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)

G	GEORGIA, Fullow County
	Personally before me, the Ordinary of said County, comes Harry & Coole
with	Lang of Cools of said County, who, after being sworn, on oath
8	says that he knew Man Je organia County, and that said Pensioner
v	was on the Pension Roll of said County at the time of death, which occurred in Tull County
C	County, in this State, on the day of 29,
	and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral
е	expenses, which amounted to the sum of \$/ Oo
r	TEMIZED hereto attached.
	Sworn to and subscribed before me,
Jul	un Ruarbuta, ordinary Harry S. Jobe 5.
`	Tulbon County
	(Seal of Ordinary)
_	i e e e e e e e e e e e e e e e e e e e
	CERTIFICATE OF ORDINARY
	EORGIA Fullon County
G	I Those States Ordinary of said County, do certify
	The state of the s
	aith and credit; that I also knew here the said person is of truthful and trustworthy character, entitled to full while all that I also knew here the said that this was
	F1+
220	tameler 1
	n and County for 19.1/9, 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
а	attached hereto.
	Given under my hand and official seal, this day of the first of the fi
	(Seal of Ordinary)
	County
_	INSTRUCTIONS:
	1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
	2nd. Each account must be sworn to before the Ordinary, and in the following form:
ь	"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 strached 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.

M. Funeral expenses for Mys. Georgia A. King.

... Home for Incurables

HARRY G. POOLE

1896

FUNERAL DIRECTOR
184 PRYOR STREET, S. W.
ATLANTA, GA.

1929

WALNUT (8355

Dee. 12,1929.

Casket
Mabalming
Dress
Underwear
Paper Netice
Hearse
Railway Fare (8,14)

\$100.00

Georgia Fulton County

Personally appeared before me, Harry G. Poole, Jr who on eath says the above assount was for the funeral expenses of Mrs. Georgia A. King and is just, true and unpeald, Jurthemore, said deseased died without sufficient funds to be buried with.

Enjore me band Harry & Boal Dec 17 - 1 9 59 allen A. marbert 860

STATE OF GEORGIA,

all Men by these Presents, That i,

County.

County, in said State, do hereby appoint

Jo

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

my true and lawful attorney in fact, for

IN WITNESS IVHEREOF, I have hereanto set my

day of

Executed in the presence of us:

hand

If allowed, send am

me at

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2

and oblige

Mus Hungate King \$100.00.

Warrant Issued

AND HANDED TO

1891.

Mo. 4018

Widows' Pension

Form No. 5.

POWER OF ATTORNEY.

County, in said !		eby appoir	of nt	my	true and l	awful attorn	ey in fact, fo	- - or ,
me and in my na to from the State affidavit; hereby be issued by the aforesaid.	authorizing	as a widow my said at or for any se	w of a Co torney to um of mo	receipt in	Soldier, as my name fo may be cor	stated in t or any Warr ning to me f	he foregoin	g y n
		lay of			189	maria and		
Executed in	the presence	of us:					.[L. s.]
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AN A) s) Warr		and the state of t	On Sta	Widon			fring
	Warran	3100	Bul	most my	Widows		18	sking of
AND HANDED TO	Warrant Issue	9100.	Pallin	One Stange	Widows	2710. 401	. 189	daing then

Affidavit to be Made by the Widow. Form No.

STATE OF GEORGIA. In person came before me, the undersigned Ordinary County of Julton in and for the County of Fulling Mrs. Nama & Ning , who being sworn according to law, says under oath that she is the widow of Junes Whitten King , who was a soldier in the service of the Confederate States, and served as a member of Company Volunteers; that he enlisted in said service on or about the day of March 186 2 , and was in the Confederate Army up to December 186 2 That while in the Army he was on the day of Descucher 1862 (See Note No. 1) Sent home on furtough sick with measles and diatrhia and died at his home in Whitfield County Georgia on The 16th day of December 1862, from the direct offeet of said diseases. Deponente viacous for Knowing that her said husband died from the result of his service in the array are that he occeived his feet lough on account of his sisteness and arrived at his home sick and sure did get better or convulesce but grew worse until he died; and that he was a strong healthy man where hi enlisted in the army

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 16 th day of 1848, and that she has resided in Georgia continuously since the 1848 and that she has resided in Georgia continuously since the 1848; that Georgia is her home, and was such on the 23d day of December, 1850, 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, 1850, 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 following the following 18912 With both one Ordinary.

Note to be the ordinary ordinary.

Manual Sword Control of the control

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

Affidavit for Three Witnesses.

State	σf	Georgia
		0 .

In person came before me, the undersigned Ordinary

Equaty of Whitfield in and for said County, witnesses A. P. Covers and J. R. Maje

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

State of Georgia, is the widow of 36

James Whetten King, who was a soldier in Regiment of Ya

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or day of March 186 2 That while in said service for by

reason of said service in the Army, he within the me tobare: Contracted muchles and diatrhea and sometime in December 1862 was

furloughed on account of said sickness and was and to his home in Whitfield County to

Our opportunity for knowing the facts stated in reference to death of applicant's husband were

A. P. Roberts was Captain of said Company Of " 36" to Regt, at the time and & R M life was surgeon of said organisant and artified for said voldiers furlough

We further swear that Mrs.

was the wife of sald

soldier during the service, and that she has not intermarried since his death, and that she resides in County of the State of Georgia.

Sworn to and subscribed before me, this, the

Witnesses must not testify about hings they may believe, but coufine their statements to such facts as they per

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

State of Georgia,

W. L. lo achoma Ordinary

County of Harrin

in and for said County of Harling

State of Georgia, hereby certify that I am acquainted with Mrs.

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, 1850, and has not lived out of the State since that date. Jako soutify that the witnesses whose testimony she presents to sustain her claim are known to me to be titled to full faith and credit come. 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 the sign.

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

W.L. Lo aller Ordinary.

Form No. 4.

The pension is only payable to certain classes of widows

Those whose husbands were killed in service.

Those whose husbands died in the army of wounds or disease contracted in the service.

Those whose husbands went to the army and have never been heard from since the war.

Those whose husbands were wounded in the army and have since died from the direct effects

Those whose husbands 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

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

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

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 you Agent will know where and how to send the money.

By order of the Governor

W. H. HARRISON,

Sec. Ex. Department.

Affidavit for Three Witnesses.

State of Georgia, In person came before me, the undersigned Ordinary County of Fulla in and for said County, witnesses Mounty A Wardlaw. L. J. Milliam. and La Milliean (each known to said Attesting Officer as truthful, reliable aggreputable citizans), who severally say under oath, that, from their own personal knowledge,
Mrs. NUM a De Kung, of the County of Gentler. Acques WhittenKilly , who was a soldier in State of Georgia, is the widow of Regiment of Veryin That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or day of 186 2 That while in said service, or by reason of said service in the Army, he lost his life as follows:

Chile not personally cognizant of the semie and deart of the King we Know dot the applicant mm. Hanna &. King was his wife before and aunis the war and that the has neva morrier Rue morkingo death - but has remained her corda up lothing time.

Our opportunity for knowing the facts stated in reference to death of applicant's husband were that we have been intimate with her & living byether mearly all the while since thetoor,

We further swear that Mrs. was the wife of sald soldier during the service, and that she has not intermarried since his death, and that she resides in Fuller County of the State of Georgia. Sworn to and subscribed before me, this, the

STATE OF GEORGIA, County of Julian I, m. L. Lachm Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. Modiments &. Olin, 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 Janus Whillin Hing 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 day of January 1893.

