That he died on the** 30th **day of** Sept. 1895.

Age, Infirmity & Poverty

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

I have been allowed an Indigent pension as a resident of Cobb **County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.**

Sworn to and subscribed before me this 4th **day of** Jany **1906.** John Dudley, **Ordinary.** } her Elizabeth X Smallgroove mark

Post Office

State of Georgia, Cobb County. } **I,** John Dudley **Ordinary of said County, certify that I am well acquainted with Mrs.** Elizabeth, **who made the above affidavit, and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the** 1 **day of** Jany. **18**94

Given under my official signature and seal, this the 20 **day of** Jany **1906.**

{ Official Seal } John Dudley **Ordinary of** Cobb **County.**

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

Amendment . Feby 24/1902

Georgia
Cherokee County } Personly appeared before me M S Paden who being duly sworn deposeth and saeth that Robert Snelgrove enlisted in company B 45th Regt Ga Vol in May 1862 and made a good soldier, untill he was taken a prisoner during the siege around Atlanta Ga, was carried north & I heard no more of him untill the war closed. Sworn to and subscribed M. S. Paden before me this Feb 24 1902 Lieut Co B 45 Regt Ga V

A. C. Cowan Ordry

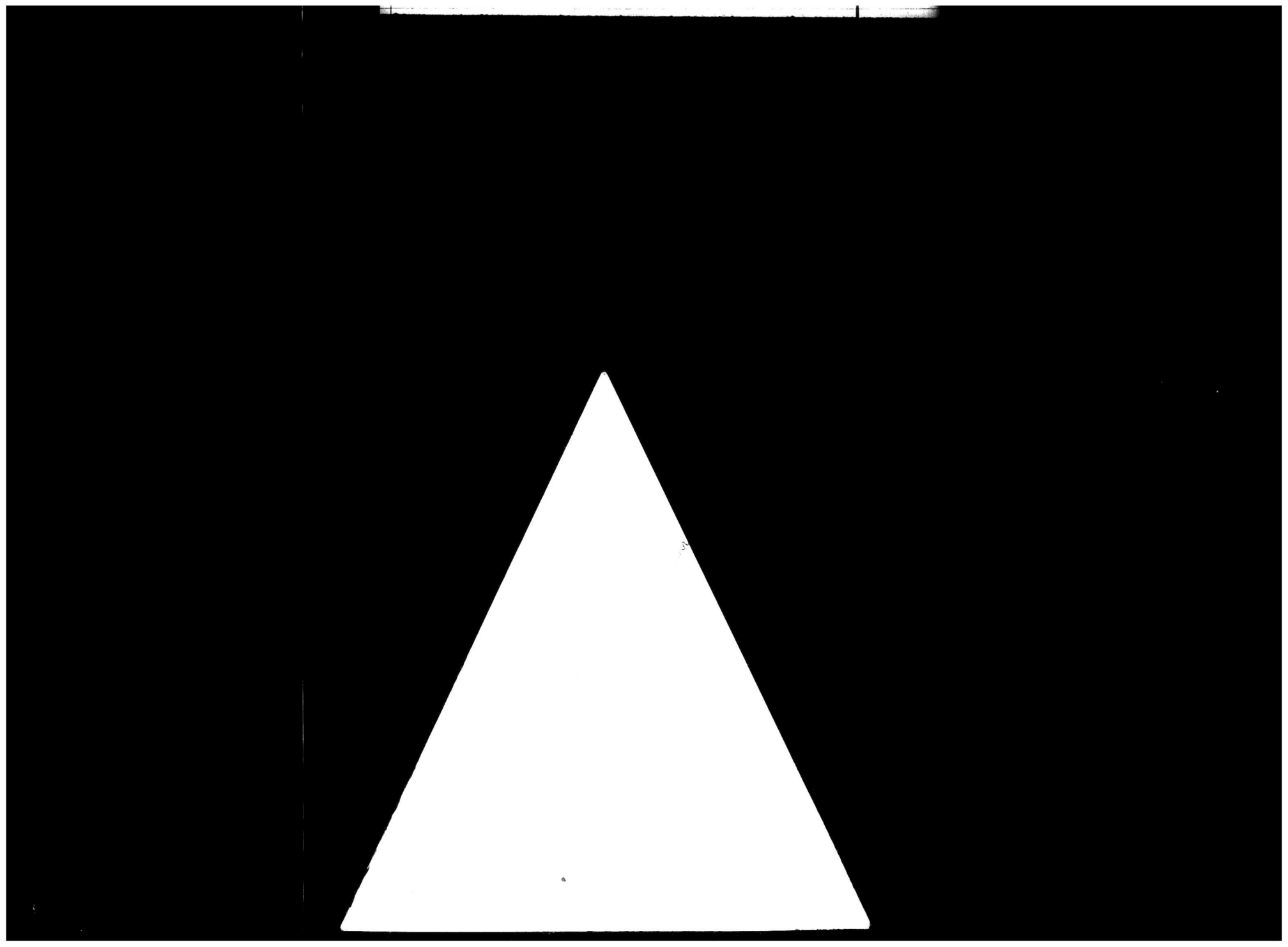
Cherokee County Ga

Georgia Cherokee County

A. C. Cowan Ordry in and for said County certifies that M. S. Paden is a citizen of this County of trustworthy character whose statements is entitled to full faith and credit

Given under my hand and official seal Feby 24" 1902

A. C. Cowan
Ordry



Soosebee, H. J. Cobb Co
To or From Chandlee 1903.
Soosebee

CODE SECTION 1254.

(FOR THOSE ALREADY ENROLLED.)

To Cobb 1904

No. 723

INDIGENT
SOLDIER'S PENSION
1904.

Name H. J. Sooseby

County Cobb

Co. E Regiment 23

WARRANT ISSUED

1/23 1904.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Only

Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, H. J. Sooseby hereby authorize John Sutton of

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

at

by

WITNESS my hand and seal, this 12 day of Jan 1904.

H. J. Sooseby [L. S.]

Executed in the presence of

[illegible]

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears W J Sossebee of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is 69 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 4 yrs in Company E, of 23 th Regiment of Ga Vols; that his physical condition is as follows: Owing to age and Infirmity I am

that his property consists of the following items: Nothing

of the value of ____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cherokee County been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 2 day of January 1904. W J Sossebee Mark

____ Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 12 day of Jan 1904.

John Arthur

Affix your Seal here

Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, H. J. Sosebee hereby authorize John Awtrey of Marietta, Ga.

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

by _____

WITNESS my hand and seal, this 9th day of January 1905.

H. J. Sosebee [L. S.]
his X mark

Executed in the presence of

Sosebee, H. J.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 773

INDIGENT
SOLDIER'S PENSION
1905.

Name H. J. Sosebee
County Cobb
Co. 23 Regiment Ga.
Pals.

WARRANT ISSUED
1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, H. J. Sosebee hereby authorize John Awtrey of _____

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

by _____

WITNESS my hand and seal, this 8 day of Jany 1906.

H. J. Sosebee [L. S.]
his X mark

Executed in the presence of

J. M. Gann

Sosebee, H. J.
Cobb County

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 776

INDIGENT
SOLDIER'S PENSION
1906.

Name H. J. Sosebee
County Cobb
Co. 6 Regiment 23

WARRANT ISSUED
1/22 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Lady

THE FRANKLIN PRINTING AND PUBLISHING CO., GEO. W. HARRISON, MGR.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears H. J. Gosebee of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 1835; that he is 69 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of 4 years in Company E, of 23rd Regiment of Ga. Vols; that his physical condition is as follows: on acct of age infirmity & poverty he is unable to support himself

that his property consists of the following items: Nothing

of the value of ____ Dollars. I am now earning, by my labor, Nothing Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 9 day of January 1905.

H J his x Gosebee Mark

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 14 day of Jany 1905.

John Awtrey
Ordinary Cobb County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears H J Gosely of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ____ day of ____ 18__; that he is ____ years old and by occupation a ____, that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served for the term of ____ in Company E, of 23rd Regiment of Vols; that his physical condition is as follows: age infirmity & poverty

that his property consists of the following items: ____

of the value of ____ Dollars. I am now earning by my labor, ____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 3 day of Jany 1906.

H J his x Gosely Mark

John Awtrey Ordinary.

State of Georgia,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with H J Gosely 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 3 day of Jany 1906.

John Awtrey
Ordinary Cobb County.

Affix your seal here

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Coos COUNTY.

I, H. J. Sosebey, hereby authorize John Mutney of

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

at

by

WITNESS my hand and seal, this 15 day of Jany 1907.

H. J. Sosebey [L. S.]
Mark

Executed in presence of

Sosebee, H. J.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 666

INDIGENT
SOLDIER'S PENSION
1907.

Name H. J. Sosebey
County Coos
Co. E 23 Regiment Ga.
vols.

WARRANT ISSUED

JAN 21 1907.
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,
Cobb County.

Personally appears H J Soseby of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the ..... day of ..... 18.....; that he is ..... years old and by occupation a ....., that he enlisted in the military service of the Confederate States (or of the State of .....) during the war between the States, and served for the term of ..... in Company E, of 23 th Regiment of Ga Vol Inf; that his physical condition is as follows: age Infirmity & poverty

that his property consists of the following items: .....

of the value of Nothing Dollars. I am now earning by my labor, ... Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 15 day of Jany 1907.

H J his X mark Soseby

John Dwtery Ordinary.

State of Georgia,
Cobb County.

I, John Dwtery Ordinary of said County, do certify that I am well acquainted with H J Soseby 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 January 1907.

John Dwtery
Ordinary Cobb County.

Affix your seal here

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

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the laws granting allowances to disabled soldiers, as well as the rules adopted by the 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.

Spicer, James
Cobb Co

No. 2340

APPLICATION FOR ALLOWANCE

FOR

Total Deafness

Applicant, James Spicer

County Cobb

Amount 30

Date of Warrant June 1

Entered on record June 1 1889

W. H. Wood
SECRETARY EXECUTIVE DEPARTMENT.

A. C. Irvin

South Carolina } I certify that H. E.
Edgefield Co. } Vansent whose affidavit appears in this application is a person of respectability, and that his statements are worthy of credit & belief. Witness my hand & Official seal this 27 day of May 89.

J. C. Williams
Clk C.C.P.&G.

Seal

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.

Spicer, [illegible]

No. 2346

APPLICATION FOR ALLOWANCE

FOR

Total Deafness

Applicant, James Spicer

County Cobb

Amount 30.

Date of Warrant June 1

Entered on record June 1 1889

[illegible]

SECRETARY EXECUTIVE DEPARTMENT.

[illegible]

South Carolina } I certify that H. E.
Edgefield Co. } Vansent whose affidavit appears in this application is a person of respectability, and that his statements are worthy of credit & belief. Witness my hand & Official seal this 27 day of May 1889.

J. C. Williams
Clk C.C.P.&G.S.

Seal

For Use of Applicants Who Have not Heretofore Drawn.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears James Spicer of Cobb 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 First day of January 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 19 th Regiment of South Carolina Volunteers Manning's Brigade; that whilst engaged in such military service, at the battle of Atlanta in the State of Georgia, on the 22 day of July 1864, he was wounded as follows: By a minnie ball striking just behind left ear & entering head, and ranging around back of the head towards right ear, by means of which wound deponent was rendered totally deaf, and is permanently so which permanently disables him for the ordinary pursuits of life

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

Sworn to and subscribed before me, this the 25th day of Feby. 1889

James Spicer

J. M. Stone Ordny

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~~ South Carolina,
Edgefield County.

PERSONALLY came before me H. E. Vansent of the county of Edgefield State of ~~Georgia~~ South Carolina, who, being duly sworn, says that he was a commissioned officer in Company D, of 19 Regiment of S. Carolina Volunteers, and that deponent knows James Spicer, 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 James Spicer as stated by him in said affidavit. Deponent further states that said is a *bona fide* citizen of this State and resides in county.

J. C. Williams
Clk C.C.P.&G.S.

H. E. Vansent

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,
County.

PERSONALLY came

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

Sworn to and subscribed before me, this
day of 188

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

STATE OF GEORGIA,
Cobb County.

PERSONALLY comes before me John M. Stone Ordinary of said county, E. J. Seitz M.D. and N. N. Gober., both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined James Spicer and after such examination say that the applicant has been injured as follows:

Sworn to and subscribed before me, this
day of 188

E. J. Seitz M.D.

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,
Cobb County.

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

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

Given under my official signature and seal, this day of 188

Ordinary County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

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

In witness whereof I have hereunto set my hand and seal, this day of 188

(L. S.)

Executed in the presence of us:

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said county, do certify that I am well acquainted with James Spicer 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 13th day of Feby, 1890

J. M. Stone
Ordinary Cobb County.

Cobb Co
Spicer, James

1890.

No. 1170

APPLICATION FOR ALLOWANCE.

FOR THE RESIDUE OCTOBER 26, 1890.

—FOR—

Art Loss of Hearing

Applicant, James Spicer

County, Cobb

Amount, 30

Date of warrant, Feb 14

Entered on record Feb 14 1890

W. H. Harrison
Secretary Executive Department.

WARRANT HANDED TO

R. C. Irwin

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with James Spicer 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 16th day of Feby 1891.

J. M. Stone
Ordinary Cobb County.

Spicer, James
Cobb

1891

Spicer, James
Cobb Co

AUG 1891, 1890

No. 1339

Application for Allowance

FOR THE RESIDUE OCTOBER 26, 1891.

FOR

Loss of Hearing

Applicant, James Spicer

County, Cobb

Amount, $30

Date of Warrant, 2/20

Entered on record 2/20 1891

W. H. H.
Secretary Executive Department.

WARRANT HANDED TO

R. C. Irwin

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

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears James Spicer of Cobb 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 April 1871, 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 19 th Regiment of S.C. Volunteers Manigold's Brigade; that whilst engaged in such military service, at the battle of Atlanta in the State of Ga. on the 22nd day of July 1864, he was wounded as follows: By Bullet striking left side of head, fracturing the head, and so affecting the ears that deponent has entirely lost his hearing in both ears — thereby causing an entire loss of hearing

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 (30) Thirty dollars.

Sworn to and subscribed before me, this the 13th day of Feby 1890

J. M. Stone Ordny. James Spicer

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
Cobb County.

KNOW ALL MEN BY THESE PRESENTS, That I, James Spicer of Cobb county, in said State do hereby appoint R. C. Irwin of Cobb Co 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 13th day of Feby 1890

James Spicer [L. S.]

Executed in the presence of us:
J. M. Stone
W. R. Power

DIRECTION.

Send money to me as follows, by

to P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears James Spicer of Cobb 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 Feby 1872; 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 19 th Regiment of S.C. Volunteers Manigold's Brigade; that whilst engaged in such military service at the battle of Atlanta in the State of Ga. on the 22nd day of July 1864, he was wounded as follows: By Minnie Ball striking the head on the left side near the ear fracturing the skull, and tearing the head about the ear. On account of said wound deponent lost his hearing in both ears, and is thereby deaf in both ears.

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 $30. dollars, for said disability

Sworn to and subscribed before me, this the 13th day of Feby 1891.

James Spicer

J. M. Stone Ordny.

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,
Cobb County.

Know all Men by these Presents, That I, James Spicer of Cobb County, State of Georgia, do hereby appoint R. C. Irwin of Cobb County 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 16th day of Feby 1891.

James Spicer [L. S.]

Executed in the presence of us:
J. M. Stone
W. R. Power

DIRECTION.

Send money to me as follows, by

to P. O.

County, Georgia.

STATE OF GEORGIA,

Cobb County.

I, J. M. Stone Ordinary of said county, do certify that I am well acquainted with James Spicer 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 repesents himself to be, and that he resides in this county.

Given under my official signature and seal, this 1st day of March 1893.

J. M. Stone

Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Cobb County.

Know all Men by these Presents, That I James Spicer of Cobb County County, State of Georgia, do hereby appoint Kelly Irwin of Cobb County 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 20th day of March 1893.

his James X Spicer [L. S.]
mark

Executed in the presence of us:

J. M. Stone
Ordny.

DIRECTION.

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

_____ County, Georgia.

Cobb Co.
Spicer, James
No. 7 B.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 26, 1892.

Name [illegible]

County Cobb

Disability Deafness

Amount, $ 30.

Entered on record March 1892.

W. H. HARRISON,
Secretary of Executive Department.

AGENT.

R. C. Irwin

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

Spicer, James
Cobb Co.

1893.

No. 622

Application for Allowance

For the Year Ending October 26, 1893.

FOR

Deaf

Applicant, James Spicer

County, Cobb

Amount, 30

Date of Warrant, 3/4 1/2

Entered on record, 1893.

W. H. H.

Secretary Executive Department.

WARRANT HANDED TO

R. C. Irwin

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
[illegible] County. }

PERSONALLY appears [illegible] of [illegible] County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously since the day of 18[illegible] 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 [illegible] of [illegible] th Regiment of [illegible] Volunteers Manigold 's Brigade; that whilst engaged in such military service at the battle of [illegible] in the State of Georgia, on the 22 day of July 1864, he was wounded as follows: I received a shot striking the left side of the head Hip. the ball [illegible] passing out behind the left ear causing total deafness in said ear and [illegible] Mastoid Process

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 $30, Dollars for total deafness

Sworn to and subscribed before me this [illegible] day of March 1892. James Spicer

[illegible] 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, }
[illegible] County. }

Know all Men by these Presents, That I, James Spicer of [illegible] County, in said State, do hereby appoint [illegible] of [illegible] 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 [illegible] day of March 1892.