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 fa

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

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

Executed in the presence of us:

DIRECTIONS.

Send amount by , and oblige

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA. County of Fullow

personally comes Mrs. Hamoh & Oken

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 mist continuously ever since

That she is the Widow of James Whillen King who was a Soldier in Company

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

Ducaman 186 2. That he lost his and served in the Army up to

life on the day of December 18 62 (State here

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

Dua of Meades Contracted while in The Loughdende Berovie in the 16"

Day of Dec 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 1848; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1892, and now apply for the allowance provided by law for the year ending February 15th, 1893.

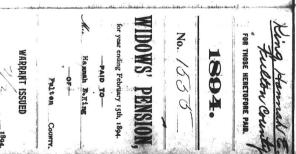
Sworn to and subscribed before me, this 30 day of Januar 1893.

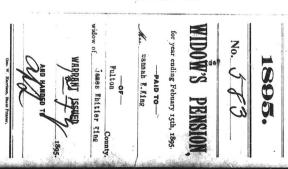
HE king ML Galmu Ordinary. Post-office Allanto

			e _p		11.7.1	
STATE O	F GEORGIA, Coun	ty of	Pull ton			
I, Fulton Hannah B	W.L.Calhoun State of King	Georgia,	hereby certify th	at I am acqu	or) said County of ainted with Mrs.	-
nesses), that December 2 widow of	my own knowledge (or t she resides in this Cor 3, 1890, and has not liv James Whit	unty, and ed out of tier Kir	that she resided the State since decease	in the Stat that date. d, and as suc	by reputable wit- e of Georgia on	
	l a pension for the year				*	
this, the	ness Whereof, I have h	day of	pobruary		seal of my office,	
*KAL		2	alhor		Ordinary.	•
		11			.2	
	POWER	R OF	ATTORN	EY.	Form No. S.	
STATE O	F GEORGIA,			County.		
Know	GLL MEN BY THESE PE	CEBENTS, '	That I,	-		
			of			
	uid State, do hereby app	point				
of , .			my true ar	d lawful atto	ruey in fact, for	
oregoing aff Warrant tha	ny name, to receive and in the State of Georgia ddavit; hereby authoriz t may be issued by the e for the reason aforesa NESS WHEREOF, I have	as a wide ing my sa Governor	ow of a Confedent Attorney to strain or for any su	rate Soldier, receipt in m of money	as stated in the	rig
lay of	1894		, un	a ocur, turo		
Execut	ed in the presence of u	۸.)			[L. S.]	
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		DIREC	rions.			
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W.L.Calhoun Pulton I, Fulton Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. 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 James Whitier King widow of_ deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1864. In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, day of Feby m. L. Cacherina Ordinary. POWER OF ATTORNEY. STATE OF GEORGIA. County. KNOW ALL MEN BY THESE PRESENTS, That I. of te les acourented wille de tie ".. fe'er te ret - .. le le le le County in said State, do hereby appoint my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1895. [L. S.] Executed in the presence of us: DIRECTIONS. Send amount by

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





, and oblige

me at

STATE OF GEORGIA, County of Fulton

Dersonally comes Mrs.

on Hannah BoKing

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

	Pult on	State of Ge	eorgia, and that s	she has resided i	in said State
continuousl	y ever since	birth	18	That she is th	he Widow of
Jam sa Wi	nition King		who	was a Soldier	in Company
Н	of the	3 6th	Regiment of	Georgia	1
Volunteers,	that he enlist	ed in said Regiment	on or about the	month of	
186 and	served in the	Army up to D	edmese.	186 2 Tha	t he lost his
life on the		day of	ned amber	18 62	(State here
full particu	lars of the hus	band's death, when	where and from	what cause.) (
to he in	lionalos o	entracted while	in the Conf	ederate Serv	rice on
the 16	th Tay of T	ee 1862			

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 18 48; 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.

Hannah & King

W. L. Calhound Ordinary. Post-office

Sworn to and subscribed before me, this

W. L. och my Ordinary.

HE King

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, County of Fulson

personally Comes Mrs.

tinuously ever since	birth	18	That she is the Widow of
James Whitter King	₹de [™]		as a Soldier in Company
	36th		Georgia
Volunteers, that he enlisted			
86 and served in the Ap	ту цр to	December	186 ? That he lost his
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ull particulars of the husbar	d's death when w	here and from wh	at cause) (
page application of the second			
and annual resolutions of the contract of the			
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-			CONTRACTOR OF THE STATE OF THE

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 merried since his death aforesaid, that she became his wife in the year 18 48, 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.

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

	The second secon
STATE OF GEOR	GIA, County of Fulton
I, Y.L. Calhour	Ordinary in and for said County of
Fulton	State of Georgia, hereby certify that I am acquainted with Mrs.
Harris 7,711	the applicant for a pension in this case, and
know from my own knowledge (or from	n positive proof presented to me by reputable witnesses,) that she
resides in this County, and that she resid	ed in the State of Georgia on December 23, 1890, and has not lived
out of the State since that date. That sh	ie is the widow of James Whitier Zing
deceased, and as such has heretofore be	een 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, his
the S-M	lay of 700 y 1896.
$\{\widetilde{\mathfrak{geal}}\}$ $\mathcal{M}_{\mathcal{K}}$	to alhour Ordinary.
	Form No. 3.
POWE	R OF ATTORNEY.
STATE OF GEORGIA,	County.
I,	hereby authorize
of	to receive and receipt for the pension paid hereon and request

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

that he remit same to

Executed in the presence of

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 and the thether fine 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 NRAL Ordinary POWER OF ATTORNEY. STATE OF GEORGIA. County. ____hereby authorize to receive and receipt for the pension paid hereon and request IN, WITNESS WHEREOF, I have bereunto set my hand and seal, this. Executed in the presence of

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

1, However, State of Georgia, hereby certify that I am acquainted with Mrs.

Harnah & Mule of Georgia, hereby certify that I am acquainted with Mrs.

Harnah & Mule of Georgia, hereby certify that I am acquainted with Mrs.

STATE OF GEORGIA, County of Sultan

ICHARD JOHNSON

For Widows Heretofore Allowed Pensions.

STATE OF C	EORGIA,	F	dersonal	ly Come	ß Mrs.
County of	Fultor	Rannah E.	King		
v	who being sworn, says on	oath, that she is a bona f	ide residen	t of said co	ounty of
gultar	State	of Georgia, and that sh	ne has RE	SIDED in 88	id State
continuously ever since	birth	18	That sl	ncisthe W	idow of
ins	ar Thitier King	wh	o was a S	oldier in C	ompany
e of the	a s f P	Regiment of	reorg	ia '	,
Volunteers, that he enlisted	in said regiment on or a	bout the month of	10"	reducoen	
186 and served in the A			186 7	That he	lest his
life on the	_day of_	reciecel	_18	3 (S	tate here
full particulars of the husban	d's death, when, where and	l from what cause.) (
ish of "let com	tracted chile in	the Confaierate 3	ervice	or the	Ath dey
o, geoetper foru					
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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

123

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 Tulton

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 subscrib	ed before	me, this	Downah	4 6.
5. 112 day of	₹eby	1896.	Joan	ning
m. L. back				

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,	Dersonally Comes Mrs.
County of Rulton	Honnek & Ning
Fulton State of Continuously ever since Birth	that she is a bona fide resident of said county of feorgia, and that she has RESIDED in said State 18 That she is the Widow of
Jesuita Mhituico fire A of the 366 R	who was a Sold or in Company
186 a and served in the Army up to deca.	December 1862 That he lost his
full particulars of the husband's death, when, where and from	
Duk of measles in the Confederate 16th day of Decen	Le Service on the
The state of the s	He 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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.