James Spicer [L.S.]

Executed in the presence of us

[illegible]

DIRECTION.

Send money to me as follows, by

to P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears James Spicer of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of Dec, 1871, 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 19th Regiment of [illegible] Volunteers Manigold 's Brigade; that whilst engaged in such military service at the battle of Atlanta in the State of Ga on the 22nd day of July 1864, he was wounded as follows: By gunshot striking the left temple near the ear By and on account of said wound the ears were so affected that it resulted in a total loss of hearing

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1893. I have heretofore been allowed a pension of $30 dollars, for Said deafness

Sworn to and subscribed before me, this, the 20 day of March 1893. James Spicer mbk

Jno Stone Ordy

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, }
Cobb County. }

I, Jno Stone Ordinary of said County, do certify that I am well acquainted with James Spicer 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 [illegible] before whom the foregoing affidavits were made and power of attorney was signed, is a [illegible] of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 20 day of March 1893.

Jno Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb COUNTY.

Know all Men by these Presents, That I, James Spicer of Cobb County, State of Georgia, do hereby appoint R. C. Irwin of Marietta 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 28th day of Mch. 1895

James Spicer [L. S.]

Executed in the presence of us

J. M. Stone
Ordy

DIRECTIONS.

Send money to me as follows, by

to P. O.

County, Georgia.

POWER OF ATTORNEY.

STATE OF GEORGIA, Cobb County.

I, Jas. Spicer hereby authorize R. C. Irwin Marietta Ga.

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 28th day of Feby 1896.

James Spicer [L. S.]

Executed in presence of us

J. M. Stone
Ordy

Spicer, James
Cobb Co
(For Those Already Enrolled.)

No. 145.

Soldier's Pension.

1894.

Name Jas. Spicer
County Cobb
Disability Deafness
Amount, $ 30
3/4 1894.

W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO
R. C. Irwin

Geo. W. Harrison, State Printer, Atlanta.

No data

Spicer, James
Cobb Co
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)

No. 1427

SOLDIER'S PENSION.

1896.

Name James Spicer
County Cobb
Disability Deafness
Amount, $ 30.
3/2 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
R. C. Irwin

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears James Spicer of Cobb 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 1870; 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 19th Regiment of S.C. Volunteers Manigolds's Brigade; that whilst engaged in such military service at the battle of Atlanta in the State of Ga., on the 27th day of July 1864, he was wounded as follows: By shot striking the left side of the head near the ear entering the head — the said wound causing entire deafness.

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 30. dollars, for the year 1894

Sworn to and subscribed before me, this, the 28th day of Mch 1894 } James Spicer
J. M. Stone Ordy

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.

Drew pension for 1894 from Fulton County.

STATE OF GEORGIA, }
Cobb County. }

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with Jas. Spicer 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 28th day of Mch 1894

Affix your seal here

J. M. Stone
Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

Personally appears Jas. Spicer of Cobb 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 1872 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 19th Regiment of S.C. Volunteers, Manigolds's Brigade; that whilst engaged in such military service in the State of Ga., on the 27th day of July 1864 he was wounded, injured or diseased as follows: By bullet striking in the left ear causing him to loose the hearing in both ears.

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 Cobb county been allowed a pension of $30. dollars, for the year 1895.

Sworn to and subscribed before me, this, the 28th day of Feby. 1896. } James Spicer
J. M. Stone Ordy

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, }
Cobb County. }

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with Jas. Spicer 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 28th day of Feby 1896.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Jas. Spicer hereby authorize J. M. Stone of Marietta Ga.

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

at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22nd day of Feby. 1897.

James his x mark Spicer [L. S.]

Executed in presence of

[illegible]

Spicer James
Cobb Co

ACT OF 24 OCT., 1887.

(For Those Already Enrolled.)

No. 2449

INVALID
SOLDIER'S PENSION.
1897.

Name James Spicer
County Cobb
Disability Dropness
Amount, $ 30.
2/25 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Geo S

GEO. W. HARRISON, STATE PRINTER, AT ANTA.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, James Spicer hereby authorize R. C. ~~J. M.~~ Irwin of Marietta, Ga.

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

at Marietta, Ga.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 22nd day of Feby. 1898.

James Spicer [L. S.]

Executed in presence of
G. J. Hamby

Spicer James
Cobb Co

ACT OF 24 OCT., 1887.

(For Those Already Enrolled.)

No. 2862

INVALID
SOLDIER'S PENSION.
1898.

Name James Spicer
County Cobb
Disability Wound
Amount, $ 30.
2/24 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
R. C. I

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb **County.**

Personally appeared James Spicer of Cobb 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 187[illegible]; 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 [illegible]th Regiment of [illegible] Volunteers, [illegible]'s Brigade; that whilst engaged in such military service in the State of Ga., on the 22nd day of July 1864, he was wounded, injured or diseased of follows: By gunshot striking the left ear and causing deafness to become fixed. He is totally deaf.

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 Cobb county been allowed an invalid pension of $30. Dollars, for the year 1896.

Sworn to and subscribed before me, this the 22nd day of July 1897. James Spicer POST OFFICE Smyrna Ga.

J. W. Stone Ord

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

STATE OF GEORGIA,

Cobb **County.**

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

Given under my official signature and seal, this 22nd day of July, 1897.

Affix your seal here.

J. W. Stone Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Cobb **County.**

Personally appeared James Spicer of Cobb 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 since 1873; 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 12th Regiment of S. C. Volunteers, Manigault's Brigade; that whilst engaged in such military service in the State of Ga., on the 22nd day of July 1864, he was wounded, injured or diseased as follows: By gun shot wound left ear first above the ear, and rendering applicant practically incompetent to pursue the manual avocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Cobb county been allowed an invalid pension of $30. Dollars, for the year 1897.

Sworn to and subscribed before me, this the 22nd day of July 1898. James Spicer POST OFFICE Marietta Ga.

J. W. Stone Ord

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

STATE OF GEORGIA,

Cobb **County.**

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

Given under my official signature and seal, this 22nd day of July, 1898.

Affix your seal here.

J. W. Stone Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, Jas. Spicer hereby authorize J. M. Stone of Marietta Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 15 day of Feby, 1899.

James his X Spicer mark [L. S.]

Executed in presence of

(CODE SECTION 120.)
(For Those Already Enrolled.)
No. 3180

INVALID
SOLDIER'S PENSION.
1899.

Name James Spicer
County Cobb
Disability Deaf
Amount, $ 30.
Warrant issued Mch 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
J. M. S.

GEO. W. HARRISON, STATE PRINTER, ATLANTA

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, James Spicer hereby authorize J. M. Stone of Marietta, Ga. to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 26th day of February 1900.

his
James X Spicer mark [L. S.]

Executed in presence of
T. J. Hamby.

African, James
Cobb
CODE SECTION 120.
(For Those Already Enrolled.)
No. 1298

INVALID
SOLDIER'S PENSION.
1900.

Name James Spicer
County Cobb
Disability Ear
Amount, $ 30.
Warrant issued Mar 7 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Stone

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears James Spicer of Cobb 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 1837; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company D, of 19 th Regiment of S. C. Volunteers, Managore 's Brigade; that whilst engaged in such military service in the State of Ga., on the 22 day of July 1863, he was wounded, injured or diseased as follows:

By gun-shot striking left ear by which he is rendered totally deaf on account of the said wound

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 Cobb County been allowed an invalid pension of $30. Dollars, for the year 1898.

Sworn to and subscribed before me, this, the 15th day of Feby 1899. James X his Spicer mark
POST OFFICE Hardage P.O.

J. M. Stone

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,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with James Spicer 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 Feby 1899.

J. M. Stone
Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears James Spicer of Cobb 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 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 D, of 19 th Regiment of S. C. Volunteers, Managore 's Brigade; that whilst engaged in such military service in the State of Ga., on the 22nd day of July 1862, he was wounded, injured or diseased as follows:

By gunshot striking left ear by and on account of which wound applicant is rendered totally deaf

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 Cobb County been allowed an invalid pension of $30 Dollars, for the year 1899.

Sworn to and subscribed before me, this, the 26th day of February 1900. James X his Spicer mark
POST OFFICE Marietta, Ga.

J. M. Stone Ordy.

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,
Cobb County.

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

Given under my official signature and seal, this 26th day of February 1900.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I James Spicer hereby authorize
John Awtrey of Marietta
to receive and receipt for the pension paid hereon and request that he remit same to
me by hand
at his office

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 17th
day of Jany. 1901. James Spicer [L. S.]

Executed in presence of

Spicer, James
Cobb Co.

CODE SECTION 1250
(For Those Already Enrolled.)
No. 37[redacted]

DISABLED
SOLDIER'S PENSION.
1901.

Name James Spicer
County Cobb
Disability Orphans
Amount, $ 30.00

1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb, **County.**

Personally appears James S Spicer of Cobb 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 D, of 19 th Regiment of S. C. Volunteers, Mayagare's Brigade; that whilst engaged in such military service in the State of Ga, on the 22 day of July 1862, he was wounded, injured or diseased as follows:

By gun-shot striking left ear by which he is rendered totally deaf on account of the said wound

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 Cobb County been allowed an invalid pension of $30 Dollars, for the year 1900.

Sworn to and subscribed before me, this the 17th day of Jany 1901.

John Awtrey, Ordy.

Postoffice James S Spicer

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,
Cobb **County.**

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with James S Spicer 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 17th day of Jany 1901.

Affix your seal here

John Awtrey

Ordinary Cobb County.

Power of Attorney.

STATE OF GEORGIA,
Cobb County.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed, and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 1900.

_____ [L. S.]

Executed in presence of

Pension Office --6--25--1901.

Can not use affidavits in previous application as testimony in this case. Must prove every fact require in this application without regard to previous one.

J. W. Lindsey,
Com. Of Pensions.

L.

Cannot use affidavits in previous appl. as testimony in this case. Must prove every fact required in this appl. without regard to previous application.

Spicer, James - Cobb Co. Ga.
Dec. 4 Apl. 1901

No. _____

INDIGENT PENSION,

~~1900.~~
1901

Name James Spicer

County Cobb
Co. D. 19 - S.C.

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.
5/9-1901 - 4/15 - 1903

Questions for Applicant.

STATE OF GEORGIA,
Cobb County.

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

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

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

3. When and where were you born? Sherleston, S.C. 1814.

4. When and where and in what company and regiment did you enlist or serve? Co. D. 19th S.C.
Enlisted at Edgefield S.C. in 1861.

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

6. When and where was your company and regiment surrendered and discharged?
Columbus, Ga. think, I was not present, being in hospital at Atlanta

7. Were you present with your company and regiment when it was surrendered? No.

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was wounded in Battle of Atlanta, July 22nd 1864, and put in the hospital there, and stayed there until the surrender.

9. How much can you earn (gross) per annum by your own exertions or labor? Nothing at all.

10. What has been your occupation since 1865? Farming

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? 1st & 2nd

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I am in my 86th year and on account of age and growing infirmity am totally disabled from work of any kind, and have been for several years.

13. What property, real or personal, or income, do you possess, and its gross value?
Nothing but small amt. household goods.

14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? Nothing but small amt. household goods.

15. In what County did you reside during those years, and what property did you then return for taxation?
In Cobb County. Returned no taxes

16. How were you supported during the years 1899 and 1900? I drew a pension of thirty dollars for deafness as invalid pensioner, my wife worked some.

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? About fifty or sixty dollars.

18. What was your employment during 1899 and 1900? What pay did you receive in each year?
Nothing — Nothing

19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Myself and wife - Have no property of any kind except little household goods.

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

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

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

Every Question MUST be Answered.

Sworn to and subscribed before me this the 27th day of March 1900.

James Spicer
Applicant.

John Awtry, Ordinary,
of Cobb County.

(James Spicer)

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, }
Cobb COUNTY }

J W Franklin of said State and County, having been presented as a witness in support of the application of James Spicer for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? J W Franklin, Live near Marietta, Cobb County Ga.
2. Are you acquainted with James Spicer, the applicant; if so, how long have you known him? Yes, seven or eight years
3. Where does he reside and how long and since when has he been a resident of this State? He resides
4. When, where and in what company and regiment did he enlist, and how do you know?
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty?
7. When and where was his command surrendered?
8. Were you present when it surrendered?
9. Was applicant present?
10. If he was not present, where was he?

When did he leave his command? For what cause?

By what authority he left? How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge.) He has no property that I know of. He has lived on my place several years.
12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition, if any, did he make of same? Nothing.
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? Nothing that I know of.
14. What is the applicant's occupation and physical condition? Farming. He is very old and feble. In very bad physical & financial Condition.
15. Is the applicant unable to support himself by labor of any sort, if so, why? Yes. His unable to support himself on account of old age and infirmities.
16. How was he supported during the years 1899 and 1900? He was drawing pension of thirty dollars. Hardly know how he did manage to get along.
17. What portion of his support for these two years was derived from his own labor or income? Nothing but the thirty dollars pension.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He is very old. He is almost totally deaf and from age and infirmity is unable to work.
19. What interest have you in the recovery of a pension by this applicant? None.

Sworn to and subscribed before me, this the 5th day of April 1900. J W Franklin Witness.

John Awtry Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, }
Cobb COUNTY }

Personally came before me J D Malone MD and E J Sitze MD, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully James Spicer, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

He is deaf, his eyesight is very defective, and he is very nervous and debilitated from extreme old age

They further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 5th day of April 1900. J. D. Malone M.D. E J Sitze M.D.

John Awtry Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA, }
Cobb COUNTY. }

I, John Awtry, Ordinary in and for said County, hereby certify that the applicant James Spicer resides in said County, and has been a bona fide resident of this State since the 1st day of Jany 1894 and that the witnesses, viz: J W Franklin and the Physicians are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1899 No Dollars of property, and in 1900 No Dollars of property.

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

Witness my hand and seal of office, this 5th day of April 1900.

John Awtry Ordinary, of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, James Spicer hereby authorize
John Autry of
to receive and receipt for the pension paid hereon and request that he remit same to
by
at his Office

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 9
day of Jany 1902.

James X Spicer [L. S.]
Mark

Executed in presence of

(FOR THOSE ALREADY ENROLLED.) CODE SECTION 1250.

No. 349

DISABLED
SOLDIER'S PENSION
1902.

Name James Spicer
County Cobb
Co. D Regiment 19
Disability
Amount, $ 30 1/2 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordy

Geo. W. Harrison, State Printer, Atlanta.

Spicer, James
Cobb County

No date

Spicer, James
Cobb County

(FOR THOSE ALREADY ENROLLED.) CODE SECTION 1250.

No. 327

DISABLED
SOLDIER'S PENSION
1903.

Name James Spicer
County Cobb
Co. D Regiment 19
Disability
Amount, $30 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Ordy

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, James Spicer hereby authorize
John Autry of
to receive and receipt for the pension paid hereon and request that he remit same to
his mark by
at

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

his
James X Spicer [L. S.]
mark

Executed in presence of
Jas. T. Echols

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Cobb County.

Personally appears James Spicer of Cobb 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 D, of 17th Regiment of S. C. Volunteers, Manigaults Brigade; that whilst engaged in such military service in the State of Ga, on the 22 day of July 1864, he was wounded, injured or diseased as follows: By gun shot striking left ear by which he is rendered totally deaf on account of the said wound

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 Cobb County, been allowed an invalid pension of $30 Dollars, for the year 1901.

Sworn to and subscribed before me, this the 1 day of Jany 1902.

his
James X Spicer
mark

Post-office

John Awtry

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,

Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with James Spicer 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 9 day of Jany 1902.

John Awtry

Ordinary Cobb County.

Affix your seal here

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,

Cobb County.

Personally appears James Spicer of Cobb 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 D, of 17th Regiment of S. C. Volunteers, Manigaults Brigade; that whilst engaged in such military service in the State of Ga, on the 22 day of July 1864, he was wounded, injured or diseased as follows: By gun shot striking left ear by which he is rendered totally deaf on account of said wound

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 Cobb County, been allowed an invalid pension of $30 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 1 day of January 1903.

his
James X Spicer
mark

Post-office

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

STATE OF GEORGIA,

Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with James Spicer 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 2nd day of Jan 1903.

John Awtry

Ordinary Cobb County.

Affix your seal here

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,
Cobb County.

I, James Spicer hereby authorize John Autrey of

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

by

at.

In Witness Whereof, I have hereunto set my hand and seal, this 3rd day of Jany 1905.

James his Spicer Mark [L. S.]

Executed in the presence of

J M Gann

Spicer, James
Cobb Co
(FOR THOSE ALREADY ENROLLED.)
Fr. Franklin Co-1904
No. 3119

DISABLED
SOLDIER'S PENSION
1905.

Name James Spicer
County Cobb
Co. D Regiment 19th
Disability
Amount, $30
JAN 23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

The Franklin Printing and Publishing Co., Atlanta
Geo. W. Harrison, Manager, for State Printer

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, James Spicer hereby authorize John Autrey of

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

by

at

In Witness Whereof, I have hereunto set my hand and seal, this 1 day of Jany 1906.

James his Spicer Mark [L. S.]