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 Full to the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

	and subscribed bef		He	6	hind
911	lay of Zee	1897.	-	O	ning
77.	Mile.	Ordinary.	Post-office		
	7 4				

itate of Georgia, ——County.	State of Georgia,
I. hereby authorize	1, S. Mary hereby authorize S. War
f.	hereby authorize
receive and receipt for the pension paid hereon and request that h	remit same to to receive and receipt for the pension paid hereon and request that he remit same/
я	musely at the person and request that he remit same
IN WITNESS WHEREOF, I have hereunto set my hand and sea	
y of_ 1898.	[L.S.] day of 526 many 1890. [L.S.] 1890. [L.S.]
	[L.S.] How King [L.S.
Executed in presence of	Executed in presence of
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	(N.G. 7.6%)
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)	
Ounty Present	7 1888.
• SIG	S S S S S S S S S S S S S S S S S S S
HNS SSUB	PENSINGER TO STATE TO
MIDOW'S PENSING. For your ending February 15th. MARRANT ISSUED	AND HALLING TO COMMISSION, COMMISSION, COMMISSION OF STATE AND THE AND
OW'S OW'S OW'S OW'S OW'S OWNER OWNER	MWS PAINT IN CHARD JC CHARD JC CHARD JC CHARD JC CARD
WAR YOUNGER	Those Herei Those Herei Those Herei Those Herei No. 8 & Markan Those
	Millow of River
For For Widow	B, 12, 13

POWER OF ATTORNEY.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs. County of Full on Manual & Jime	
who, being sworn, says on oath, that she is a boun fide resident of said county of State of Georgia, and that she has RESURD in said State continuously ever since 18. That she is the Widow of who was a Soldier in Company of the \$6.50 Volunteers, that he enlisted in said regiment on or about the month of \$2.50 the \$2.50	
186 and served in the Army up to Selective 186 That he lost his life on the	
Dica Gomeastes Contractanhile	
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 - S I have been allowed a pension as a resident of Survival County for the year ending February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.	
Sworn to and subscribed before me, this day of Ty 1898. Post-Office	
State of Georgia, Full on County. Ordinary of said County, certify that I am well acquainted with Mrs. 19 annual & Thing who made the above affidavit and am satis-	
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the day of day of day of Helling and seal this the day of Helling and seal this the	
Official Ordinary of Jackson County.	

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
County of FULTON Jodanneh & Hing
who, being sworn, says on oath, that she is a bons fide resident of said county of
FULTON State of Georgia, and that she has RESIDED in said State
continuously ever since birth 18 That she is the Widow of
Dance Mikner Rece who was a soldier in Company
A. of the 36 th Regiment of Stronge a
Volunteers, that he enlisted in said regiment on or about the month of
186 and served in the Army up to New 22 Ke 1 186 That he lost his
life on theday of December 1862 (State here
full particulars of the husband's death, when, where and from what cause.)
Died of merelex contracted
while serving, -
V. and
Deponent awears 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 48.
I have been allowed a pension as a resident of FULTON County for the year ending
February 15th, 1898, and now apply for the pension provided by law for the year ending February 15th, 1899.
Sworn to and subscribed before me, this
day of Jeby 1899.
Floradinary. Post-Office
State of Coursell W H HULSEY
State of Georgia,
County, ordinary of said County, certify that I am well acquainted
with Mrs. Odercack 6. This who made the above sifidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the 2 3rd, day of 2 er 18 90
Given under my official signature and seal this the day of 24 1899.
Motheren
Official Seal. Ordinary of FULTON County.

STATE OF GEORGIA, County. Let a let and a general and receipt for the pension paid hereon and request that he remit same to at IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 19 Th day of 1900. Executed in presence of [L. S.]	STATE OF GEORGIA, Coulder County. I, Farnah & Kring hereby authorize Allardand of Allanda Sa to receive and receipt for the pension paid hereon and request that he remit same to at 168 thirst Journal of IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 1655 day of January 1901. Executed in presence of Edga 1877.			
To Those Beresonore rath. 1900. S. J. No. 27/2 WIDOW'S PENSION, For year ending February 16th, 1900. Full Office County, JNO. W. LINDSEY, Commissioner of Pension. WARRANT ISSUED L. L. D. AND BANDED TO BANDED TO AND BANDED TO AND BANDED TO AND BANDED TO BANDED TO AND BANDED TO BANDED TO AND BANDED TO AND BANDED TO BAN	WIDOW'S PENSION, No. 470 No. 470 WIDOW'S PENSION, For yet reding February 16th, 1901. The Mannersh & Minister, Midow of W. Minister, JOHN W. LINDSEY, County. WARRANT 18SUED Sory / 7 1901, AND HANDED TO M. M			

POWER OF ATTORNEY.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally Comes Mrs.
STATE OF GEORGIA, County of Tackon Staineh 6. Hore
who, being sworn, says on oath, that she is a bona fide resident of said county of
Falkor State of Georgia, and that she has RESIDED in said State
13.116
Confithe Regiment of Corryla
Volunteers, that he enlisted in said regiment on or about the month of De each heart
186 A and served in the Army up to Decece Ker 186 & That he lost his
life on the day of Deece des 1862 (State here
particulars of the husband's death, when, where and from what cause)
10.1 2 21
while in service contracted
and in pervice
No. 1
Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that
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 48.
she has never married since his death aforesaid, and that she became his wife in the year 18 48.
she has never married since his death aforesaid, and that she became his wife in the year 18 / 8. I have been allowed a pension as a resident of. Full War. County for the year ending February 15th, 18th 9, and now apply for the pension provided by law for the year ending February 15th, 1800.
Thave been allowed a pension as a resident of. I have been allowed a pension as a resident of. Full County for the year ending February 15th, 1844 , and now apply for the pension provided by law for the year ending February 15th, 1900. Sweet to and subscribed before me, this day of 1 1972 24, 1900. Pent Office.
she has never married since his death aforesaid, and that she became his wife in the year 18 / 8. I have been allowed a pension as a resident of. Full War. County for the year ending February 15th, 18th 9, and now apply for the pension provided by law for the year ending February 15th, 1800.
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 February 15th, 184 %, and now apply for the pension provided by law for the year ending February 15th, 1900. Sweet to and subscribed before me, this day of Correct 1900. Ordinary. Post Office
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 Full of County for the year ending February 15th, 1819 %, and now apply for the pension provided by law for the year ending February 15th, 1900. Sweet to and subscribed before me, this day of Cordinary 1900. Post Office Post Office State of Georgia, A. J.
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 Factorian County for the year ending February 15th, 1819 %, and now apply for the pension provided by law for the year ending February 15th, 1900. Sweet to and subscribed before me, this day of Conting. Post Office Post Office State of Georgia, County Ordinary of said County, certify that I am well acquainted
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 Factor County for the year ending February 15th, 184 %, and now apply for the pension provided by law for the year ending February 15th, 1900. Swept to and subscribed before me, this day of County 1900. Post Office Ordinary. State of Georgia, County. Ordinary of said County, certify that I am well acquainted with Mrs. Factors A. E. March County, who made the above affidavit and am satis-
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 Factorian County for the year ending February 15th, 1819 %, and now apply for the pension provided by law for the year ending February 15th, 1900. Sweet to and subscribed before me, this day of Conting. Post Office Post Office State of Georgia, County Ordinary of said County, certify that I am well acquainted
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 Full of County for the year ending February 15th, 1819 %, and now apply for the pension provided by law for the year ending February 15th, 1900. Sweet to and subscribed before me, this day of County for the year ending February 15th, 1900. Post Office Post Office State of Georgia, County for the pension provided by law for the year ending February 15th, 1900. Post Office Ordinary for said County, certify that I am well sequainted with Mrs. Face 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 Let 18 % .
she has never married since his death aforesaid, and that she became his wife in the year 18 / 6. I have been allowed a pension as a resident of Full of County for the year ending February 15th, 180 / and now apply for the pension provided by law for the year ending February 15th, 1900. Sweet to and subscribed before me, this day of County for the year ending February 15th, 1900. State of Georgia, 1900. Post Office Ordinary. State of Georgia, County. Ordinary of said County, certify that I am well acquainted with Mrs. Feer 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 Lee. 18 / 0. Given under my official signature and seal, this the day of Lee. 1900.
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 Full of County for the year ending February 15th, 1819 %, and now apply for the pension provided by law for the year ending February 15th, 1900. Sweet to and subscribed before me, this day of County for the year ending February 15th, 1900. Post Office Post Office State of Georgia, County for the pension provided by law for the year ending February 15th, 1900. Post Office Ordinary for said County, certify that I am well sequainted with Mrs. Face 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 Let 18 % .

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA. Personally Comes Mrs.	
County of Fulton Wannah & King	
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	
who was a soldier in Compan	у
of the 36 42 Regiment of ya	
Volunteers, that he enlisted in said regiment on or about the month of	_
186 2 and served in the Army up to. DEC	is
life on the day of DEC 18 62 (State her	re
particulars of the husband's death, when, where and from what cause).	
Dud of measles contracted	
Died of measles contracted while in service	
The state of the s	
*	
Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and tha	
	t
she has never married since his death aforesaid, and that she became his wife in the year 18 44 8	
I have been allowed a pension as a resident of Vilton County for the year ending	
February 15th, 1960, and now apply for the pension provided by law for the year ending February 15th, 1901	
Sworn to and subscribed before me, this	
16th day of Jun 1801. Wars Slumndh & King	-
Edga. Herr Just addinary to Post Office	
6 7 _	
State of Georgia.	_
County, Ordinary of said County, certify that I am well acquaintee	d
with Mrs. Damala & Ming, who made the above affidavit and am estisfied	
that the facts therein stated are true, and I know ahe is the individual she represents herself to be, and that she	
has continuously resided in this State since the 73nd day of 1850 1896	
Given under my official signature and seal, this the 18 day of and	
Outen R (Duid and in	
Official Seal.	~ .
Seal.) Ordinary of County	

	I. Ceive an	d receip	E idle	/Ce	on paid	of	, and re	lan quest tha lan seal, this	tad	nit same	
			resence of			\mathcal{H}_{-}	E kin	ng		[L.	S.]
To Those Heretofore Paid.	1902.	No. 25.9	WIDOW'S PENSION,	For year ending Dec. 31, 1902.	Mw 16 6 Ming	Fulton. County.	Widow of W. Mues	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT ISSUED	AND HANDED TO	COO of promotion and some departs to

POWER OF ATTORNEY.

STATE O	Mar	r 16 dlau		of G	Utanit n, and requ			
			I have her		my hand a	ud seal,	this -	
day of	ON HORSE OF THE SECOND	***************************************	1905 ×	3. # 18	king			[L. S.]
John R	,	presence o Vinso rdin		ŧ.				
			٥		,			
				and the second		6	.19	* *
jd		ION,	8	County,	3/4	f Pensions.	1903.	
To Those Heretofore Paid	re	ENS	1. 16 6 Ming		thether the construction of the construction o	SSUED	18 5	Chris
Hereto	>/	S :	PAID TO	30.	TEACON V. LIN	Commissione WARRANT ISSUE	ND HANDED TO	200
Those	No.	MO	90	9	Reg 10HN	WARR	INV	***
J.			Mu.	Widow				4

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, PRIBONALLY COMES MES.	
who, being sworn, says on oath, that she is a bona fide resident of said County of	
Fulton. State of Georgia, and that she has RESIDED in said State	
continuously ever since Serith . That she is the Widow of	
He of the 36th Regiment of Ha	
Volunteers, that be collisted in said regiment on or about the month of	
186 2 and served in the Army up to A & CC 188 2. That he lost his	
life on the day of NEC 18 62 is sing here	
particulars of the hasternet's death, when, where and from what causes	
Died of Mustre contracted 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 hat she became his wife in	
the year is 48	
I have been paid a pension as a resident of Fulton. County for the	
year ending December 31, 1901, and now apply for the pension provided by law for the year ending	
December 31, 1902	
Sworn to and subscribed before me	
sworn to and subscribed before me. this 10 day of January 1902. He king	
Ordinary. Post-Office	
John R. Wilkinson.	
State of Ceorgia,	
Full On. County. Ordinary of said County, certify that ! am well	
acquainted with Mrs. 10 Esting, 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 DEC. 1890	
Given under my official signature affil seal, this the 10 day of Jacon 1902.	
1 Official 1	
Seal - Ordinary of County.	
NOTE All blank spaces must be filled.	

For Widows Heretofore Allowed Pensions.

to the private material and the	
STATE OF GEORGIA,	PERSONALLY COMES MAS
County of Fulton,	16 6 King
who, being sworn says on	oath, that she is a bona fide resident of said County of
Fullon, sta	ste of Georgia, and that she has RESIDED in said State
continuously ever since Birth	. That she is the Widow of
2/2	who was a soldier in Company
• 16 of the 3624	Regiment of
Volunteers, that he enlisted in said regiment of	
186 2, and served in the Army up to	DEC 186 2. That he lost his
•	of Dec 182 (State here
particulars of the husband's death, when, where a	nd from what Pause.)
Tour oming	acted in service
Dua financis como	icua in since
	The state of the s
	7
	-
Deponent swears that she was the wife of said	d deceased soldier, during his service in the Army as a
•	e his death aforesaid, and that she became his wife in
the year 18 48	s = s
	-
	of
	y for the pension provided by law for the year ending
December 31, 1903.	4
Sworn to and subscribed before m	е,
this	38. 28 E king
Ordinar	y. Post-Office
	J. Carlo Carlo
State of Coordin	
State of Georgia,	I I
Count	
acquainted with Mrs. 10 68 tung	
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 re	esided in this State since the
day of 327th 18	
Given under my official signature and so	cal, this the day of JAN 22 1903 1908.
727	2. P. Oble Chasons
Official Seal.	Ordinary of County
	County.

STATE OF GEORGIA,
- fullin County.
19 18 Mary Da So hereby authorize
I a Christant of Sand County hereby authorize
to receive and receipt for the pension paid hereon, and request that he remit same to
me my tome
IN WITNESS WHERFOF, I have hereunto set my hand and seal, this 22 2 % &
day of Palescares was
Executed, in presence of
Executed in presence of
John Worlding
() discourse
1 churry
a v

WIDOW'S PENSION

TO THOSE HERETOFORE PAID.

1904.

FOR YEAR ENDING DECEMBER 31, 1804.

HE & Mrs

JOHN W. LINDSEY,

WARRANT ISSUED

STATE OF GEORGIA, Lutton COUNTY: I have Manual & Kung hereby authorize A Warman of Fully County to receive and receipt for the pension paid hereon, and request that he remit same to at my home In Witness Whereof, I have hereunto set my hand and seal, this /8th day of January 1905. Executed in presence of Ohne Williams

POWER OF ATTORNEY.