Executed in the presence of

J M Gann

Spicer, James
Cobb County

Code Section 1250.
(FOR THOSE ALREADY ENROLLED.)
No. 321

DISABLED
SOLDIER'S PENSION
1906.

Name James Spicer
County Cobb
Co. D 19th Regiment SC
Disability Dropsy
Amount, $30.00
1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally appears James Spicer of Cobb 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 D, of 19th Regiment of [illegible] Volunteers Montgomery's Brigade; that whilst engaged in such military service in the State of Ga, on the ____ day of [illegible] 1864, he was wounded, injured or diseased as follows: By Gun Shot striking left Foot Causing Complete deafness

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 30 Dollars, for the year 1904.

Sworn to and subscribed before me, this the ____ day of ____ 1905

his
James X Spicer
mark

Post-office ____

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

STATE OF GEORGIA,
COUNTY.

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

Given under my official signature and seal, this ____ day of ____ 1905.

Affix your Seal here.

Ordinary ____ County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb **County.**

Personally appears James B Spicer of Cobb 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 ____ in Company D 19th Regiment of ____ Volunteers ____'s Brigade; that whilst engaged in such military service in the State of ____, on the ____ day of ____ 186__, he was wounded, injured or diseased as follows: deafness

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 30 Dollars, for the year 1905.

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

John Audrey

his
James X Spicer
mark

Post-Office ____

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

State of Georgia,
Cobb **County.**

I, John Audrey Ordinary of said County, do certify that I am well acquainted with James Spicer 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 1 day of Jany 1906.

John Audrey

Affix your seal here

Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, James Spicer, hereby authorize John Awtrey of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 10 day of Jany 1907.

James Spicer [L. S.]
his mark

Executed in presence of
J. M. Gann

Spicer, James
Cobb Co.

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED)

No. 254

DISABLED
SOLDIER'S PENSION
1907.

Name James Spicer
County Cobb
Co. 19th Regiment
Disability Hearing
Amount, $30.00

JAN 21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
6

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no date

Audited _____ 1889.

COMPTROLLER-GENERAL.

Cobb

Maimed Soldiers.

Voucher No. 2340
Amount, $ 30
Paid to James Spicer
For Total Deafness

June 1 1889.

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK.

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

R. C. Irwin

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Cobb County.

Personally appears James Spicer of Cobb 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 _____ in Company D, of 1986th Regiment of _____ Volunteers _____'s Brigade; that whilst engaged in such military service in the State of _____, on the _____ day of _____ 186__, he was wounded, injured or diseased as follows:

Deafness

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 30 Dollars, for the year 1906.

Sworn to and subscribed before me, this the 10 day of July 1907.

John A Whitney

James J Spicer
his mark

Postoffice _____

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

State of Georgia,
Cobb County.

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

Given under my official signature and seal this 10 day of July 1907.

John A Whitney
Ordinary Cobb County.

Affix your seal here

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

No. 2340

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga June 1 1889.

Mr James Spicer of the County of Cobb 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 Total Deafness

He is entitled to receive the sum of Thirty & 00/100 Dollars for such disability, the same being the allowance due for the year ending October 24, 1889

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

J B Gordon
GOVERNOR.

By the Governor
W H Hansen
CLERK EXECUTIVE DEPARTMENT.

30.

RECEIVED OF STATE TREASURER, R U HARDEMAN,

Thirty & 00/ Dollars,

per above voucher, this 1 of June 1889.

R. C. Irwin

Audited 18

COMPTROLLER GENERAL

Cobb

Maimed Soldiers.

Voucher No. 1170.

Amount $ 30

Paid to James Spicer

For Loss of hearing

Total

Feby 14 1890

Included in warrant No.

issued to Treasurer.

18

WARRANT CLERK

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

R. C. Norris

Audited 1891.

COMPTROLLER GENERAL.

Spicer, James

Cobb

1891.

Maimed Soldiers.

Voucher No. 1339

Amount $ 30.

Paid to James Spicer

For Total Deafness

Feby 20 1891

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK

Geo. W. Harrison, State Printer, Atlanta.

R. C. Norris

No. 1170

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga., Feby 14 1890

Mr. James Spicer of the County of Cobb 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 Total Deafness

He is entitled to receive the sum of Thirty & 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.

TREASURER'S OFFICE PAID STATE OF GEORGIA

J. B. Gordon
GOVERNOR.

By the Governor,
W H Harrison
CLERK EXECUTIVE DEPARTMENT.

$ 30.00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,
Thirty & 00/ Dollars,
per above voucher, this 14 of Feb 1890.
R. C. Irwin
Atty in fact

1891.
No. 1339

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga. Feby 20 1891.

Mr. James Spicer of the County of Cobb 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 Total deafness

He is entitled to receive the sum of Thirty 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.

W. J. Northen
GOVERNOR.

By the Governor,
W H Harrison
SEC'Y EXECUTIVE DEPARTMENT.

$ 30

TREASURER'S OFFICE PAID STATE OF GEORGIA

RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia
Thirty & 00/ Dollars,
per above voucher, this 20 of Feby 1891.
R. C. Irwin
for Spicer.

Georgia, Cobb County.

Personally comes James Spicer and asks to be transferred from the ~~Cobb~~ invalid pension roll to the indigent roll, for the following reasons to wit;
Applicant was born May 3rd, 1818, in Charleston, S.C. and is therefore in his 90th year.
He is extremely feeble, and totally unable to support himself, and is totally without means, and dependent largely on charity.
Applicant served in Co. D. 19th S.C. Regiment, for over 3 years, and was wounded in the head at the battle of Atlanta, and draws a pension of $30 dollars per year for total disabilities. He has been unable to find any of his comrades, and therefore asks the Commissioner to use the proofs of service originally made in his first application.

his
James X Spicer
mark

Sworn and subscribed before me this Oct. 3rd 1908,
John Awtrey, Ordinary.

OFFICE OF
JOHN AWTREY,
ORDINARY, COBB COUNTY.

(1)

Marietta, Ga., April 8th, 1904.

Hon. J. W. Lindsey,
~~Atlanta~~ Ga.,

Dear Sir:

This applicant is now drawing $30 on account of disabilities. He is about 86 years and has no property and no children to support him. He now asks to be transferred to the indigent list, and I take this opportunity to say that I regard it as a very just and meritorious claim.

Very truly yours,
John Awtrey
Ordinary.

Georgia,
Cobb County.

Personally comes J. M. Gann, who being sworn says that he has known James Spicer for many years and knows him to be a worthy man, and in a very needy condition. Said Spicer is about 90 years old and quite feeble, and totally dependent on the State and public Charity for a support. He has no means whatever, and his wife is old and feeble. He is totally deaf, and his mind very weak, and he can therefore give but little information as to his service in the army.

Affiant believes said Spicer should be transferred to the indigent pension roll.

J. M. Gann

Sworn and subscribed before me this Oct. 3rd 1908, and I certify that affiant is a resident of Cobb County, whose statements are worthy of full faith and credit.

John Awtrey,
Ordinary.

Hon. J. W. Lindsey,
Pension Commissioner,

Dear Sir:

I think it nothing but justice to place this man on the indigent roll without further proof. He is in a pitiable condition, and not able to give but little information. He made his proofs many years ago, but on account of his condition now is not able to give the names of any of his comrades.

Very truly yours,
John Awtrey,
Ordinary.

Credit. John Sutton, Ordinary.

Pension Office
11/2-1909

I cannot find in the files of this office this Application on which this now was admitted to Disabled & paid his 1st Pension in 1889

I cannot allow this Indigent Application - however much I would like to do so - without proffs of six months actual mutilating service in his Command in army of Confederate States

The law makes no provisions to allow Indigent Pension without testimony

H. T. Lindsey
Comm of Pension

SPICER, James — Cobb County
Disappeared
11/2-1909

James Spicer
Cobb County.

Co D. 19th S.C.

Indigent

Look up the old appl for which he was admitted the Pension

P. 29,08

No. _____

INDIGENT PENSION
1897.

Name E. A. Hinks

County Cobb

Approved _____ 1897.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

2/16/97

Pension Office 5/11 1897
Further proof of infirmity
is required —
Richard Johnson
Comm of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA. }
_____ County. }

I, _____ hereby authorize

_____ of _____

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

_____ at _____ by _____

Witness my hand and seal this _____ day of _____ 1897.

Executed in presence of

_____

3

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb County.

Personally came before me B. A. Bell M.D. and J. D. Malone, both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully E. A. Spinks, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

We find that the left side of his head has pressed away and shrunk untill his hearing is gone on that side and he suffered from partial paralysis in that place We find that he is subject to spells of swimming in the head Coming on after & he cannot stand by has use to the heat or sun He has attacks of cramping spells in his legs & stomach

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 6th day of Feby 1897.

B. A. Bell M.D.

J. M. Stone Ordinary.

H.A. is in very feeble condition

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone, Ordinary in and for said County, hereby certify that the applicant E. A. Spinks resides in said County, and was a bona fide resident of this State on the first day of January, 1894, and that the witnesses, viz: F. A. Hargrove, B. A. Bell M.D. & J. D. Malone M.D. are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Cobb County show that applicant returned for taxation in his name in 1895, Nothing dollars of property, and in 1896, Nothing dollars of property.

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

Witness my hand and seal of office, this 15th day of Feby 1897.

J. M. Stone Ordinary

of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA, }
Cobb COUNTY. }

I, E A Spinks hereby authorize E & W Fry, of Marietta, Ga, to receive and receipt for the pension allowed and request that he remit same to me at by hand.

Witness my hand and seal this 7th day of March 1898.

Executed in presence of
S. Fry

E A his x mark Spinks [L.S.]

No.

INDIGENT PENSION 1899.

Name E. A. Spinks.
County Cobb

Approved 1898.

RICHARD JOHNSON, Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

E A Spinks, Co. C.
Cobb Co.

1/20.99

Questions for Applicant.

Every Question MUST be Answered

STATE OF GEORGIA, }
Cobb County. }

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

1. What is your name and where do you reside? (give State, County and post office.) E. A. Spinks - near Marietta, Cobb Co., Ga.
2. How long and since when have you been a resident of this State? Since 1931.
3. When and where were you born? July 13, 1830, Walton Co. Ga.
4. When and where and in what company and regiment did you enlist or serve? May, 1861, Roswell, Ga. Co. "H". 7th Ga. Regiment.
5. How long did you remain in such company and regiment? During the remainder of the war.
6. For how long a period did you discharge regular military duty? About 4 years.
7. When, where and under what circumstances were you discharged from service? April 9th 1865 Appomattox (C.H.) Va. at Lees Surrender.
8. What is your present occupation? Farming
9. How much can you earn (gross) per annum by your own exertions or labor? Possibly $35.00
10. What has been your occupation since 1865? Farming.
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmity and poverty" or third "blindness and poverty"? 1st, 2nd & 3rd
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? As to 1st ground: Am 67 years old & in poor health - about 4 years. As to 2nd ground: During the service, I received a severe shot from a bomb-shell - on the left side of my head - that caused blood to gush out of my mouth, nose and ears, causing great pain, but not rendering me totally deaf - the effect and a ringing in my temples - etc - is the same today - at times, more or less - I am unable to perform any kind of manual labor. As to 3rd ground: Not applying - that all in 18 months - am almost blind - left eye -
13. What property, effects or income do you possess and its gross value? None
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897 and what disposition, if any, did you make of same? None
15. In what County did you reside during those years and what property did you then return for taxation? Cobb Co. None -
16. How were you supported during the years 1896 and 1897? By my own small efforts and those of my children -
17. How much did your support cost for each of those years and what portion did you contribute thereto by your own labor or income?
18. What was your employment during 1896 and 1897? What pay did you receive in each year? Farming - One half of what I could make -
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? Yes. Wife and four children - two girls and two boys - the two oldest ones are girls - 14 & 16 years old - boys 8 & 10 years old - My labor and that of my children. No homestead -
20. Are you receiving any pension, if so, what amount and for what disability? No

Sworn to and subscribed before me this the 7th day of March 1898.

E. A. his x mark Spinks
Applicant.

Ordinary.
of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb County.

F. A. Hargrove, of said State and County, having been presented as a witness in support of the application of E. A. Spinks for pension under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Near Marcella Cobb Co. Ga. F. A. Hargrove,

2. Are you acquainted with E. A. Spinks, the applicant, if so how long have you known him? Idem. For 35, or 40 years.

3. Where does he reside, and how long and since when has he been a resident of this State? Near Marcella Cobb Co. Ga. Since before we knew him.

4. When, where and in what company and regiment did he enlist, and how do you know? May, 1861 at Roswell Ga, Co. H, 7th Ga. Regmt I was in the same Co & Regmt.

5. Were you a member of the same company and regiment? Yes.

6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? Near 4 years At Ist A. Hargrove Was wounded Sept. 30. 1864 & left E. A. Spinks with the Co - Ast He was a brave soldier and was discharged April 9. 1865 - Appomattox C.H.

7. What property, effects or income has the applicant? (Give your means of knowledge.) None. We live near by him.

8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? None.

9. Has he conveyed away any of his property in the last three years, if so, what was it and to whom? No.

10. What is the applicant's occupation and physical condition? Farming - He was wounded in Georgia by the explosion of a shell near the left side of his head - from which he never suffers considerable disturbance in the left temple - He is very poor, & has a large family - and is unable to make a living at any work.

11. Is the applicant unable to support himself by labor of any sort, if so, why? Yes - He is a farmer and not capable to do anything else - On account of his physical condition as above stated.

12. How was he supported during the years 1896 and 1897? By his own labor and that of his Children.

13. What portion of his support for these two years was derived from his own labor or income? Possibly about ½ of that of himself and family.

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 15th, 1894? See answer to question 10 which we think equally applies to question 11.

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

Sworn to and subscribed before me, this the 7th day of March 1898. F. A. Hargrove Witness.

J. M. Stone Ordinary
Cobb County.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
_____ County.

Personally came before me _____ and _____, both known to me as reputable physicians of said County, who being severally sworn, say on oath that they have examined carefully _____, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

We further say on oath that the physical condition of applicant renders him unable to labor at any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.

Sworn to and subscribed before me this the _____ day of _____ 1898.

Ordinary.

ORDINARYS' CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone, Ordinary in and for said County, hereby certify that the applicant E. A. Spinks resides in said County, and has been a bona fide resident of this State since the 1st day of January, 189 4, and that the witnesses, viz.: F. A. Hargrove

are of trust worthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of _____ County show that applicant returned for taxation in his name in 1897 Nothing Dollars of property, and in 1898 Nothing Dollars of property.

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

Witness my hand and seal of office, this 9th day of January 1899.

J. M. Stone Ordinary
of Cobb County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, E. A. Spinks hereby authorize E. W. Frey of Marietta Ga. to receive and receipt for the pension allowed, and request that he remit same to me by him

Witness my hand and seal, this 15 day of Jany. 1900.

E. A. his Spinks [L. S.]
mark

Executed in presence of
J. M. Stone

Spinks, E. A.
Cobb G.

CODE SEC. 1254.
(For Those Already Enrolled.)

NO. 786

INDIGENT
SOLDIER'S PENSION,
1900.

Name E. A. Spinks
County Cobb

WARRANT ISSUED
January 18 1900.

JOHN. W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
E. W. Frey

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

I, hereby authorize of to receive and receipt for the pension allowed and request that he remit same to at by

Witness my hand and seal, this day of 1901.

[L. S.]

Executed in presence of

Spinks, E. A.
Cobb Co.

CODE SECTION 1254
(For Those Already Enrolled.)

No. 134

INDIGENT
SOLDIER'S PENSION.
1901.

Name E. A. Spinks
County Cobb

WARRANT ISSUED
Jany 15 1901.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Appl

Geo. W. Harrison, State Printer, Atlanta

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appeare E. A. Spinks of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22nd day of July 1831; that he is 68 years old and by occupation a farmer; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 4 Years in Company H, of 7 th Regiment of Ga. Vols. _____; that his physical condition is as follows: On acount of Infirmity desabilety And poverty not able to Support himself.

that his property consists of the following items Nothing

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1900. I have heretofore as a resident of Cobb county been allowed a pension for the year 189—

Sworn to and subscribed before me, this the 15 day of Jany 1900.
J. M. Stone Ordinary.

E. A. his x Spinks mark

State of Georgia,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with E. A. Spinks 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 Jany 1900.

Affix your seal here.

J. M. Stone
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1900.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appeare E A Spinks of County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of July 1831; that he is 70 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 4 Years in Company H, of 7 th Regiment of Ga Vols ; that his physical condition is as follows: on account of Infirmity disabelety poverty Not able to Make Support

that his property consists of the following items

Nothing

of the value of _____ Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of _____ county been allowed a pension for the year 1900

Sworn to and subscribed before me, this the 3rd day of January 1901.
John Awtrey Ordinary.

E A his x Spinks mark

STATE OF GEORGIA,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with E A Spinks 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 3rd day of January 1901.

Affix your seal here

John Awtrey
Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1901

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, ~~John Antrey~~ E A Spinks hereby authorize John Antrey of

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

at

by Marietta

Witness my hand and seal, this 1st day of Jan 1902.

E A his x mark Spinks [L. S.]

Executed in presence of

J M Gann

Spinks, E. A.
Cobb County

CODE SECTION 1254.

(FOR THOSE ALREADY ENROLLED.)

No. 540.

INDIGENT
SOLDIER'S PENSION
1902.