To snow Hereubor Puid.

1805.

No. ALT

No. ALT

No. ALT

Thu Abanua M. B. Hou.

For year ending Dec. 31, 1906.

Thu Abanua M. B. Hou.

Thu Abanua M. A. Hillie

Code Regimen Med M.

JOHN W. LINDSEY,

Code Regimen Med M.

MARRANT ISSUPP

AND HANDED TO

AND HANDE

For Widows Heretolere Allowed Pension

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.
County of Fulton	He a may
	at she is a bona fide resident of said County of
	Georgia, and that she has RESIDED in said State
continuously over since Birth	That she is the Widow of
X Ming	who was a soldier in Company
of the 36 115	Regiment of Ja
Volunteers, that he enlisted in said regiment on or	about the month of Lee
1862 , and served in the Army up to	186 . That he lost his
life on the day of L	lic : 18 2 (State here
particulars of the husband's death, where, where and fee	
hied silvered	a contracted.
	AND THE RESERVE
ef.	
Deponent swears that she was the wife of said dece	ased soldier, during his service in the Army as a
soldier, and that she has never married since his de-	eath aforesaid, and that she became his wife in
the year 14 48	
I have been paid a pension as a resident of	County for the
year ending December 31, 1908, and now apply for	the pension provided by law for the year ending
December 31, 1904.	
Sworn to and subscribed before me	Se & king
Jan 22 1904 1904 Aday of JAN 22 1904 1904 Cordinary	Post Office
	2 000
State of Georgia,	I. John R. Wilkinson.
Country	Ordinary of said County, certify that I am well
acquainted with Mrs. Ho W //www	2 , 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	l in this State since the
day of	
Given under my official signature and seal, t	his the day of 1904.
()	A Welkerson
Seal (Ordinary of County,
NOTE.—All blank spaces must be fille	Y U
Voucher and Adderit must b	ear date after January 1st, 1904.

For Widows Heretofore Allowed Pensions.

· ·	
STATE OF GEORGIA, PERBONALLY CO.	
County of Fulton I Connah	o. King
	1
who, being sworn says on oath, that she is a bona fide resid	ent of said County of
Fulton. State of Georgia, and that she has R	ESIDED in said State
	she is the Widow of
Course the Min	soldier in Company
1/2 1	solutier in Company
regiment of	narjia
Volunteers, that he enlisted in said regiment on or about the month of	
	That he lost his
life on the 2 day of Sec	862 (State here
particulars of the husband's death, when, where and from what cause)	
	A STATE OF THE PARTY OF THE PAR
Died Dic 2 1862 mead	lea
	9
The about the same of the same	
	_
I have been paid a pension as a resident of Fulton.	
year ending December 8i, 1904, and now apply for the pension provided by law	for the year ending
December 81, 1905.	
Sworn to and subscribed before me,	Aid
this day of JAN 2 1905 1905.	1
Post-Office	
State of Georgia,	1000 Vine
F3 91	V Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z
Pullon County Ordinary of said County, ac	rtify that I am well
acquainted with Mrs. M.C. Manually Co. Downg, Who made the	above affidavit and
am satisfied that the facts therein stated are true, and Lknow she is the individ	ual she represents
herself to be, and that she has continuously resided in this State since the	
day of18	
Given under my official signature and seal, this the day of AN	2 1905 1905
() (Dun's al'	1905.
[Official]	oul
1 Seal. (Ordinary of Full-O	7
	County.

	a	F GEO Full Fan Wan ud recei	nah	Can		_of_	On, and r	Lani equest th	at he	remit	authorize
day		lu			190	6. g	y hand an				[L. S.]
To Those Heretofore Paid	1906.	No. 216	WIDOW'S PENSION	For year ending Dec. 31, 1906.	Mrs. Hannak C. Unig	Fulton, gounty,	Widow of Lat. Hilling	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT ISSUED	AND HANDED TO	THE PRINTING ON PARKATION CO., CO. W. PARKATION DOC.

	POWE	ROF	ATTORI	VEY.	
To The state of th	Vacable Vacable d receipt for the	nave hereunto	et my hand and	him	
day of	mecuted in pres	ence of . Musen Linary	H &	King	(L. S.)
		And the second s		an head green with the	in the second se
To Those Heretofore Faid.	WIDOW'S PENSION	For Year ending Dec. 31, 1907. Mrs Mannach College.	Widow of 1884, Kr. Hung	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT ISSUED WARRANT ISSUED AND HANDED TO AND MTC. A 1777 ONO W REFERENCES, MISSUED.

For Will

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, PERSONALLY COMES MES. County of Fulton. Personally comes Mes.
who, being sworn, says on eath that she is a bona fide resident of said County of
hi /t
continuously ever since That she is the Widow of
17:100 A. Sling who was soldier in Company
Cof the State Regiment of State
Volunteers, that he enlisted in said regiment on or about the month of
1864 and served in the Army up to OCC. 1862. That he lost his
life on the 2 M day of Del, 1862 (State here
particulars of the husband's death, when, where and from what cause.)
Lied Lec, 2º 1862, preaster).
The second secon
Deponent swears that she was the wife of said deceased soldler, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 18
I have been paid a pension as a resident of Fulton. County, for the
year ending December 31, 1905, and now apply for the peasion provided by law for the year ending
December 31, 1906.
Sworn to and subscribed before me !
own an E fing
Defect VIA Chairm
John Vallanger Ordinary Post Office
State of Georgia, Post Office State of Georgia, State of Georgia,
State of Georgia, Post Office. State of Georgia,
State of Georgia, Fulton. County Ordinary Ordinary of said County, certify that I am well
State of Georgia, Fulton. County of dinary of said County, certify that I am well acquainted with Mrs. County of said County, certify that I am well acquainted with Mrs. County of said County, certify that I am well acquainted with Mrs. County of said County, certify that I am well acquainted with Mrs. County of said County, certify that I am well acquainted with Mrs. County of said County, certify that I am well acquainted with Mrs. County of said County, certify that I am well acquainted with Mrs.
State of Georgia, Fulton. County of dinary of said County, certify that I am well acquainted with Mrs. State of Georgia, Fulton. County of dinary of said County, certify that I am well acquainted with Mrs. Manual Adding., who made the above affidavit, and am satisfied that the facts therein stated are true, and know she is the individual she represents
State of Georgia, Fulton. County of dinary of said County, certify that I am well acquainted with Mrs. Authority of said County, certify that I am well acquainted with Mrs. Authority of said County, certify that I am well acquainted with Mrs. Authority of said County, certify that I am well acquainted with Mrs. Authority of said County, certify that I am well acquainted that the facts therein stated are true, and know she is the individual she represents herself to be, and that she has continuously resided in this State since the
State of Georgia, Fulton. County of dinary of said County, certify that I am well acquainted with Mrs. Author Mrs. County of dinary of said County, certify that I am well acquainted with Mrs. Author Mrs. Author Mrs. County of dinary of said County, certify that I am well acquainted with Mrs. Author Mrs. Aut

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, PERSONALLY COMES MAS. County of Fulton Mannah (e. Mung
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
Hames H. Sung who was a soldier in Company
My of the Go" Regiment of Ra
Volounteers, that he enlisted in said regiment on or about the month of
1884 , and served in the Army up to 186 That he lost his
life on the 2" day of DEC 1864 (State here
particulars of the husband's death, when, where and from what cause.)
*
Died, Dic. 2" 1862, Tricustes)
The second transfer on the self-section was a second of the second of th
The second secon
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 16. Year County, for the
year ending December 31, 1906, and now apply for the pension provided by law for the year ending
December 81, 1907.
Sworn to and subscribed before me this day of 1907.
this day of 1907.
John R. Williamson, Ordinary. Post Office 168 (10) me lettely N
State of Georgia.
County Ordinary of said County, certify that I am well
acquainted with Mrs. Maunaw (c. Rung, who made the above affidavit, and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
nerself to be, and that she has continuously resided in this State since the
nay of18
Given under my official signature and seal, this theday of1907.
(Official) John R. Wilkinson.
Official Seal County
Ordinary of County.