Name E. A. Spinks
County Cobb
Co. H Regiment 7th

WARRANT ISSUED
1/16 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cady

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,)
Cobb **County.**

Personally appears E A Spinks of Cobb County, State of Geoogia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of July 1831; that he is 70 years old and by occupation a Farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 Years in Company K, of 7 th Regiment of Ga Vols ; that his physical condition is as follows: On account Infirmity disabilety and poverty he is unable to support himself that his property consists of the following items Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore as a resident of Cobb county been allowed a pension for the year 1901

Sworn to and subscribed before me, this the 1st day of January 1902. E A his X Spinks mark

John Awtrey Ordinary.

STATE OF GEORGIA,)
Cobb **County.**

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with E A Spinks 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 1902.

Affix your seal here

John Awtrey
Ordinary. Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1902.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, E A Spinks hereby authorize
John Autrey of

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

by hand

Witness my hand and seal, this 3 day of Jan 1903.

E A Spinks [L. S.]
Mark

Executed in presence of
J M Gann

CODE, SECTION 1254
(FOR THOSE ALREADY ENROLLED.)

No. 311

INDIGENT
SOLDIER'S PENSION
1903.

Name E A Spinks
County Cobb
Co. H Regiment 7 th

WARRANT ISSUED
1/23 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Cody

Geo. Harrison, State Printer, Atlanta

Spinks E A
Cobb Co Ga

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, E A Spinks hereby authorize
John Autrey of

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

by

WITNESS my hand and seal, this 16 day of Jany 1905.

E A Spinks [L. S.]

Executed in the presence of
J M Gann

Spinks, E A
Cobb Co Ga

CODE, SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 7651

INDIGENT
SOLDIER'S PENSION
1905.

Name E A Spinks Co
County Cobb
Co. H Regiment 7 th

WARRANT ISSUED
JAN 25 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

GEO. W. HARRISON, MANAGER, FOR STATE PRINTER, ATLANTA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears E A Sparks of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of July 1831; that he is 71 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 yrs in Company H, of 7 th Regiment of Ga. Vols; that his physical condition is as follows: from infirmity & count can support

that his property consists of the following items: nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Cobb county been allowed a pension for the year 1902

Sworn to and subscribed before me, this the 16 day of Jan 1903. E A Sparks

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 16 day of Jan 1903.

Affix your seal here

John Awtrey Ordinary Cobb County.

NOTE.—The blank spaces must be filled.
NOTE.—Affidavit should not be attested before January 1st, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears E A Sparks of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of July 1831; that he is 73 years old and by occupation a farmer, that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of 4 Years in Company H, of 7 th Regiment of Geo Vols; that his physical condition is as follows: age Infirmity and poverty

that his property consists of the following items: Nothing

of the value of Dollars. I am now earning, by my labor, Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of Cobb County been allowed a pension for the year 1904.

Sworn to and subscribed before me, this the 16 day of Jany 1905. E A Sparks

John Awtrey Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 16 day of Jany 1905.

Affix your seal here

John Awtrey Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb COUNTY.

I, E A Spinks hereby authorize
John Awtrey of
to receive and receipt for the pension allowed and request that he remit same to
at
by

Witness my hand and seal, this 11 day of Jan 1904.

E. A. Spinks [L. S.]

Executed in presence of

J M Gann

Spinks, E. A.
Cobb Co.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 636

INDIGENT
SOLDIER'S PENSION
1904.

Name E A Spinks
County Cobb
Co. A Regiment 7

WARRANT ISSUED
1/25 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
only

Geo. W. Harrison, State Printer, Atlanta.

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears E. A. Spinks of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 22 day of July 1831; that he is 72 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served for the term of [illegible] in Company 26, of 7th Regiment of Ga Vol; that his physical condition is as follows: On account of infirmity disabilities and poverty he is unable support himself

that his property consists of the following items: Nothing

of the value of Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of Cobb County been allowed a pension for the year 1903

Sworn to and subscribed before me, this the 11 day of Jan 1904.

E. A. Spinks

John Trotney Ordinary.

STATE OF GEORGIA,
Cobb County.

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

Given under my official signature and seal, this 11 day of Jan 1904.

Affix your Seal here.

John Trotney
Ordinary Cobb County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County,

I, E A Spinks hereby authorize John A Wray of

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

at

by

WITNESS my hand and seal, this 3 day of Jany 1906.

E A Spinks [L. S.]

Executed in the presence of

[illegible]

Spinks, E. A.

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 77

INDIGENT
SOLDIER'S PENSION
1906.

Name E A Spinks
County Cobb
Co. H 7th Regiment Ga. Vols.

WARRANT ISSUED
1/22 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

THE FRANKLIN PRINTING AND PUBLISHING CO. GEO. W. HARRISON.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, E A Spinks, hereby authorize John A Wray of

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

at

by

WITNESS my hand and seal, this 8 day of Jany 1907.

E A Spinks [L. S.]

Executed in presence of

[illegible]

Spinks, E. A.,
Cobb Co.,

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED)

No. 657

INDIGENT
SOLDIER'S PENSION
1907.

Name E A Spinks
County Cobb
Co. H 7th Regiment

WARRANT ISSUED
JAN 21 1907.

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,
Cobb County.

Personally appears E A Spinks of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18__; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company 36, of 7 Ga Regiment of _____; that his physical condition is as follows:

Infirmity Ger

that his property consists of the following items: _____

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1906. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1905.

Sworn to and subscribed before me, this the 3 day of Jany 1906.
John Aldrey Ordinary.

E. A. Spinks

State of Georgia,
Cobb County.

I, John Aldrey Ordinary of said County, do certify that I am well acquainted with E A Spinks 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 3 day of Jany 1906.

John Aldrey
Ordinary Cobb County.

Affix your seal here

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Cobb County.

Personally appears E A Spinks of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18__; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of _____ in Company H, of 7 Ga th Regiment of _____; that his physical condition is as follows: Infirmity & poverty

that his property consists of the following items: _____

of the value of _____ Dollars. I am now earning by my labor, _____ Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for.

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of Cobb County, been allowed a pension for the year 1906.

Sworn to and subscribed before me, this the 8 day of Jany 1907.
John Aldrey Ordinary.

E A Spinks

State of Georgia,
Cobb County.

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

Given under my official signature and seal this 8 day of Jany 1907.

John Aldrey
Ordinary Cobb County.

Affix your seal here

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

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the law granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the 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 a crippled *hand*, nor for a crippled foot, nor 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. It is more difficult to say when an arm is "substantially and essentially useless." The words are strong ones, however, and the injury must be very severe, and the arm in a badly damaged condition to entitle one to the allowance mentioned in the Act. The Legislature intended to limit these payments to such as were *most seriously wounded and disabled*. In the future they will doubtless provide for *all* who were badly injured, but the present law does not reach many worthy, needy cases. It was inaugurated as an experiment ; if abused, it will naturally become unpopular and be repealed. If properly administered, will do great good.

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

7. The Ordinaries know the condition of applicants better than the Governor or his Secretaries, and they are earnestly requested to discourage any man from making application unless he is entitled under the law. Hundreds of applications have been received and disallowed because they were not disabled so as to entitle them under the law. This entails much unnecessary work upon this office ; it causes delays in making payments to those who are entitled : it puts parties to expense and trouble, and in the end causes bitter disappointment and mortification.

8. 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.

Spradlin, Joshua
C 53 Coll Co

No. 926 188

Application for Allowance

FOR

Right Arm Disabled

Applicant Joshua Spradlin

County Cobb

Amount 25

Date of Warrant May 5/88

Entered on Record,

May 5 188 8

W H H

Secretary Executive Department.

E 1960

NOTES.

In order to avoid unnecessary delays to applicants, and to enable all parties interested to understand the law granting allowances to disabled soldiers, as well as the rules adopted by the Governor touching the 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 a crippled *hand*, nor for a crippled foot, nor 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. It is more difficult to say when an arm is "substantially and essentially useless." The words are strong ones, however, and the injury must be very severe, and the arm in a badly damaged condition to entitle one to the allowance mentioned in the Act. The Legislature intended to limit these payments to such as were *most seriously wounded and disabled*. In the future they will doubtless provide for *all* who were badly injured, but the present law does not reach many worthy, needy cases. It was inaugurated as an experiment : if abused, it will naturally become unpopular and be repealed. If properly administered, will do great good.

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

7. The Ordinaries know the condition of applicants better than the Governor or his Secretaries, and they are earnestly requested to discourage any man from making application unless he is entitled under the law. Hundreds of applications have been received and disallowed because they were not disabled so as to entitle them under the law. This entails much unnecessary work upon this office ; it causes delays in making payments to those who are entitled ; it puts parties to expense and trouble, and in the end causes bitter disappointment and mortification.

8. 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.

Spradlin, Joshua
53 Cobb Co

No. 926

Application for Allowance

FOR

Right Arm Disabled

Applicant Joshua Spradlin

County Cobb

Amount 25

Date of Warrant May 5/88

Entered on Record.

May 5 1888

W H H

Secretary Executive Department.

E 1960

OK right arm

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears Joshua Spradlin of Cobb 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 18 day of July 1838 ; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company "C", of 53th Regiment of Georgia Volunteers Sims's Brigade ; that whilst engaged in such military service, at the battle of Knoxville in the State of Tenn, on the day of Nov. 1863, he was wounded as follows : He was shot through the right arm the bone was broken all too pieces in the elbow, the arm perished away is substantially and essentially useless and deponent is permanently disabled and has been since the injury - the arm being stiff and of no use.

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and makes application for the allowance to which he is entitled thereunder.

Sworn to and subscribed before me, this the 10 day of April 1888 } Joshua Spradlin

W. M. Cammett
Ordinary

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

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA,
Cobb County.

PERSONALLY came before me W. T. Glover of the county of Fayette State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company "C", of 53" Regiment of Georgia Volunteers, and that deponent knows Joshua Spradlin, and that he received the wounds (or ~~contracted the disease~~) in the military service, as stated in his foregoing affidavit, and that wounds in the Arm Renders it substantially and essentially useless. (or ~~disease~~) ~~permanently~~ disables the said Spradlin, as stated by him in said affidavit. Deponent further states that said Spradlin is a *bona fide* citizen of this State, and resides in Cobb county.

Sworn to and subscribed before me, this 12 day of April 1888

M. M. Collier N. P. & J. P. W. T. Glover
1st Lieut Co. C. 53rd Ga Reg

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

STATE OF GEORGIA,
County.

PERSONALLY came

citizens of county in said State,

who, being duly sworn, say that they are acquainted with

and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a *bona fide* citizen of this State, and resides in county, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this
day of 188

NOTE.—Above affidavit must be made by three citizens of the county of applicant's residence.

STATE OF GEORGIA,
Cobb *County.*

PERSONALLY comes before me H. M. Hammill Ordinary of said county Dr. W. H. Richmond and Dr. J. B. Medlock, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined Joshua Bradlin and after such examination say that the applicant has been injured as follows: He was shot through the ~~Right~~ left arm in the elbow—the bone was broken and the arm has perished away by reason of the wound and is entirely and essentially useless.

Sworn to and subscribed before me, this
12 day of April 1888
H. M. Hammill
ORDINARY

J. B. Medlock M. D.
W. H. Richmond M. D.

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,
Cobb *County.*

I, H. M. Hammill Ordinary of said county, do certify that I am well acquainted with Joshua Bradlin 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 I am Ordinary before whom the foregoing affidavits were made, and power of attorney was signed, is a Notary W. H. Brown of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 12 day of April 1888

H. M. Hammill
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

Know all men by these presents, That I
of
county, in said State, do hereby appoint
of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit. Hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this
day of 188 [L. S.]

Executed in the presence of us:

Spradlin, Joshua
Cobb Co
C-53

No. 135

APPLICATION FOR ALLOWANCE

FOR YEAR ENDING, OCT. 26, 1889.

FOR

Right Arm disabled

Applicant Joshua Spradlin

County Cobb

~~Amount~~ Feby 7/89

~~Date of Warrant~~ $100.50

Entered on Record, Feby 6 1900 1889

W.H.B.

SECRETARY EXECUTIVE DEPARTMENT.

No additional data

Applicant by 1960

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears Joshua Spradlin of Cobb county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continuously since the 18th day of July 1838 that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company "C" of 53rd Regiment of Ga. Volunteers Simms's Brigade; that whilst engaged in such military service, at the battle of Knoxville in the State of Tenn. on the 29th day of November 1863, he was wounded as follows: By gunshot through Elbow of right arm, rendering it useless

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the Act amendatory thereof, approved Dec. 24, 1888, and makes application for the allowance to which he is entitled *for the year ending Oct. 26, 1889.*

Sworn to and subscribed before me, this the 6th day of Feby 1889 Joshua Spradlin
J. M. Stone Ordny

NOTE.—State fully nature of wound or character of disease which causes the disability, and *explain particularly* the extent of the disability.

STATE OF GEORGIA,
Cobb County.

PERSONALLY comes before me J. M. Stone Ordinary of said county, J. W. Westmoreland and J. B. Medlock, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined said arm and after such examination say that the applicant has been injured as follows: By Gun shot wound through Elbow joint of right arm, rendering it useless for life

Sworn to and subscribed before me, this 6th day of Feby 1889 J. W. Westmoreland M.D.
J. B. Medlock M.D.
J. M. Stone
ORDINARY.

NOTE.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom.

STATE OF GEORGIA,

Cobb County.

I, J. W. Stone Ordinary of said county, do certify that I am well acquainted with Joshua Braddlee, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and that he is disabled to the extent he claims*, and I know he is the individual he represents himself to be, and that he resides in this county. I also certify that the foregoing witnesses, to-wit:

are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that before whom the foregoing affidavits were made and power of attorney was signed, is a of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 6th day of Feby 1889

J. W. Stone

Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

county, in said State, do hereby appoint

of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

In witness whereof I have hereunto set my hand and seal, this

day of 188

(L. S.)

Executed in the presence of us:

)

)

DIRECTION:

Send money to me as follows, by

to P. O.

County, Georgia.

NOTES.

1. If an applicant has been wounded, the description of the wound should be carefully and fully set forth by applicant and physician, and followed by a plain statement of fact showing the *extent of the disability*. If applicant claims disability from disease contracted in the service, a full and carefully stated history of the disease should be given, tracing the disability by positive proofs to the service.
2. The law makes no allowance for an arm or leg, unless the arm or leg has been rendered *substantially and essentially useless*.
3. It will not answer to say that an arm is "substantially useless for ordinary pursuits of life, etc." There is no qualification to the clause of the Act in reference to the arm or leg, but the limb must for all purposes be "substantially and essentially useless."
4. If the application is for a wounded leg, it would seem to be a fair construction of the Act, and the words above quoted, to say that unless the injury is such as to require the constant use of crutch or stick, that the leg is not "substantially and essentially useless."
5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.
6. If papers are returned for correction, and amendments are *added* to any of the affidavits, the amendments must be made *under oath* before an officer, and the proofs must show that the amendments have been duly sworn to.
7. Every application must be certified by the Ordinary of the county of the residence of the applicant. The certificate of any other will not be received in any case.

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said county, do certify that I am well acquainted with Joshua Spradlin 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 10th day of Feby 1890

J. M. Stone
Ordinary Cobb County.

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with Joshua Spradlin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and that he is disabled, to the extent he claims*, and I know he is the individual he represents himself to be, and that he resides in this County.

I further certify that _____ before whom the foregoing affidavits were made and power of attorney was signed, is a _____ of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 12th day of Feby 1891.

J. M. Stone
Ordinary Cobb County.

1890.

No. 869

APPLICATION FOR ALLOWANCE.

FOR YEAR ENDING OCTOBER 26, 1890.

—FOR—

Right Arm disd

Applicant, Joshua Spradlin

County, Cobb

Amount, $50

Date of warrant, Feby 11

Entered on record Feb. 11 1890

W H H

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

applicant

1891.

Spradlin Joshua
Cobb Co

No. 84

Application for Allowance

FOR THE YEAR ENDING OCTOBER 26, 1891.

FOR

Arm disd

Applicant, Joshua Spradlin

County, Cobb

Amount, $50

Date of Warrant, Feby 13.

Entered on record Feby 13 1891

W H H

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDED TO

applicant

Geo. W. Harrison, State Printer, Atlanta, Ga.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears Joshua Spraddling Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the 18th day of July 1838 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 6, of 53th Regiment of Ga. Volunteers Simms 's Brigade; that whilst engaged in such military service, at the battle of Knoxville in the State of Tenn, on the 29th day of Nov 1863 he was wounded as follows: By minnie ball passing through elbow of right arm, fracturing and bursting the bones of said elbow and arm thereby causing said right arm to perish away and rendering it substantially and essentially useless

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 [illegible] dollars.

Sworn to and subscribed before me, this the 18th day of Feby 1890 } Joshua Spraddling

J M Stone Ordy

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
County.

KNOW ALL MEN BY THESE PRESENTS, That I, of county, in said State, do hereby appoint of my true and lawful attorney in fact, for me and in my name, to receive and receipt for what ever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 189

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by to P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears Joshua Spradlin of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 18th day of July 1838; 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 6, of 53th Regiment of Georgia Volunteers Simms 's Brigade; that whilst engaged in such military service at the battle of Knoxville ~~Tenn~~ in the State of Tennessee, on the 29 day of Nov 1863, he was wounded as follows: Shot through the Elbow of right arm Rendering it useless, thus deed of arm Perishing away and arm stiff. So he cannot use it. The wound was made with minnie Ball. Said arm is essentially and substantially useless

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 said disability

Sworn to and subscribed before me, this the 12th day of Feby 1891. } Joshua Spradlin

J M Stone

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,
County.