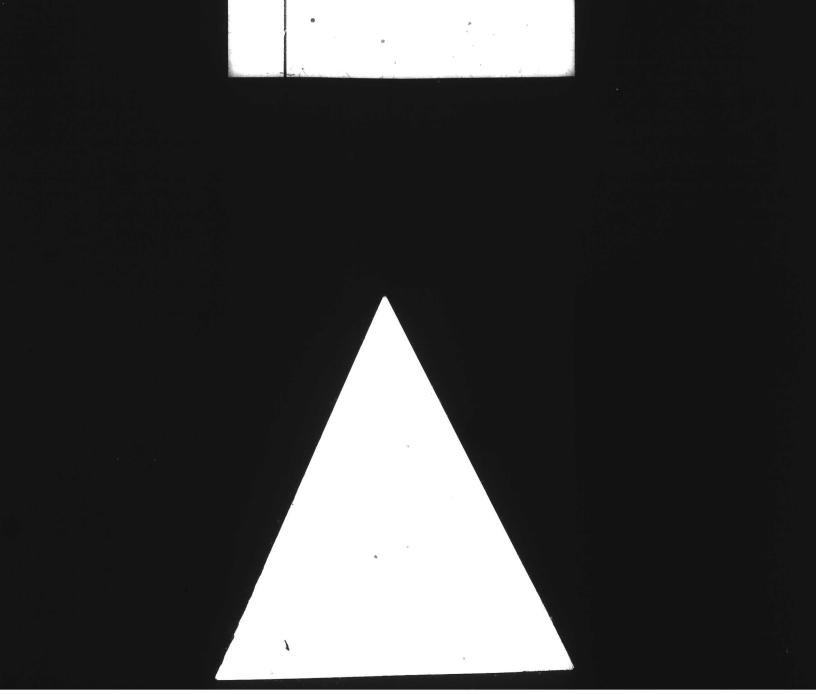
Stale or Ga. Country Whitfulk. Eremally a exerció be one me of Chertin, Ordinan & Juic Carrity, case of Themit who 15 Kum I and the in bruthful, reliable and rebutable citizen and in Jays that he nos Colinit & the 36th Regiment & ga politiles, and that in the year 1862, Jane Whillin King welisted as a private in to off"in said 36 H Ga regiment, and send on a lovies thering Line a Sterre Swem & and subscribed 3 before me lau 22-1892. X6 forton Ord win

State of Ga, Whitfield Go Benevally appeared before me, J.C. Nexton, Ordiner in the said County, Frank L. Land and John & Land Kunn to me the Unit ful, reliable a resultable Ciriques, and cath say that they Knew Jamy Whitten Killing en this like rime and that he wish's 1862, to intest in the Confedente onny, that after several months he setationed this home seed with disther and meach, and that in to ment of December 1862 he diel, his work directly resulting from said disease. Our apperhant for Kuning the fact were that we were with him during his seatures t saw her body after death The further seven that Mistamon & King no the with of said Lollier at the time I his death-Swam (by and Subscribed of 9. Same before me this lang I. S. Lane 22. 1892 · pla toston

Ordinary

State of Missouri 25 Komety of Butter 255 Personally appeared before me a Judge of the Probate of The said County Thomas M. Lane aged so years a resident of Butter County Missoni to me well known to be reputable and intitled to enedit, who after being first duly Swons makes the following Sterrent. That he was well and personally acquainted with Hothing who was a member of Co. H. of The 36" Regt. La Volunteers, That said Soldier inlisted in the Service of the Conferate States of America Some time in The Spring of 1862 is start healthy young man that while in said service he contracted measles and un account of which he was sunt home on Sick furlow and that he never saw said Soldier afterward, but was informed and believes that said soldier died That his family accupied and lived in afficults home and on his farm and that when afficient returned home the history of his biokness and death in afficients house was frequently retated to him both by his own family and by his neighbors affaut further says That he was a Private in the Same Company and Ryment with said Soldier when he was purlowed home as above

Stated, he further says that he has no interest in said claim and is not loneurned in it dissecution -Thos M. Lane The foregoing affidavit was duly Swom to and Subscribed before me This first day of July 1891 and I cutify that The Contints of said affidavit was read to afficient before he executed the same and That I have no interest in Laid claims and are not Concerned in its pros. cention and that daid afficient is well known to me to be a credible purson Wilmes my hand und official deal at offin in Coplar Bluss This day & date last a ove withen I. A. Dearce judge and Exoffice click Probate Court



STATE OF GEORGIA, 1897. POWER OF ATTORNEY. WARRANT HANDED TO

	POV	VER OF	ATTOR	INET.			4.	and the same of
STATE OF	•	County	.}				-	
I,						s hereby author	ize	
to receive and rece	å eipt for the pension	allowed and r			me to	on the contract of the contrac		
	nt					*		1
Witness my	hand and seal this		day of	Meto automore e	or and provident to the con-	1897.		j
Executed in	n presence of	J					٠.	-
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PENSION	1897.	and but	1/8	•		TO THE STATE OF TH	(1.41/1/	0
GRAT PRINSION	1897. Ching	Factory	1/8	•		AMC	1011	10,2

Questions for Applicant.

	Questions for Applicant.
	STATE OF GEORGIA,
	- Fullow County.)
	fand 0 (X 7in 1 2 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)/
	Janoso Ching. Pol attanta Fullor County from ma
	2. Where did you resid on January 1st, 1894, and how long have you been a resident of this State?
	In attanta ra. Nage lively in 12 12 134 4 0 14420
	the Market The State of the Sta
	3. When and where were you born? New Beaford Mass Sept 76, 1836.
	4. When and where and in what company and regiment did you enlist or serve
	Milliages (ruspany Meters & Rallaliner (Tillery
ત	singer 1
Ŏ	5. How long did you remain in such company and regiment?
H	List Charo.
Б	
P	6. For how long a period did you discharge regular military duty? . It fland
Q.	7 When where and under what circumstances where you discharged from service?
Ą	Lischarged as fire our of year at Clinia 11 of 17th June 1565
₫	Was Captured June 3-3 1864 Celberman Sound M.C.
1	8. What is your present occupation? Carfunter
0	9. How much can you earn (gross) per annum by your own exertions or labor?
Φ	
г.	
ŭ	11. Upon which of the following grounds do you base your application for pension, viz.: first "age and,
Ľ	poverty," second "infirmity and poverty" or third "blindness and poverty" ? (4) formly timefamily the
μ	12. If upon the first ground, state how long you have been in such condition that you could not earn
À	your support? If upon the second, give a full and complete history of the infirmity and its extent? If
A	upon the third state whether you are totally blind and when and where you lost your sight?
А	Qualte to suffert wind for greens. A sufferer from went Sugaration forth
Ä	hands are aroun but of yetural State alestons on goth feel have been
Ä	in that Condition for three years. Direct wardentrated doning sevice into
Ħ	13. What property, effects or income do you possess and its gross value ! / / / / / / / / / / / / / / / / / /
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ጛ	14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any,
g,	did you make of same? Nad Alithing .
	· _ · · · · · · · · · · · · · · · · · ·
3	
0	16. In what County did you reside during those years and what property did you then return for taxation?
Þ	Sived in Hulton Co Poetuned no fresherly you talention
Ĺ	16. How were you supported during the years 1895 and 1896? Dy his own lanung
	with the help of his Son, Luther Stiling
	17. How much did your support cost for each of those years, and what postion did you contribute thereto
	by your own labor or income? 8/000. applicant Contributed \$3000
	18. What was your employment during 1895 and 1899? What pay did you receive in each year?
	Curployel is a leifuly. about \$ 300
	. / / /
	19. Have you a family? If so, who composes such family? Give their means of support? Have they
	a homestead? All . (Yyllican) his hife, In Sting and a son
	scanded they ding. Ther support is derived from outher Heigh
	wages. They have no homestead.
*	20. Are you receiving any pension, if so what amount and for what disability?
	- Odla
	Sworn to and subscribed before me this the
	day of Applicant.