Know all Men by these Presents, That I, of County, State of Georgia, do hereby appoint of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1891.

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by to P. O.

County, Georgia.

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said county, do certify that I am well acquainted with Joshua Spradlin 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 repesents himself to be, and that he resides in this county.

Given under my official signature and seal, this 27 day of February 1892

J. M. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

Know all Men by these Presents, That I _____ of _____ County, State of Georgia, do hereby appoint _____ of _____ my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1893.

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by _____ to _____ P. O. _____ County, Georgia.

No. 4
Spradlin Joshua

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 26, 1892

Name Joshua Spradlin
County Cobb
Disability Wm Dis'd
Amount, $ 50
Entered on record Mch 1892.

W. H. HARRISON,
Secretary of Executive Department.

AGENT.
Applicant

Geo. W. Harrison, State Printer, Atlanta, Ga.

Spradlin, Joshua
Cobb Co.

1893.

No. 631

Application for Allowance

For the Year Ending October 26, 1893,

FOR

Dis'd

Applicant, J. Spradlin
County, Cobb
Amount, 50
Date of Warrant,
Entered on record, Mch 15 1893.

Secretary Executive Department.

WARRANT HANDED TO

Applicant

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears Joshua Spradlin of Cobb 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 18 day of July 1838; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a private in Company C, of 53rd th Regiment of Georgia Volunteers Simms's Brigade; that whilst engaged in such military service at the battle of Knoxville in the State of Tennessee, on the 29 day of November 1863, he was wounded as follows: by being shot by minnie ball through the elbow joint of right arm and by reason of said wound said right arm was rendered essentially and substantially useless — the right arm rendered stiff in said elbow joint and said arm has perished away

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1892. I have heretofore been allowed a pension of fifty Dollars for 1891

Sworn to and subscribed before me this the 27th day of February 1892. Joshua Spradlin

J. M. Stone 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,
County.

Know all Men by these Presents, That I, of County, in said State, do hereby appoint of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of the injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of 1892.

[L. S.]

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by to P. O. County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears J. Spradlin of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 18th day of July 1838; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company "C", of 53th Regiment of Ga. Volunteers Simms's Brigade; that whilst engaged in such military service at the battle of Knoxville in the State of Tenn, on the 29th day of Novr. 1863, he was wounded as follows: By gunshot wound striking elbow of right arm fracturing said elbow and rendering said right arm essentially and substantially useless

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 $50 dollars, for

Sworn to and subscribed before me, this the 13 day of Mch 1893. Joshua Spradlin

J. M. Stone

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,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with Joshua Spradlin 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 13 day of Mch 1893.

J. M. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
COUNTY. }

Know all Men by these Presents. That I, ... of ..... County, State of Georgia, do hereby appoint ..... of ..... my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this ..... day of ..... 1894.

..... [L. S.]

Executed in the presence of us }

DIRECTIONS.

Send money to me as follows, by ..... to ..... P. O.

County, Georgia.

Spradlin J.
Cobb Co.

(For Those Already Enrolled.)

No. 693

Soldier's Pension.

1894.

Name J. Spradlin
County Cobb
Disability Dis. Arm
Amount, $ 30
3/4

1894.

W. H. HARRISON,
Secretary Executive Department.

WARRANT HANDED TO
Appleman

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
County. }

KNOW ALL MEN BY THESE PRESENTS, That I, ... of ..... County, State of Georgia, do hereby appoint ..... of ..... my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this ..... day of ..... 1895.

[L. S.]

Executed in presence of us }

DIRECTIONS.

Send money to me as follows, by ..... to ..... P. O.

County, Georgia.

Spradlin J.
Cobb Co.

(For Those Already Enrolled.)

No. 340

SOLDIER'S PENSION.

1895.

Name J. Spradlin
County Cobb
Disability Arm
Amount, $ 50
3/4

1895.

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
Appl

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears J. Stradlin of Cobb 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 18 day of July 1838 that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company C, of 53 Regiment of Ga Volunteers Simms 's Brigade; that whilst engaged in such military service at the battle of Knoxville in the State of Tenn, on the 29 day of Nov. 1863 he was wounded as follows: By gunshot Striking the right Arm in the Elbow fracturing the bones, tearing the muscles flesh &c. rendering deponent practically incompetent to perform the ordinary manual avocations of life

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1894. I have heretofore been allowed a pension of $50. dollars, for the year 1893

Sworn to and subscribed before me, this, the 15th day of Mch 1894. } J. Stradlin

J.H. Stone Ord'y

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, }
Cobb County. }

I, J.H. Stone, Ordinary of said County, do certify that I am well acquainted with J. Stradlin 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 Mch 1894.

Affix your seal here

J.H. Stone
Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }
Cobb County. }

Personally appears J. Stradlin of Cobb 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 18 day of July 1838 that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company C, of 53 Regiment of Ga Volunteers, Simms 's Brigade; that whilst engaged in such military service at the battle of Knoxville in the State of Tenn, on the 29 day of Nov. 1863 he was wounded as follows: By gunshot Striking the right Arm bursting the bones of the Elbow and arm, whereby deponent is rendered practically incompetent to perform the Ordinary Manual avocations of life

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of $50. dollars, for the year 1894

Sworn to and subscribed before me, this, the 5 day of Mch 1895. } J. Stradlin

J.H. Stone

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, }
Cobb County. }

I, J.H. Stone, Ordinary of said County, do certify that I am well acquainted with J. Stradlin 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 Mch 1895.

Affix your seal here

J.H. Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

I, _____ hereby authorize _____
_____ of _____
to receive and receipt for the pension paid hereon and request that he remit same to
_____ by _____
at _____.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 1896.

_____ [L. S.]

Executed in presence of us

Spradlin, J.
C 53 Coffee
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)

No. 2611

SOLDIER'S PENSION.

1896.

Name J. Spradlin
County Coffee
Disability Rightlam
Amount, $ 50.
3/4 1896

RICHARD JOHNSON,
Secretary Executive Department.

WARRANT HANDED TO
G. Apch

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

I, _____ hereby authorize _____
_____ of _____
to receive and receipt for the pension paid hereon and request that he remit same to
_____ by _____
at _____.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 1897.

_____ [L. S.]

Executed in presence of

Spradlin, J.
Coffee County
ACT OF 24 OCT., 1887.
(For Those Already Enrolled.)

No. 1992

INVALID

SOLDIER'S PENSION.

1897.

Name J. Spradlin
County Coffee
Disability Right Cem
Amount, $ 50.
2/24 1897.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO
Apch

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. Spradlin of Cobb 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 38 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 6, of 53 th Regiment of Ga Volunteers, Simms's Brigade; that whilst engaged in such military service in the State of Tenn, on the 29th day of Novr 1863 he was wounded, injured or diseased as follows:

By bullet striking the elbow of the right arm fracturing the bones &c. Deponent is rendered practically incompetent to perform the ordinary manual avocations of life

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1896. I have heretofore as a resident of Cobb county been allowed a pension of $50. dollars, for the year 1895

Sworn to and subscribed before me, this, the 3rd day of Mch 1896. } J. Spradlin

J. M. Stone Ord

NOTE—State fully the nature of wound or character of disease which causes the disability, and *explain particularly* the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with J. Spradlin 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 3rd day of Mch 1896.

Affix your seal here.

J. M. Stone

Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears J. Spradlin of Cobb 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 18 day of July 1838 that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a Private in Company C, of 53 th Regiment of Ga Volunteers, Simm's Brigade; that whilst engaged in such military service in the State of Tenn, on the 29th day of Novr 1863 he was wounded, injured or diseased of follows:

By gunshot through right arm and elbow whereby applicant is rendered practically incompetent to perform the ordinary manual avocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Cobb county been allowed an invalid pension of $50. Dollars, for the year 1896

Sworn to and subscribed before me, this, the 23 day of Feby 1897. } J. Spradlin POST OFFICE Austell Ga

J. M. Stone Ord

NOTE—State fully the nature of wound or character of disease which causes the disability, and *explain particularly* the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA,
Cobb County.

I, J. M. Stone Ordinary of said County, do certify that I am well acquainted with J. Spradlin 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 23rd day of Feby 1897.

Affix your seal here.

J. M. Stone

Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

I, _____ hereby authorize _____

_____ of _____

to receive and receipt for the pension paid hereon and request that he remit same to

_____ by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 1898.

[L. S.]

Executed in presence of

_____

ACT OF 1897, 136.

(For Those Already Enrolled.)

No. 3150

INVALID SOLDIER'S PENSION.

1898.

Name J. Franklin

County Cobb

Disability Loss of

Amount, $ 3/2 1898

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Agent

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

J. Franklin
Cobb Co.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ County.

I, _____ hereby authorize _____

_____ of _____

to receive and receipt for the pension paid hereon and request that he remit same to

_____ by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 1899.

[L. S.]

Executed in presence of

_____

CODE SECTION 1250.

(For Those Already Enrolled.)

No. 2779

INVALID SOLDIER'S PENSION.

1899.

Name Joshua Franklin

County Cobb

Disability Arm

Amount, $ 50.

2½ 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

Agent

GEO. W. HARRISON, STATE PRINTER, ATLANTA

Franklin, Joshua
Cobb Co.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appeared Joshua Spradlin of Cobb 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 38; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company C, of 53 th Regiment of Ga. Volunteers, Simms 's Brigade; that whilst engaged in such military service in the State of Tenn. on the 29 day of Nov. 1863 he was wounded, injured or diseased as follows: Shot while engaged in the battle of Knoxville Tenn. was shot in the right arm, on account of which applicant is rendered practically incompetent to perform the manual operations of life

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1898. I have heretofore under said law as a resident of Cobb county been allowed an invalid pension of $50. Dollars, for the year 1897.

Sworn to and subscribed before me, this the 1st day of Mch 1898. J Spradlin POST-OFFICE Austell Ga

J M Stone

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,
Cobb County.

I, J M Stone Ordinary of said County, do certify that I am well acquainted with Joshua Spradlin 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 Mch 1898.

Affix your seal here.

J M Stone
Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appeared Joshua Spradlin of Cobb 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 18 day of July 18 38; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company C, of 53 th Regiment of Ga. Volunteers, Simms 's Brigade; that whilst engaged in such military service in the State of Tenn. on the 29 day of Nov. 1863, he was wounded, injured or diseased as follows: By Gunshot Wound Right Arm at the Elbow on account of which wound he is rendered Practically incompetent to perform the Manual operations of life

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 Cobb County been allowed an invalid pension of $50 Dollars, for the year 1898.

Sworn to and subscribed before me, this the 15th day of Feby 1899. J Spradlin POST OFFICE Austell Ga

J M Stone

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,
Cobb County.

I, J. W. Stone Ordinary of said County, do certify that I am well acquainted with Joshua Spradlin 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 Feby 1899.

Affix your seal here.

J M Stone
Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, J. Spradlin hereby authorize J M Stone of Marietta to receive and receipt for the pension paid hereon and request that he remit same to me by him at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 2nd day of Mch. 1900.

J Spradlin [L. S.]

Executed in presence of
T. J. Hamby

Spradlin, Joshua
Cobb Co.
CODE SECTION 1250.
(For Those Already Enrolled.)
No. 1298

INVALID
SOLDIER'S PENSION.
1900.

Name J. Spradlin
County Cobb
Disability Arm
Amount, $ 50.
Warrant issued Mar 7 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Stone

Geo. W. Harrison, State Printer, Atlanta.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

I hereby authorize of to receive and receipt for the pension paid hereon and request that he remit same to by at

IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of 1901.

[L. S.]

Executed in presence of

Spradlin, Joshua
Cobb Co.
CODE SECTION 1250.
(For Those Already Enrolled.)
No. 79

DISABLED
SOLDIER'S PENSION.
1901.

Name Joshua Spradlin
County Cobb
Disability Gun Shot
Amount, $ 50.
Jany 15 1901.

JOHN W. LINDSEY,
[redacted]
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears Joshua Spradlin of Cobb 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 18th day of July 1838; 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 6, of 53rd Regiment of Georgia Volunteers, Simms's Brigade; that whilst engaged in such military service in the State of Tenn., on the 29th day of Nov., 1863, he was wounded, injured or diseased as follows:

By gunshot striking right arm at the elbow on account of which wound he is rendered practically incompetent to perform the ordinary manual avocations of life.

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 Cobb County been allowed an invalid pension of $50 Dollars, for the year 1899.

Sworn to and subscribed before me, this the 6th day of Mch 1900. J. Spradlin POST OFFICE

J.M. Stone Ord

NOTE.—State fully the nature of wound or character of disease which causes the disability, and *explain particularly* the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,
Cobb County.

I, J.M. Stone Ordinary of said County, do certify that I am well acquainted with Joshua Spradlin 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 Mch 1900.

Affix your seal here.

J.M. Stone Ordinary Cobb County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Cobb County.

Personally appears Joshua Spradlin of Cobb County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 18th day of July 1838; 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 6, of 53th Regiment of Ga Volunteers, Simms's Brigade; that whilst engaged in such military service in the State of Tenn, on the 29th day of Nov 1863, he was wounded; injured or diseased as follows:

By gunshot striking right Arm at the elbow and which wound he is rendered practically incomputent to perform the ordinary manual avocations of life

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 Cobb County been allowed an invalid pension of $50 Dollars, for the year 1900.

Sworn to and subscribed before me, this the 7th day of January 1901. Joshua Spradlin Postoffice

John Awtry Ord

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,
Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with Joshua Spradlin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this 7th day of January 1901.

Affix your seal here.

John Awtry Ordinary Cobb County.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ County. }

I, _____ hereby authorize _____
_____ of _____
to receive and receipt for the pension paid hereon and request that he remit same to
_____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____
day of _____ 1902.

_____ [L. S.]

Executed in presence of

_____

Spratlin, Joshua
Cobb County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 190

DISABLED
SOLDIER'S PENSION
1902.

Name Joshua Spratlin
County Cobb
Co. C Regiment 53
Disability Some right arm
Amount, $50.00
4/15 1902.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Aft
Geo. W. Harrison, State Printer, Atlanta.

no data

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ County. }

I, _____ hereby authorize _____
_____ of _____
to receive and receipt for the pension paid hereon and request that he remit same to
_____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____
day of _____ 1903.

_____ [L. S.]

Executed in presence of

_____

Spratlin, Joshua
Cobb County

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

No. 194

DISABLED
SOLDIER'S PENSION
1903.

Name Spratlin
County Cobb
Co. C Regiment 53
Disability
Amount, $50.
1/23 1903.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Aft
Geo. W. Harrison State Printer, Atlanta.

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears Joshua Spratlin of Cobb 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 July 1838; that he enlisted in the military service of the Confederate States (or of the State of ____) during the war between the States, and served as a Private in Company C, of 53 th Regiment of Ga Volunteers, Simms 's Brigade; that whilst engaged in such military service in the State of ____, on the ____ day of Nov 1863, he was wounded, injured or diseased as follows:

By gun shot Stricking right arm at the Elbow on account of which wound he is rendered practically incapacitated to perform ordinary manual avocations of life

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 Cobb County, been allowed an invalid pension of $50.00 Dollars, for the year 1901.

Sworn to and subscribed before me, this the ____ day of Jan 1902.

Joshua Spratlin
Post-office Austell

John Awtrey Ordy

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,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with Joshua Spratlin 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 Jan 1902.

John Awtrey
Ordinary Cobb County.

Affix your seal here

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1902.

POWER OF ATTORNEY

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Cobb County.

Personally appears Joshua Spradlin of Cobb 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 C, of 53 th Regiment of Ga Volunteers, Simms 's Brigade; that whilst engaged in such military service in the State of Tenn, on the 29 day of Nov 1863, he was wounded, injured or diseased as follows:

By gun shot Stricking right Arm at the Elbow on account of which wound he rendered practically incapacitated to perform Ordinary manual avocations of life

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 Cobb County, been allowed an invalid pension of $50 Dollars, for the year 1902.

Sworn to and subscribed before me, this the 6 day of January 1903.

J. Spradlin
Post-office Powder Springs

John Awtrey

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,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with Joshua Spradlin 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 January 1903.

John Awtrey
Ordinary Cobb County.

Affix your seal here

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ COUNTY.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1904.

_____ [L. S.]

Executed in presence of

Spradlin, Joshua
Cobb Co

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

6-53 No. 2[illegible]

DISABLED
SOLDIER'S PENSION
1904.

Name Joshua Spradlin
County Cobb
Co. C 53rd Regiment Ga. Vol.
Disability
Amount, $ 50.00
1905 1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

Geo. W. Harrison, State Printer, Atlanta.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ COUNTY.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1905.

_____ [L. S.]

Executed in the presence of

Spradlin, Joshua
Cobb Co

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

6-53 No. 237

DISABLED
SOLDIER'S PENSION
1905.

Name Joshua Spradlin
County Cobb
Co. 6 Regiment 53
Disability
Amount, $ 50
1/23 1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
[illegible]

THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA
GEO. W. HARRISON, MANAGER, FOR STATE PRINTER

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, }
Cobb County. }

Personally appears Joshua Spradling of Cobb 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 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 C, of 53 th Regiment of Ga Volunteers Inf 's Brigade; that whilst engaged in such military service in the State of Tenn, on the 29 day of Nov 1863, he was wounded, injured or diseased as follows: By Gun Shot Striking right arm at the elbow on account of which wound he is rendered practically incompetent to perform ordinary manual avocations of life

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 Cobb County, been allowed an invalid pension of $50 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 5th day of Jany 1904. John Awtrey

Joshua Spradlin
Post-office .....

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and *explain particularly* the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA, }
Cobb County. }

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with Joshua Spradling the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 5th day of Jany 1904. John Awtrey

Affix your Seal here.

Ordinary Cobb County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1904.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, }
Cobb COUNTY. }

Personally appears Joshua Spradlin of Cobb County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the day of ..... 1865; that he enlisted in the military service of the Confederate States (or of the State of Privately) during the war between the States, and served as a Private in Company C, of 53 th Regiment of Ga Volunteers Inf 's Brigade; that whilst engaged in such military service in the State of Tenn, on the 29 day of November 1863, he was wounded, injured or diseased as follows: By Gun Shot Striking right arm at the elbow on account of which wound he is rendered practically incompetent to perform ordinary

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of $50 Dollars, for the year 1904.

Sworn to and subscribed before me, this the 4 day of January 1905. John Awtrey

J. Spradlin
Post-office .....

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and *explain particularly* the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA, }
Cobb COUNTY. }

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with Joshua Spradlin 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 4th day of January 1905. John Awtrey

Affix your Seal here.

Ordinary Cobb County.

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ COUNTY.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1906.

_____ [L. S.]

Executed in the presence of

_____

Spratlin, Joshua
Co. 6

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED.)

C-53 No. 177

DISABLED
SOLDIER'S PENSION
1906.

Name Joshua Spratlin
County Cobb
Co. 6 Regiment 53
Disability
Amount, $50.00
1/22 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
Att

THE PRINCIPLE PRINTING AND PUBLISHING CO., GEO. W. HARRISON, MGR.

6/1/06
no data

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ COUNTY.

I, _____, hereby authorize _____ of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ by _____ at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____ 1907.

_____ [L. S.]

Executed in presence of

_____

Spratlin, Joshua,
Cobb Co.,

CODE SECTION 1250.
(FOR THOSE ALREADY ENROLLED)

C-53 No. 185

DISABLED
SOLDIER'S PENSION
1907.

Name Joshua Spratlin
County Cobb
Co. 6 Regiment 53
Disability
Amount, $50.00
1/21 1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO
App.

GEO. W. HARRISON, STATE PRINTER, ATLANTA.

no date 6/1/06

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears Joshua Sprattlin of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the _____ day of _____ 18__; 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 6, of 53 Ga th Regiment of _____ Volunteers _____'s Brigade; that whilst engaged in such military service in the State of _____, on the _____ day of _____ 186__, he was wounded, injured or diseased as follows:

Disabled Arm

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 50 Dollars, for the year 1905.

Sworn to and subscribed before me, this the 8 day of Jany 1906.
John Awtrey

J Sprattlin
Post-Office _____

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and *explain particularly* the extent of the disability resulting from the wound or disease.

State of Georgia,
Cobb County.

I, ~~Jos~~ John Awtrey Ordinary of said County do certify that I am well acquainted with Joshua Sprattlin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal, this 8 day of Jany 1906.

John Awtrey
Ordinary Cobb County.

Affix your seal here

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Cobb County.

Personally appears Joshua Sprattlin of _____ County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the _____ day of _____ 18__; 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 6, of 53 Ga th Regiment of _____ Volunteers _____'s Brigade; that whilst engaged in such military service in the State of _____, on the _____ day of _____ 186__, he was wounded, injured or diseased as follows:

Disabled Arm

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of 50.00 Dollars, for the year 1906.

Sworn to and subscribed before me, this the 10 day of January 1907.
John Awtrey

J Sprattlin
Postoffice _____

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and *explain particularly* the extent of the disability resulting from the wound or disease.

State of Georgia,
Cobb County.

I, John Awtrey Ordinary of said County, do certify that I am well acquainted with Joshua Sprattlin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal this 10th day of January 1907.

John Awtrey
Ordinary Cobb County.

Affix your seal here

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1st, 1907.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Co. [illegible] County.

Joshua Spratlin of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office.) Joshua Spratlin Powder Springs Cobb Co Ga

2. How long and since when have you been a continuous resident citizen of this State? 74 Years

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service.) March 1862 Hemphill's Co. C 53 Ga Ry Infantry

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge.) Until Nov 29 1863 when Captured at Knoxville Tenn

6. When and where was your Company and Regiment surrendered or discharged from the Service? April 9 1865 Appomattox Va.

7. Were you actually present with your Command when it was surrendered or discharged? No

8. If you were not actually present, state specifically and clearly where you were. I had been held in Prison at Rock Island and was exchanged at Point Lookout on March 22nd 1865. and this all with the Command

a. Where was your Command when you left it? Knoxville Tenn

b. When did you leave the Command? Nov 29th 1863

c. For what cause did you leave? Captured at Knoxville

d. By whose authority did you leave?

e. For how long was your leave granted? In what way?

f. Why did you not return to your Command after leave expired?

g. In what way were you prevented? I was in prison

h. What effort did you make to return?

i. Were you captured during the war? Yes

j. If so, when, and where? In what prison were you held and when were you released? Knoxville Tenn Nov 29/63. Rock Island Exchanged March 22nd 1865

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) Nothing

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? None

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). None Live with my Children

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None

13. Are you drawing a pension of any amount from this State or the United States? Yes from the State

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? Have Applied Lost Pension Last Drawing and was approved March last Application dated Approved

Sworn to and subscribed before me, this the 26 day of September 1912

J M Hames Ordinary,

of [illegible] County.

Joshua Spratlin

Application for Pension, Joshua Spratlin, Co. C, 53rd Ga. Inf. Filed Dec 6 1912

K-53 Adj Mill $30

Confederate Soldier's Application.

UNDER ACT 1910.

County [illegible]

Name Joshua Spratlin

Company C

Regiment 53 Ga Infty

Approved

J. W. LINDSEY, Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta

ENTERED RUSTER OFFICE

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Fayette County.

W T Glower of said State and County is hereby presented as a witness in support of the application of Joshua Sprattlin for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? W T Glower, live in Fayetteville Fayette Co Ga.

2. How long and since when have you known Joshua Sprattlin the applicant? 45 years

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? in Cobb County Ga. lived in this State all his life

4. When, where and in what Company and Regiment did Joshua Sprattlin enlist during war from 1861 to 1865? (Give date and place) 1 day May 1862 Fayetteville Ga. Co. 6. 53 Rept Ga

5. How did you obtain your information of this Service? I was present

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) about 3 years

7. When and where was his Command surrendered or discharged (give date and place) 9 April 1865. at Appomattox C.H. Va

8. Were you personally present at the Surrender? I was captured 6 April 1865

9. If not, where were you and how came you there? I was captured 6 April 1865

10. Was the applicant personally present with his Command at surrender? no

11. If not where was he and how came him there? was at home on Parole waiting to be Exchanged.

12. When did he leave his Command? 29 Nov 1863 Where was his Command when he left it? at Ft Lowden Tenn for what cause did he leave? was captured By whose authority did he leave Taken Prisoner and how long was he granted leave? Taken Prisoner How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was present and know of my own knowledge

13. In what way was he prevented from returning to his Command? was in Prison How do you know? I saw him in March 1865. right out of Prison.

14. What effort did he make to return to his Command and how do you know? he was in prison up to March 1865

15. Was applicant captured as a prisoner yes If so, when and where? 28 Nov 1863 at Ft Lowden Tenn In what prison was he held? Rock Island and when released March 29th 1865

Sworn to and subscribed before me, this the 27 day of Sept 1912

W T Glower

S B Lewis Ordinary,
of Fayette County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,
Cobb County.

Personally before me comes J M Caldwell who on oath says that they are freeholders residing in said County and we know Joshua Sprattlin the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.)

None

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.)

None

2. When and to whom was it sold or given to?
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant?
5. What disposition was made of the proceeds of the sale?
6. Was the disposition of this property made in good faith and full values? — or was it made to obtain a pension?

Sworn to and subscribed before me, this the 3 day of Oct 1912

J M Caldwell

J M Gann Ordinary,
of Cobb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb County.

I, J M Gann Ordinary of said County, certify that I know the applicant Joshua Sprattlin for Pension is the person he represents himself to be and resides in said County. That I also know the witness swearing to the service and J M Caldwell who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of Cobb shows that J Sprattlin and wife value for tax is in 1908 $0 for 1909 $0 for 1910 $0

Sworn under my hand and official seal of office this 3 day of Oct 1912

J M Gann Ordinary,
of Cobb County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary and certified by him.
4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of freeholders unnecessary.

L B Lewis Ordinary,

of Fayette County.

Audited Feb. 7th 1889.

Wm A Wright
COMPTROLLER-GENERAL.

Sobb

Maimed Soldiers.

Voucher No. 135

Amount, $ 50

Paid to Joshua Spradlin

For Right arm disabled

Deby 7 1889.

Included in Warrant No.

issued to Treasurer

1889.

WARRANT CLERK

W. J. Campbell, State Printer, Constitution Job Office.

Applicant

Audited 18

COMPTROLLER-GENERAL.

Cobb

Maimed Soldiers.

Voucher No. 869

Amount $ 50.

Paid to Joshua Spradlin

For Arm disabled

Deby 1 / 1890

Included in warrant No.

issued to Treasurer

/ 18

WARRANT CLERK.

W. J. Campbell, State Printer, Constitution Job Office.

Applicant

No. 135

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga Feby 7 1889

Mr. Joshua Spradlin of the County of Cobb 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 Right Arm disabled

He is entitled to receive the sum of Fifty 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.

PAID STATE OF GEORGIA

GOVERNOR.

By the Governor,

CLERK EXECUTIVE DEPARTMENT.

$50

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/ Dollars,

per above voucher, this 7 of Feby 1889.

Joshua Spradlin

No. 869

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. } Atlanta, Ga., Feby 11 1890

Mr. Joshua Spradlin of the County of Cobb 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 Arm disabled

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 [illegible] and return same to Executive Department for warrant.

PAID TREASURER'S OFFICE STATE OF GEORGIA

GOVERNOR.

By the Governor,

CLERK EXECUTIVE DEPARTMENT.

$50.00

RECEIVED OF STATE TREASURER, R. U. HARDEMAN;

Fifty 00/ Dollars,

per above voucher, this 10 of Feb 1890

Joshua Spradlin

Audited Feb. 13 1891.

Wm A Wright

COMPTROLLER GENERAL.

Spradlin, Joshua

Cobb –

1891.

Maimed Soldiers.

Voucher No. 754

Amount $ 50

Paid to Joshua Spradlin

For Am'd

Feby 13 1891.

Included in warrant No.

issued to Treasurer,

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

1891.

No. 754

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. Feby 13 1891.

Mr. Joshua Spradlin of the County of Cobb 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 Arm dis'd

He is entitled to receive the sum of Fifty & 00/ Dollars for such disability, the same being the allowance due for the year ending October 24, 1891.

The Treasurer will pay the same and hold his receipt on this voucher and return same to Executive Department for warrant.

TREASURER'S OFFICE PAID STATE OF GEORGIA

H. J. Nordan
GOVERNOR.

By the Governor,
W H Harrison
SEC'Y EXECUTIVE DEPARTMENT.

$50

RECEIVED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

Fifty & 00/ Dollars,

per above voucher, this 13 of Feby 1891.

Joshua Spradlin

On Roll Sprattin Annie Cobb Co
Ord for 1917

Note Rec

E

No.....

C-53

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910.

County Cobb

Name Annie Sprattin

Widow of Joshua Sprattin

Company C, 53 Ind Infty

Approved

E 1940

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

11-1-1916

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,
Cobb County.

Personally before me comes Annie Spratlin of said County, who, after being duly sworn, on oath says, that she is the widow of J Spratlin to whom in the County of Fayett State of Ga she was married on the 11 day of Nov 1905 and that she remained his wife, and resided with him to the date of his death in August 20 1916 and that she has not since his death remarried. At the time of his death he was a resident of Cobb County, in said State of Georgia, and he was on the Service Pension Roll of the State and paid a pension of $60.00 in Cobb County for 1916 per annum, on account of being a soldier in Company C 63 Ga Regiment Volunteers (Volunteers of State Militia.)

At the death of John Spratlin he was in the use and possession of the following property No property

of the cash value of $

What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully.)

Acres land None $

Horses and Mules $

Hogs, Cows, etc $

Total Cash value of all property $

That she is now a bona fide resident citizen of said County of Cobb and she has so continuously resided since Cobb has been formed 19

Sworn to and subscribed before me, this the 2 day of October 1916

Annie her X Spratlin
Mark

J M Camp Ordinary,
of Cobb County.

Affidavit of Witnesses to Prove Marriage and to Whom--Date of Death of Husband.

STATE OF GEORGIA,
Cobb County.

Personally before me come J N Camp known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. Annie Spratlin who made the foregoing affidavit, is the lawful widow of John Spratlin who died in Cobb County in said State of Ga on 20 day of Aug. 1916 and that she has not since remarried. That she became the wife of — on the — day of 18 — and that she and he had resided together as man and wife continuously since for 33 4 years to my Knowledge and that the Same was the same man who was on the pension roll of said State from Cobb County when he died.

Sworn to and subscribed before me, this the 2 day of Oct 1916

J N Camp

J M Camp Ordinary,
of Cobb County.

Mrs Annie Spratlin
Cobb
Co
1917

No.

C-53

Widow's Application

To Be Put on Roll in Her Own Right When Husband Was on the Indigent Roll or Put on Under Act of July 11, 1910.

County Cobb

Name Annie Spratlin

Widow of John Spratlin

Company C 63 Ga Regt

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. P. BYRD, State Printer, Atlanta.

GEORGIA FAYETTE COUNTY_

I, J, J, Davis, Ordinary of Fayette County Georgd do hereby certify that this instrument of writing contains a true and correct copy of the marriage license of Joshua, Spratlin, and Mary, Ann, Hightower, found in Book, C_ Page, 211, record of marriage license in my office, Given under my hand and seal.
this the 29th day of September, 1916,

J J Davis
Ordinary.

MARRIAGE LICENSE

OF

AND

Issued 191

and Recorded on Page *Book*

of Marriage Licenses.

Ordinary.

Foote & Davies Co. Atlanta.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,
.....County.

Personally before me comes.....who after being sworn on oath says, that they are freeholders of said County, and that they know.....of said County and knew her said husband.....at his death on the.....day of.....191 ..... that she and he were in the use, possession and control of the following property at his death to wit:.....

.....

of the value of $..... That she is now in the use, possession and control of the following property to wit:.....

.....

of the value of $.....

Sworn to and subscribed before me, this the .....day of.....191 .....

.....Ordinary,

of.....County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb
.....County.

I, J M Brown.....Ordinary of said County, do certify, that, I know Mrs. Fannie Spratlin.....the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 30 March 19 65 Broadnax

That I also know J. N. Camp.....witness as to marriage and I also know .....who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Cobb.....County shows that .....returned property to the amount of 0.....for 1908 $.0.....for 1909 $.0.....for 1910 $.0.....

Sworn under my hand and official seal of office this 23.....day of Oct.....1916.

(SEAL.) J M Brown.....Ordinary.

Cobb.....County.

NOTES 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the following words "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who married prior to first January 1870, are entitled.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some present, or by general reputation.

MARRIAGE LICENSE

OF

AND

Issued 191

and Recorded on Page Book

of Marriage Licenses.

Ordinary.

Foote & Davies Co., Atlanta.

of.....County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Cobb County.