QUESTIONS FOR WITNESS. STATE OF GEORGIA. of said State and County, having been presented as a witness in support of the application of... under the Act approved December 15th, 1894, and ofter being duly sworn true answers to make to she following questions, deposes and answers as follows 1. What is your name and where do you reside?. 2. Are you acquainted with the applicant, is of how long have you known him? 3. Where does he reside, and how long has he been a resident of this State 4. Do you know of his having served in the Confederate army or the Georgia m deswood transfered to my 6. Were you a member of the same company and regiment? 7. How long didohe 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 Mis in Buttery two rears and waster active Service I and their transfered to Mairal Service What property, effects or income has the applicant? (Give your means of known Hur with live With Money to Je 4 4 40 al. any did he make of same ? Would 10. What is the applicant's occupation and physicial condition ?.. 11. Is the applicant unable to support himself by labor of any sort, if so, why? 12. How was he supported during the years 1895 and 1896 13. What portion of his support for these two years was derived from his own labor or 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

15. What interest have you in the recovery of a pension by this applicant?

Ordinary.

Sworn to and subscribed before me, this

AFFIDAVIT OF PHYSICIANS

STATE OF GEORGIA,
Francisco County
Personally came before me & M. Pit, hit had
Grange A: Universe M /) both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully
1 . ()
, , , , , , , , , , , , , , , , , , , ,
when personal examination say that his precise physical condition is as follows:
Show that de had me kind
year this hours and feel him
all drawn out of stuffer
* 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 sabscribed before me, this
the I 16 aday of Jan, 1807. \ Secret 4. (
Ordinary.
Ondry Later Company
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA.
County.
I, in It Is colored , Ordinary in and for said County, hereby certify that
the applicant 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 :
Solve Rice City Bt & Paille Jan a le
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 harcon prescribed, and that the full text of the affidavits was read to the applicant and witnesses
before sames was signed.
I further certify that the tax digests of County show that applicant
returned for taxation in his name in 1895, 72 dollars
of property, and in 1898, dollars of property.
Its my opinion the foregoing clain ismade in good faith.
Witness my band and seal of office, this day of day of Jany 1897.
2111he Con Ordinary
of Feet County.
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State of	Georgia,)		•,		
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POWER OF ATTORNEY

STATE OF GEORGIA,	TORNEY.	
County.		4
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o receive and receipt for the pension allowe	d. and request that he r	emit same to
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Witness my hand and seal this	_day of	1899.
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No.	'AR'	WARRANT HANDED TO CHACLE WHATEVER SHARE PRINCE ALBERT
INDIGENT IND	RIC W	W.
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For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fullon County,
Personally appears C. Hing of Fullow
rersonany appears
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 1858; that he is 3 years old and
by occupation a Carrielle, that he culisted in the military service of the Confed-
erate States (or of the State of Secretary) during the war between the States,
and served for the term of Hair in Company is of the Recomment of Miritages Company nikom that his physical condition in
follows: O - DA
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that his property consists of the following items
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1898. I have heretofore as a resident of
county been allowed a pension for the year 189 7
Sworu to and subscribed before me, this, the
12 day of Jany 1898. Then &
Ordinary.
State of Georgia,
Fullan County.
1, HI sulsey 20). Ordinary of said County,
do certify that I am well acquainted with the the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of
AME YOU!
bere
Ordinary County.
Note The blank spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
FULTON County.
Personally appears Q. le King of FULTON
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since theday of1858; that he is 64 years old and
by occupation a Carpenta; that he enlisted in the military service of the Confed-
erate States (or of the State of Jan) during the war between the States,
and served for the term of full in Company , of the Regiment of -
Milleges Company; that his physical condition by as
follows:
Chermatism General delich
that his property consists of the following items
of the value of Dollars, that by reason of his physical
condition and poverty heris 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 FULTON
county been allowed a pension for the year 189
Sworn to and subscribed before me, this, the
18 day of 1000, 1899.
Ordinary.
State of Consolin
State of Georgia, FULTON
County.)
I, WH HILLOFY Ordinary of said County,
do certify that I am well acquainted with Jel. Hence the
applicant in the foregoing affidavit, and an well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of
AME
Ordinary FULTON County
Ordinary County.

Norn. - A fildavit should not be attested before January 1st, 1899.

STATE OF GEORGIA,	l							
	ounty.							
i,		hereby	authoriz					
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to receive and receipt for t	he pension	allowed and	request	that	he	remit	same	te
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by				٥				
Witness my hand and s	eal, this.	day of	f.				1901.	
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Executed in presence of

SOLDIER'S PENSION.

INDIGENT

No. Fr

Fillen WARRANT ISSUED

JOHN W. LINDSEY,
Commissioner of Per

on, State Printer, Atlanta

For Applicants Heretofore Allowed Pensions.

11 Marie and a constant of the state of the	
Personally appears County. Dersonally appears County of County. County, State of Georgia, who being duly swofn 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 that he enlisted in the military service of the Confederate States (or of the State of that he enlisted in the military service of the Confederate States (or of the State of the term of the said in Company of the Restment of Military States, and as served for the term of the said in Company of the Restment of Military States, and has resided in the military service of the Confederate States (or of the State of the term of the said in Company of the Restment of Military States, and has resided in the military service of the Confederate States (or of the State of the term of the said in Company of the States, and has resided in said State continuously ever since the said County and State, and has resided in said State continuously ever since the said County and State and has resided in said State continuously ever since the said County and State and has resided in said State continuously ever since the said County and State and has resided in said State continuously ever since the said County and State and State and State continuously ever since the said County and State	ry
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4	*
that his property consists of the following items_	
Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 189, 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 the year 1902.	
Sworn to and subscribed before me, this the Standary of Jany 1901,	
STATE OF GEORGIA, County. County. Ordinary of said County, Coeffify that I am well acquainted with the	
do certify that I am well acquainted with the	
applicant in the foregoing affidavit, and am well satisfied that the statements made by him	
n his said affidavit are true, and I know he is the individual he represents himself to be	
and that he resides in this County.	
Given under my official signature and seal, this	
day of 4 44 7) 1901.	

County.

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

STATI	E OF (GEOR	GIA,)	TORNE	1.	
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to receiv	ve and i	eceipt	for the	pensio	on allowed,	and request	that he	remit same to
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CODE SEC. 1254. 0Se Already El	0	DI	S		633	JAN .	8 8	ANT ANT
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POWER OF ATTORNEY.