I, J. W. Brown, Ordinary of said County, do certify, that, I know Mrs. Fannie Shanklin the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the 30 years to May Knowledge

That I also know J. N. Camp witness as to marriage and I also know .....who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

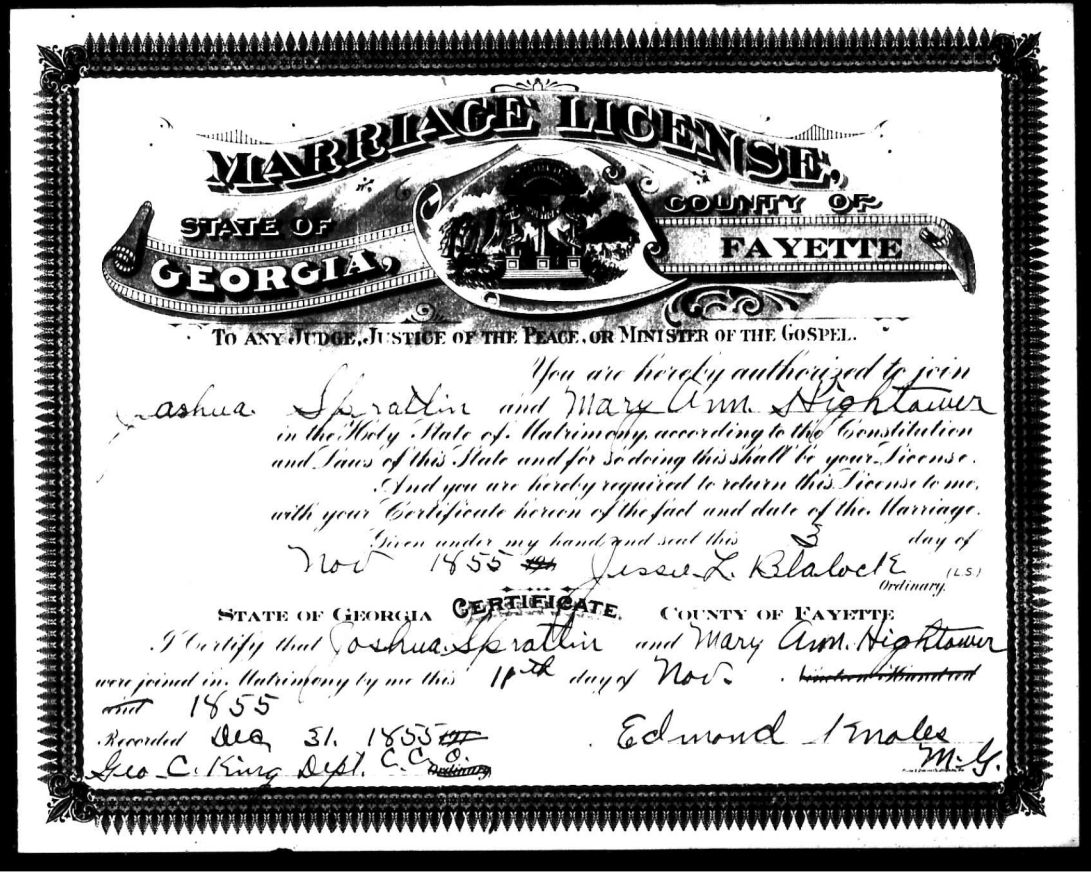
That the tax Books of Cobb County shows that .....returned property to the amount of 0 for 1908 $.0 for 1909 $.0 for 1910 $.0

Sworn under my hand and official seal of office this 23 day of Oct 1916

(SEAL.) J. W. Brown Ordinary.

Cobb County.

NOTES 1. Before any questions are answered, the Ordinary shall swear applicant and the witness in the following words "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. All affidavits must be made before the Ordinary.
4. Only widows who married prior to first January 1870, are entitled.
5 Attach certified copies of marriage license if obtainable. If not, prove marriage, by some present, or by general reputation.



MARRIAGE LICENSE,

STATE OF GEORGIA, COUNTY OF FAYETTE

TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

You are hereby authorized to join Joshua Spratlin and Mary Ann Hightower in the Holy State of Matrimony, according to the Constitution and Laws of this State and for so doing this shall be your License.

And you are hereby required to return this License to me, with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this 3 day of Nov 1855 ~~th~~ Jesse L. Blalock (L.S.) Ordinary.

STATE OF GEORGIA CERTIFICATE. COUNTY OF FAYETTE

I Certify that Joshua Spratlin and Mary Ann Hightower were joined in Matrimony by me this 11th day of Nov. ~~Nineteen Hundred and~~ 1855

Recorded Dec 31. 1855 ~~th~~ Edmond Knoles M.G.

Geo C. King Dept. C.C.O. ~~Ordinary~~

Spraggens, John
Cobb County
On p. 19 R

Code Section 1250.

No. on 1905

INVALID

SOLDIER'S PENSION,

190 5

Name John Spraggens
County Cobb
Co. H. 23 Ga. Regt.
Disability Rupture
Amount, $ 5 0

190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write Name of Applicant, Company and Regiment on back as indicated above.

Geo. W. Harrison, State Printer, Atlanta.

9/28 05

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County,

I, hereby authorize
of to receive and receipt for the pension allowed and
request that he remit same to by
at

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of 190

[L. S.]

Executed in the presence of

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA, }
_____ County. }

I, _____ hereby authorize _____

of _____ to receive and receipt for the pension allowed and

request that he remit same to _____ by _____

at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____

day of _____ 190__

_____ [L. S.]

Executed in the presence of

_____

Sprague Pitts Co. Ga.

Code Section 1250.

No. _____ Dec 19 05

INVALID

SOLDIER'S PENSION,

190 5

Name John Sheggen

Co. K 23 Ga. Regt.

Disability Rupture

Amount, $ 5

190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write Name of Applicant, Company and Regiment on back as indicated above.

Geo. W. Harrison, State Printer, Atlanta.

9/28/01

The Instructions as Set Out in the Notes Must be Observed.

Form No. 1.

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

STATE OF GEORGIA, }
Cobb County. }

PERSONALLY appears John Sheggen of said Cobb County, State of Georgia, who being duly sworn, says on oath that he was born on the 24th day of December 1838, that he is a *bona fide* citizen and resident of Georgia, and has been continuously since the _____ day of _____ 1840, that he enlisted in the military service of the Confederate States (or the State of _____) on the 31st day of August 1861, during the war between the States, and served in Company A, of 23rd th Regiment of Ga. Volunteers Colquitt Brigade, and was honorably discharged on the _____ day of August 1862; that whilst engaged in such military service, and in line of duty in the State of Virginia, on the _____ day of Spring of 1862 he was disabled or wounded as follows: While on a forced march from Yorktown to Richmond in Spring of 1862, Marching day and night, applicant was ruptured on both sides. The rupture was so severe that when we reached Richmond I was sent to the hospital for treatment, at Chimborazo hospital, where I remained until August 1862. I was then discharged from the service on recommendation of the Dr. ~~Clement~~ Wilson, the Regimental Surgeon. I was honorably discharged on account of the disability arising from the above mentioned rupture. Said rupture still exist and is permanent, and renders me practically incompetent to perform the ordinary manual afocations of life.

Where was command surrendered? At Greensboro N.C. I am informed.

Was applicant present? No If not, where was he? _____ How come there? discharged

And by whose authority? State fully: By authority of Commander based on recommendation of Dr. Wilson Clement

Deponent desires to participate in the benefits of Section 1250 of the Code, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ending October 26th, 190__.

Sworn to and subscribed before me, this the 22 day of Sept. 1905.

John Sheggen

John Lindsey Ordinary. Post Office _____

NOTE.—State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claim is based on disease, give full and connected history of disease, tracing it directly to the service.

NOTE.—Do not trouble to mention wounds which do not disable.

NOTE.—The Ordinary will see that all blank spaces are filled when the affidavits are signed.

Form No. 5.

POWER OF ATTORNEY.

STATE OF GEORGIA,
County.

I, _____ hereby authorize _____
of _____ to receive and receipt for the pension allowed and
request that he remit same to _____ by _____
at _____

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____
day of _____ 190 _____ [L. S.]

Executed in the presence of

Spraggens, Sidney
Cobb County
On 9/19/05

Code Section 1250.

No. _____ on 1905

INVALID
SOLDIER'S PENSION,
1905

Name John Spraggen
County Cobb
Co. H. 23 Ga. Regt.
Disability Rupture
Amount, $ 5 d 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write Name of Applicant, Company and Regiment on back as indicated above.

Geo. W. Harrison, State Printer, Atlanta.
9/28/05

The Instructions as Set Out in the Notes Must be Observed.

Form No. 1.

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

STATE OF GEORGIA,
Cobb County.

PERSONALLY appears John Spraggen of said Cobb County, State of Georgia, who being duly sworn, says on oath that he was born on the 24th day of December 1838, that he is a *bona fide* citizen and resident of Georgia, and has been continuously since the _____ day of _____ 1840, that he enlisted in the military service of the Confederate States (or the State of _____) on the 31st day of August 1861, during the war between the States, and served in Company H. of 23rd th Regiment of Ga. Volunteers Colquitts Brigade, and was honorably discharged on the _____ day of August 1862: that whilst engaged in such military service, and in line of duty in the State of Virginia, on the _____ day of Spring of 1862 he was disabled or wounded as follows: While on a forced March from Yorktown to Richmond in Spring of 1862, Marching day and night, applicant was ruptured on both sides. The rupture was so severe that when we reached Richmond I was sent to the hospital for treatment, at Chimborazo hospital, where I remained until August 1862. I was then discharged from the service on recommendation of the Dr. ~~Clement~~ Wilson Clement, the regimental surgeon. I was honorably discharged on account of the disability arising from the above mentioned rupture. Said rupture still exists and is permanent, and renders me practically incompetent to perform the Ordinary manual avocations of life.

Where was command surrendered? At Greensboro N.C. I am informed.

Was applicant present? No If not, where was he? ~~a~~ How come there? discharged

And by whose authority? State fully: By authority of Commander based on recommendation of Dr. Wilson Clement.

Deponent desires to participate in the benefits of Section 1250 of the Code, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year thereunder, ending October 26th, 190...

Sworn to and subscribed before me, this the 22 day of Sept. 1905. John Spraggen

John Dudley, Ordinary. Post Office _____

NOTE.—State fully nature of wound or character of disease which causes the disability, and *explain particularly* the extent of the disability. If claim is based on disease, give *full and connected history* of disease, tracing it directly to the service.
NOTE.—Do not trouble to mention wounds which do not disable.
NOTE.—The Ordinary will see that *all* blank spaces are filled when the affidavits are signed.

Form No. 2.

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA,
Floyd County.

Personally appears before me, the undersigned Ordinary in and for said County J. T. Burgess, D. Carruth & R. E. Lawhon and personally known to me to be trustworthy citizens, each of whom, being duly sworn according to law, severally say under oath, that they are personally and well acquainted with John Spraggen whose application is herewith presented for a pension, that he has resided in this State continuously since the day of 18 40, that he served in Company A of the 23 Regiment of Ga. Vols. Brigade, and from our personal knowledge he, while in line of duty, was injured by the service as follows: (*give full statement, and tell in your own language when, where, and how the injury happened, or the disease was contracted, and to what extent applicant is disabled from work as a direct result thereof. If he does any labor or can do any, state what.*)

While on forced March from Yorktown to Richmond in Spring of 1862, March day and night the applicant John Spragin, was ruptured on both sides, and on that account he was disabled for duty and discharged from the service by Dr. Wilson Clements, the army surgon, and sent home on account of said disability, and said rupture contracted in the war as above stated, renders him practically incompetent to perform the Ordinary manual avocations of life

Where was applicant's command surrendered? At Greensboro, N.C. April 26th 1865.

Was he with it? No Were all of you present? Yes.

If not, where was he? Had been discharged on account of disability as above stated.

Where were you all? All present at Surrender.

How do you know the facts you state to be true? Were present in Co. at the time applicant was ruptured.

We personally know above stated facts. We were with him in the army and have known him ever since.

He was honorably discharged or retired from the service on day of 1862. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1862

We have no interest in the recovery of a pension by him.

J. T. Burgess
D. Carruth
R. E. Lawhon

Sworn to and subscribed before me, this 20 day of Sept. 1905
John D. Davis Ordinary

I do certify that I J. T. Burgess is a person of trustworthy character and that the statements made by the affiants in the foregoing affidavit are entitled to credit.
J. T. Burgess

Carruth Sworn to and subscribed before me this Sept. 22nd 1905.
John Dunlap Ordinary Floyd County Ga.

Note 1.—The Ordinary will see that the full text of the affidavit is understood by the witnesses, and that they are legally qualified to testify.
2.—Witnesses are asked to make their statements full and explicit, tracing disability to its true cause.
3.—All blank spaces must be filled when signed.
4.—Witnesses must be sworn and subscribed before the Ordinary.

Form No. 3.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA,
County.

Personally comes before me Ordinary of said County, and , both known to me as reputable physicians of said County, who, being severally sworn, say on oath, that they have carefully examined and after such personal examination, say that the present condition of applicant is as follows:

and that such condition is permanent. Said condition arises from the following facts:

We have treated applicant professionally for years, and his condition, as above stated, does arise from hereditary or congenital causes, or from vicious or intemperate habits.

Sworn to and subscribed before me, this day of 190

Ordinary.

Note 1.—*State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state its location, character and present condition. If from disease, give its nature and character, and its causes or origin, as understood by affiants.*
Note 2.—The physicians will be careful to fill every blank space in oath.

Form 4

STATE OF GEORGIA,
Cobb County.

I, John Dunlap, Ordinary of said County, do certify that I am well acquainted with John Spraggen the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, *and he is disabled, as he claims*, and I know he is the individual he represents himself to be, and that he resides in this County and has been a bona fide resident since the 1st day of July 1886

I also certify that the witnesses, to-wit: D. Carruth and R. E. Lawhon are persons of respectability, that their statements are worthy of full credit and belief, *and that the full text of the affidavit was read to and understood by them before they signed the same.*

Given under my official signature and seal, this 27th day of Sept. 1905.

John Dunlap
Ordinary Cobb County.

All amending proofs must be executed with the same formality as original proofs, and the Ordinary must so certify.

Form No. 8.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA,
Cobb County.

Personally comes before me John Awtry Ordinary of said County, G.W. Smith and E.M. Bailey, both known to me as reputable physicians of said County, who, being severally sworn, say on oath, that they have carefully examined John Spragins and after such personal examination, say that the present condition of applicant is as follows: He is supblind on both eyes and Scrotal sack is so large that it is difficult for him to do any kind of work that requires much walking. He is almost totally blind in his right eye. He has Mitral Regurgitation.

and that such condition is permanent. Said condition arises from the following facts: He has double Inguinal Hernia. He has a Cataract in right eye, and has organic heart trouble.

We have treated applicant professionally for Past years, and his condition, as above stated, does not arise from hereditary or congenital causes, or from vicious or intemperate habits.

Sworn to and subscribed before me, this 13th day of Sept 1905.
John Awtry
Ordinary.

G.W. Smith M.D.
E.M. Bailey M.D.

NOTE 1.—*State fully the physical condition and especially the extent of disability. If disability results from wound or injury, state cause and present condition. If from disease, give its nature and character, and its causes or*

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John Spragins hereby authorize John Awtry, of to receive and receipt for the pension paid hereon, and request that he remit same to me by Acworth, Ga. at Ark.

In Witness Whereof, I have hereunto set my hand and seal, this 20 day of June 1906.

John Spragins [L. S.]

Executed in the presence of

Spragins, John
Cobb County

Code Section 1260.
(FOR THOSE ALREADY ENROLLED.)
No. 27 1

DISABLED
SOLDIER'S PENSION
1906.

Name John Spragins
County Cobb
Co. A, 23 Regiment Ga. Inf.
Disability Disease.
Amount, $ 50 1906.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

The Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr.

POWER OF ATTORNEY.

STATE OF GEORGIA,
Cobb County.

I, John Awtrey, hereby authorize John Awtrey of _____ to receive and receipt for the pension paid hereon, and request that he remit same to _____ by _____ at _____

In Witness Whereof, I have hereunto set my hand and seal, this 17th day of [illegible] 1907.

John Spraggins [L. S.]

Executed in presence of
[illegible]

Spraggins, John,
Cobb Co.

Code Section 1280.
(FOR THOSE ALREADY ENROLLED)
No. 250

DISABLED
SOLDIER'S PENSION
1907.

Name John Spraggins
County Cobb
Co. H 23 Regiment
Disability Disease
Amount, $50.00

1907.

JOHN W. LINDSEY,
Commissioner of Pensions.

JAN 27
WARRANT HANDED TO
6

Geo. W. Harrison, State Printer, Atlanta.

Date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Cobb County.

Personally appears John Spraggins of Cobb 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 before the war; 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 H 23 Ga th Regiment of _____ Volunteers _____'s Brigade; that whilst engaged in such military service in the State of _____, on the _____ day of _____ 186__, he was wounded, injured or diseased as follows:

Disease

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1906. I have heretofore, under said law, as a resident of Enrolled County, been allowed an invalid pension of 50 Dollars, for the year 1905.

Sworn to and subscribed before me, this the 20 day of Jany 1906.
John Awtrey

John Spraggins
Post-Office _____

Note.—State fully the nature of the wound or character of disease which causes the disability, and *explain particularly* the extent of the disability resulting from the wound or disease.

State of Georgia,
Cobb County.

I, John Awtrey Ordinary of said County do certify that I am well acquainted with John Spraggins 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 20 day of January 1906.

John Awtrey
Ordinary Cobb County.

Affix your seal here

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Cobb County.

Personally appears John Shaggen of Cobb 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 1 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 A, of 23 th Regiment of Ga, Volunteers 's Brigade; that whilst engaged in such military service in the State of , on the day of 186 , he was wounded, injured or diseased as follows:

Disease

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1907. I have heretofore, under said law, as a resident of Cobb County, been allowed an invalid pension of fifty Dollars, for the year 1906.

Sworn to and subscribed before me, this the 17 day of July 1907.

John Awtry Ord.

Signature of Applicant

Postoffice

NOTE.—State fully the nature of the wound or character of disease which causes the disability, and *explain particularly* the extent of the disability resulting from the wound or disease.

State of Georgia,

Cobb County.

I, John Awtry Ordinary of said County, do certify that I am well acquainted with John Shaggens the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County.

Given under my official signature and seal this 17 day of January 1907.

John Awtry

Ordinary Cobb County.

Affix your seal here

NOTE.—Fill all blanks and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1st, 1907.

Sprinkle, Isaac R.
Disallowed Cobb County
1905

No.

INDIGENT PENSION.

190

Name I. R. Sprinkle

County Cobb

Co. H. 1st Ga. Res. Regt.

Approved 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write name of Applicant, Company and Regiment on back as indicated above.

Geo. W. Harrison, State Printer, Atlanta, Ga.
9/11/05

Pension Office
9/29-1905
Is the owner of property of a saleable value so, 300 & not so indigent as the law provides
Not entitled to the Indigent Pension
J. W. Lindsey
Comm. of Pensions

POWER OF ATTORNEY.

STATE OF GEORGIA,
COUNTY.

I, hereby authorize

of

to receive and receipt for the pension allowed and request that he remit same to

at by

Witness my hand and seal, this day of 190

[L. S.]

Executed in presence of

Sprinkle, Isaac R.
Des. of Cobb County

No. _____

INDIGENT PENSION.

190

Name I. R. Sprinkle
County Cobb
Co. H. 1st Ga. Res. Regt.
Approved _____ 190

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write name of Applicant, Company, and Regiment on back as indicated above.

Geo. W. Harrison, State Printer, Atlanta, Ga.
9/11/05

_____ COUNTY.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 190__

_____ [L. S.]

Executed in presence of

_____ COUNTY.

I. R. Sprinkle of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State County and post office).
I. R. Sprinkle, Austell, Cobb County, Ga.

2. How long and since when have you been a resident of this State? Nearly 55 years, Since 1850-

3. When and where were you born? North Carolina 1826-

4. When and where and in what company and regiment did you enlist or serve? June 1864, Coweta County, Ga. at Newnan, Co. H. 1st Ga. Reserves

5. How long did you remain in such company and regiment? Untill Close of War

6. When and where was your company and regiment surrendered and discharged? Andersonville, Ga. at Close of War.

7. Were you present with your company and regiment when it was surrendered? No.

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I left Command April 6th 1865 on 20 days furlough + (See furlough attached).

9. How much can you earn (gross) per annum by your own exertions or labor? Nothing.

10. What has been your occupation since 1865? Farming as long as able.

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? 1st & 2nd grounds.

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? Could not earn support for 4 or 5 years- I am 79 years old and very feeble from age and general infirmity.

13. What property, real and personal, or income, do you possess, and its gross value? I own 34 acres of poor land, value 300 dollars. Have nothing else and this dont support me-

14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same? I had a horse & wagon & farm tools. Have now nothing left but the land.

15. In what County did you reside during those years, and what property did you then return for taxation? Cobb County - Returned property mentioned above-

16. How were you supported during the years 1899, 1900, 1901 and 1902? 03 & 04. Partly by my work and partly by selling what I had.

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Dont know what it cost & was not able to do but little.

18. What was your employment during 1898, 1899, 1901 and 1902? What pay did you receive in each year? Hauled a little wood - Could do very little at my age-

19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead, or other property? Their ages and how employed? Wife & two children - Have no means except what have already stated - Wife's age about 40 - One step daughter age 15 - One son age 10-

20. Are you receiving any pension? If so, what amount and for what disability? None-

21. Have you ever made an application for pension before? No

22. How many applications have you ever made and under what class? None-

Sworn to and subscribed before me this the 29th day of July 1905

J. R. Sprinkle
Applicant.

John Gurley Ordinary,
of Cobb County.

Every Question MUST Be Answered

I got a little rent from my land, but is not sufficient to support me-

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Fayette COUNTY.

Frank Webb of said State and County, having been presented as a witness in support of the application of I R Sprinkle for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? Frank Webb in Fayette County Ga
2. Are you acquainted with I R Sprinkler, the applicant; if so, how long have you known him? yes forty two years
3. Where does he reside, and how long and since when has he been a resident of this State? in Cobb County Ga Since June 1864
4. When, where and in what company and regiment did he enlist, and how do you know? June 1864 Co H 1st Ga Reserves I was in the same command
5. Were you a member of the same company and regiment? I was in the same command
6. How long did he perform regular military duty? untill the close of the war) closed
7. When and where was his command surrendered? at Andersonville Ga when the war
8. Were you present when it surrendered? I was
9. Was applicant present? No
10. If he was not present, where was he? at home with a furlow
When did he leave his command? his furlow shows For what cause?
By what authority he left? on a furlow How do you know all of this? I was there at the time he went home
11. What property, effects or income has the applicant? (Give your means of knowledge.) Know that is all he owns 34 acres of land valued at 300 dollars I see him often and
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? just what is above stated and no more
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? none
14. What is the applicant's occupation and physical condition? he is not able to do any labor in no way as he has Chronic Rheumatism and 79 years old
15. Is the applicant unable to support himself by labor of any sort, if so, why? he is not able to do any kind of labor can hardly walk about
16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? Partly by his work and by selling what stock he owned
17. What portion of his support for these four years was derived from his own labor or income? as above stated
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? as above stated not able to work, ~~his wife and two children~~
19. Who composes family? What property have they? Children's age and their earning capacity? his wife and two children
20. What interest have you in the recovery of a pension by this applicant? none

Sworn to and subscribed before me, this the 1 day of Sept 1905.
F A Webb Witness.
S B Lewis Ordinary.

I certify that F A Webb is a resident of this county and is worthy of faith & credit in his statement sworn under my hand & seal this 1 day sept 1895
S B Lewis ordinary

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me J. D. Malone and Gilbert Tennent, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully I R Sprinkle, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

Has Chronic Rheumatism, is quite feeble from age, and is unable to do sufficient manual labor to earn a support

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 9th day of Sept 1905
John Dwelley Ordinary.

J. D. Malone M.D.
Gilbert Tennent M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I, John Dwelley Ordinary, in and for said County, hereby certify that the applicant I. R. Sprinkle resides in said County, and has been a bona fide resident of this State since the 1st day of January 1894 and that the witnesses, viz.:

are of trustworthy character, and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digest of Cobb County shows that applicant returned for taxation in his name in 1902 345 Dollars of property, and in 1903 325 Dollars of property; in 1904 310 Dollars of property; in 1905 310 Dollars of property.

In my opinion the foregoing claim is made in good faith.

Witness my hand and seal of office, this 9th day of September 1905
John Dwelley Ordinary,
of Cobb County.

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

POWER OF ATTORNEY.

STATE OF GEORGIA,
_____ COUNTY.

I, _____ hereby authorize _____ of _____ to receive and receipt for the pension allowed and request that he remit same to _____ at _____ by _____

Witness my hand and seal, this _____ day of _____ 190__

_____ [L. S.]

Executed in presence of

Ordinary Isaac R. Cobb Co. Oct 1908

No. _____

INDIGENT PENSION.

190 8

Name Isaac R. Sprinkle

County Cobb

Co. H 1st Ga Regt.

Approved _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Ordinary will write name of Applicant, Company and Regiment on back as indicated above.

Franklin Printing and Publishing Co., Geo. W. Harrison, Mgr., Atlanta, Georgia.

3/25

Every Question MUST Be Answered.

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,
Cobb COUNTY.

Isaac R. Sprinkler of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.) Isaac R Sprinkler. Austell Ga. Cobb Co. R + D No 21
2. How long and since when have you been a resident of this State? Since Dec 1860
3. When and where were you born? Terry County N.C. Nov 7 = 1826
4. When and where and in what company and regiment did you enlist or serve? June 1864. at Newnan Ga Co H 1st Ga regiment
5. How long did you remain in such company and regiment? Until Close of the War
6. When and where was your company and regiment surrendered and discharged? At Andersonville in April 1865
7. Were you present with your company and regiment when it was surrendered? No
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? Left on 20 days furlough dated April 6th 1865
9. How much can you earn (gross) per annum by your own exertions or labor? Nothing
10. What has been your occupation since 1865? Farmer
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? Age + poverty, Infirmity + poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? Applicant has Not been able for 7 yrs past to earn a support. is Eighty years of age + very feeble
13. What property, real and personal, or income, do you possess, and its gross value? None
14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same? owned 34 acres land some sold for support and payment of certain Judgments + other liens + debts
15. In what County did you reside during those years, and what property did you then return for taxation? Cobb = 34 acres land
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? by applicant's labor on the 34 acres of land
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? Sixty five dollars
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year? Farming
19. Have you a family? If so, who composes such family? Give their means of support. Have they a homestead, or other property? Their ages and how employed? Wife one child ~~[illegible]~~ Not dependent upon applicant in fact Not living with applicant
20. Are you receiving any pension? If so, what amount and for what disability? No
21. Have you ever made an application for pension before? Yes
22. How many applications have you ever made and under what class? One under this Class

Sworn to and subscribed before me this the 5 day of March 1907

J R Sprinkle
Applicant.

J Mulloway
Ordinary
of Cobb County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Cobb COUNTY.

D F Moore of said State and County, having been presented as a witness in support of the application of Isaac R. Sprinkles for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? ~~Isaac R. Sprinkles~~ D F Moore. Austell Cobb County Georgia
2. Are you acquainted with Isaac R. Sprinkles, the applicant: if so how long have you known him? all witness left
3. Where does he reside, and how long and since when has he been a resident of this State? Austell P O Cobb County Ga 56 yrs.
4. When, where and in what company and regiment did he enlist, and how do you know? Co H. 1st Regt at Newnan in 1864
5. Were you a member of the same company and regiment? Mem Co H. Same Regiment
6. How long did he pefrorm regular military duty? until close of war
7. When and where was his command surrendered? Andersonville
8. Were you present when it surrendered? yes
9. Was applicant present? dont recolect
10. If he was not present, where was he? off on furlough. he says When did he leave his command? few days before Surrender For what cause? on furlough By what authority he left? on furlough How do you know all of this? applicant advises me. acts furlough. know the facts as to rest
11. What property, effects or income has the applicant? (Give your means of knowledge.) Nothing
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? had small tract of land sold
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? sold the 34 acres land dont know to whom
14. What is the applicant's occupation and physical condition? farmer so old & very feeble! being about 80 yrs of age
15. Is the applicant unable to support himself by labor of any sort; if so, why? yes, is about 80 yrs old & very feeble
16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? his labor on the tract of land
17. What portion of his support for these four years was derived from his own labor or income? all so far as witness knows
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code applicant is 80 yrs of age feeble has no property & is unable to work
19. Who composes family? What property have they? Children's ages and their earning capacity? Lives separate from wife & one child about 11 yrs
20. What interest have you in the recovery of a pension by this applicant? None

Sworn to and subscribed before me, this the 5 day of March 1907

D. F. Moore Witness.

John Hoskey Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,
Cobb COUNTY.

Personally came before me W A Miller and C T Nolan, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully I R Sprinkle, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

I find applicant old and feeble and physically unable to perform manual labor. W A Miller M.D. C. T. Nolan M.D.

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 5 day of March 1907

John Hoskey Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,
Cobb COUNTY.

I, John Hoskey Ordinary, in and for said County, hereby certify that the applicant I R Sprinkle resides in said County, and has been a bona fide resident of this State since the _____ day of _____ 189__ and that the witnesses, viz.: D F Moore are of trustworthy character, and that their statements are entitled to full faith and credit.

I further certify that before answering the foregoing questions the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witness before same was signed.

I further certify that the tax digest of Cobb County shows that applicant returned for taxation in his name in 1901 $390.00 Dollars of property, and in 1902 $~~160~~ $345.00 Dollars of property; in 1903 $320.00 Dollars of property; in 1904 Three hundred & ten Dollars of property; in 1905 $310.00 Dollars of property.

In my opinion the foregoing claim is _____ made in good faith.

Witness my hand and seal of office, this 5 day of March 1907

John Hoskey Ordinary.

of Cobb County.

NOTE.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. In every case the ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

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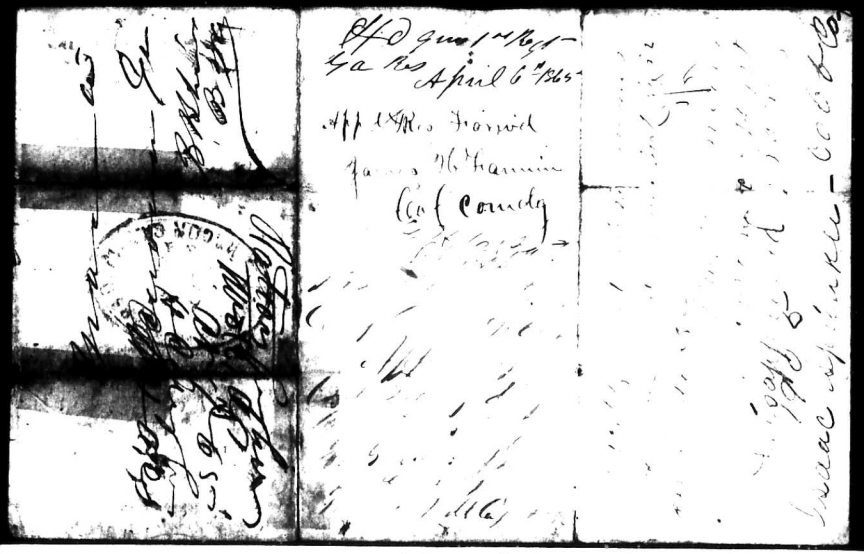

1905-
Disapproved
Isaac Sprinkle - Cobb Co.

Head-Quarters Cavalry Corps, M. D. M.,

Atlanta, Ga., May ....., 1865.

I, the undersigned, ... a ..... of the ..... Regiment of ..... do solemnly swear that I will not bear arms against the United States of America, or give any information, or do any military duty whatsoever, until regularly exchanged as a prisoner of war.

Isaac Sprinkle

DESCRIPTION: Height, ...; Hair, ...; Eyes, ...; complexion .....

I certify that the above parole was given by me, on the date above written, on the following conditions: The above named person is allowed to return to his home, not to be molested by the military authorities of the United States so long as he observes this parole and obeys the laws which were in force previous to January 1, 1861, where he resided.

By order of Brevet Maj. Gen. WILSON.

..... Capt and Ass't Provost Marshal, C. C. M. D. M.

Stanley, W. P.
Cobb Co.
Dec 1917

Confederate
Soldier's Application.
UNDER ACT 1910.

County Cobb

Name W P Stanley

Company A

Regiment 18th Ga Infty

Approved

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. P. BYRD, State Printer, Atlanta.

4/1/15 — 7/8 1914

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Cobb County.

J S Goodwin of said State and County is hereby presented as a witness in support of the application of W P Stanley for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded answers as follows:

1. What is your name and where do you reside? J. S. Goodwin Marietta Ga

2. How long and since when have you known W P Stanley the applicant? ever Since 1860, or before

3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? Marietta Ga

4. When, where and in what Company and Regiment did W P Stanley enlist during war from 1861 to 1865? (Give date and place) March 1867, Co. 18th Ga At Acworth

5. How did you obtain your information of this Service? I was member of Same Co & Regiment

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) to my Knolledge to May 12-1864 when I was wounded

7. When and where was his Command surrendered or discharged (give date and place) dont Know

8. Were you personally present at the Surrender? No

9. If not, where were you and how came you there? I had been Captured

10. Was the applicant personally present with his Command at surrender? I dont Know

11. If not where was he and how came him there? I dont Know

12. When did he leave his Command? — Where was his Command when he left it? — for what cause did he leave? — By whose authority did he leave — and how long was he granted leave? — How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was with him until I was wounded & Captured

13. In what way was he prevented from returning to his Command? — How do you know?

14. What effort did he make to return to his Command and how do you know? —

15. Was applicant captured as a prisoner I dont Know If so, when and where? — In what prison was he held? — and when released

Sworn to and subscribed before me, this the 23 day of Sept 1913 J. S. Goodwin

J M Gann Ordinary

of Cobb County.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Cobb County.

W P Stanley of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his testimony to make out the same, and after being duly sworn true answers to make to the questions propounded, answers as follows, to wit:

1. What is your name and where do you reside? (Give County and Post-office) W P Stanley Marietta Cobb Co. Ga

2. How long and since when have you been a continuous resident citizen of this State? Ever Since 1852

3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) Feby 1862, Acworth, Co. A. 18th Ga Infantry

5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge) From Feby 1862 to April 6 1865

6. When and where was your Company and Regiment surrendered or discharged from the Service? April 6 1865 at Favors Creek Va.

7. Were you actually present with your Command when it was surrendered or discharged? Yes

8. If you were not actually present, state specifically and clearly where you were. I was present

a. Where was your Command when you left it? Co. was Captured at ~~Favors~~ Saylors Creek Va. April 6 1865 About 10 of us escaped and went to Lynchburg and there found that Lee had surrendered on the 9th and we all went home

b. When did you leave the Command?

c. For what cause did you leave? —

d. By whose authority did you leave? —

e. For how long was your leave granted? In what way? —

f. Why did you not return to your Command after leave expired? —

g. In what way were you prevented? —

h. What effort did you make to return? —

i. Were you captured during the war? ~~Yes~~ No.

j. If so, when, and where? In what prison were you held and when were you released? My Co. was Captured April 6 1865 ~~Favors~~ Saylors Creek Va, except about 10 of us who escaped

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.) I had no property had $1800.00 in money & notes, I have since purchased a home and lot in Smyrna Ga which I now own and have used about $500.00 of this money to live on being unable to work

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? No

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list). I have one house & lot in Smyrna val $1000.00 this is all I have

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? None except when I can rent my house I get 10 per month but have been unable to [illegible]

13. Are you drawing a pension of any amount from this State or the United States? No

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No

Sworn to and subscribed before me, this the 23 day of Sept 1910

W P Stanley

J M [illegible] Ordinary

of Cobb County.