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JOHN W. LINDSEY,
Commission of Punice.
WARRANT HANDED TO

Collidates Regiment March Porth Arthu Warrant ISSUED

Fulton.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	4
FULTON County.	
105 FULTION	
personally appearsoi	
County, State of Georgia, who being duly sworn, says on oath that he is a bon.	a jiae citizen
and resident of said County and State, and has resided in said State continuing the day of 1858; that he is 65 ye	14 and
by occupation a Carfence: that he enlisted in the military service of	
erate States (or of the State of July) during the war between	
milleger. Company in Company, of Bath	Regiment of the
follows:	/
General alterlity	9
	•
that his property consists of the following items	• •
	** · ·
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of the value of Dollars, that by reason of	
condition and poverty he is unable to support himself by his own exertion of	r labor, and
that he receives no pension but the one herein applied for.	
Deponent desires to participate in the benefits of the Act, approved Dec 1894, and the Acts amendatory thereof, and makes application for the pension	
is entitled for the year 1900. I have heretofore as a resident of Fig.	
county been allowed a pension for the year 189 9	Lou -
	dill
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day of Coury 1900.)	
Oldinary.	
State of Georgia	
State of Georgia,	· · ·
County.)	
I, W. II. IIII.GEY, Ordinary of	said County,
do certify that I am well acquainted with Sel Jeurg	the
applicant in the foregoing affidavit, and an well satisfied that the statements	
in his said affidavit are true, and I know he is the individual he represents h	imself to be
and that he resides in this County.	11- " "
Given under my official signature and seal, this	
day of 1900.	
here.	Real a
Ordinary FULTON	County.
Norg.—The blank spaces must be filled. Norg.—A fidavit should not be attested before January 1st, 1800.	,·

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STAPE OF GEORGIA,
fully County.
Personally appears Allun of tuling
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since theday of 18 _ 7; that he is 6 7 years old and
by occupation a Chapter that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of the in Company, of the Regiment of Mulliples (eo release) Sight his physical condition as
follows:
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the state of the Atlantana items
that his property consists of the following items
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of the value ofDollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1902. I have heretofore as a resident of
county been allowed a pension for the year 1 901
Sworn to and subscribed before me, this the
av of property of Suit
The state of the s
Ordinary.
STATE OF GEORGIA.
Fullo County.
Sohn OR Will
T,
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 1902)
AMER .
Beal bere
Ordinary FiltOII. County.
Note.—The blank apploes must be filled. Note.—Affidavit foodle not be attested before January 1st, 1902.

STATE OF	GEORGIA,	.) .			
- 1111	llert	_County.		11.01	1. 121
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to receive an	d receipt for the				
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Witness n	ny hand and seal,	this 2/ex	day of La	u	1903.
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POWER OF ATTORNEY.

FOWER OF ATTORNET.
STATE OF GEORGIA, Sullar County.) Mus how thing of allanda les
to receive and receipt for the pension allowed, and request that he remit same to
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Executed in the presence of
John Reversion
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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF	GEORGIA,)	•	٠.	
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Personally app	ears JONG	mg	of	11	
County, State of Ge	orgia, who, being du	ly sworn, says on oa	th that he is a bo	na fide cit	izen
and resident of said	County and State,				
,	day of	1838; ti			
by occupation a. O.	arfunter	, that he enlisted in	the military serv	ice of the (on.
federate States (or	of the State of	,) during the w	ar between	the
States, and served for	or the term of 4	loon's Bath	any of	_th Regin	
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that his property co	onsists of the following	ng items:	•		*
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	rty he is unable to s				
(3)	pension but the one		•		
Deponent desir	res to participate in	the benefits of the	Act, approved D	ecember 1	5th,
1894, and the Acts a	amendatory thereof, a	and makes application	on for the pension	n to which	h he
is entitled for the y	ear 1903. I have h	eretofore as a resid	ent of 1.		
county been allowed	a pension for the y	ear 1 *	11/4/		•
Sworn to and st	abscribed before me,	this the	103/2si	ig	
	JAN_20_19 0 3		mark.		•
$O^{\prime\prime}$	011	Ordinary.			
OT MOD OF	1.	,	100		
STATE OF	,	* }			
	Cou	nty.) +			*
	R. W. Kanson	01	Ordinary o	said Cou	nty,
	well acquainted w		mg .	·	
	foregoing affidavit,				
	avit are true, and I l	know he is the indiv	ridual he represe	nts himse	If to
be and that he resid					. 4
	Given under my offi		eal this		
~~	day of AN 24	1903.			
your /	٠	Jun Gol	Die Linson	/	2.9
	9	Ordinary		Cou	nty.
	Note.—The blank spaces in	nust be filled.	ave let 1909 a		
	NorsAffidavit should no	to accessed before Janu	it, pus.		•

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.
Personally appears & Colling of Pultar
County, State of Georgia, who, being fluly sworn, says on oath that the is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 1858; that he is years old and
by occupation a Companier , that he enlisted in the military service of the Con-
States, and served for the term of the Many in Company of the Regiment
of Ifu Milliage les Milors to Blattartelley is as
Follows: Jufum
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that his property consists of the following items:
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1904. I have heretofore as a resident of
County been allowed a pension for the year 1 90
Sworn to and subscribed before me, this the
(thay of JAN 20-1904 1904.) . talas
- John Alle Victory Ordinary.
STATE OF GEORGIA,
Fulton. County.
I, John R Witkinson Ordinary of said County,
do certify that I am well acquainted with & Ching
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my, official signature and seal, this 1904
day of
After your
here Grdinary Fultou. County.
Nors.—The blank spaces must be filled.

STATE OF GEO		}		•
Austo	COUNTY.	ſ	٠.	
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0/1	1, 4 40 10	my ~	hereby authori	ge .
John I	James	of Kulla	ù · Cu	
	1		Abor to see to see	
to receive and rece	opt for the pension a	illowed, and request	that he remit same	
		at .		
by		S.*	. /	٠.
		10 . 11-	/ **	
WITNESS my	hand and seal, this	day of Je	1905.	
	.//	my/	, ,	. 1
7	. #	Murth	[L. S	J
Executed in ;	he presence of	7 .		٠.
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POWER OF ATTORNEY.

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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	1
Fulton. County.) ,
Pearsonally appears J. le.	Ting of Fulton
	worn, says on oath that he is a bona fide citizen
and resident of said County and State, and	d has resided in said State continuously ever
since the day of	1835 ; that he is 70 years old and
by occupation a that	he enlisted in the military service of the Con-
federate States for of the Stalk of	Valuation at the state of the s
States and served for the rm of 3 41	the Company of the Regiment that willing that his physical condition is as
follows: Tefernetty are	d poverty
	6
and the second of the second	
that his property consists of the following i	tems :
T. T. Commission of the Commis	
of the value of	Dollars. I am now earning,
by my labor,	Dollars per mouth. 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	
	benefits of the Act approved December 15th,
	makes application for the pension to which he
is entitled for the year 1905. I have hereto	
County been allowed a pension for the year	0 14-0 / 1
Sworu to and subscribed before me, to	(Cary for
1 Post of	Ordinary.
	Ordinary.
STATE OF GEORGIA. ?	
County County	
I,	Ordinary of said County,
do certify that I am well acquainted with	Se Sting
the applicant in the foregoing affidavit and	am well satisfied that the statements made
by him in his said affidavit are true, and I k	now he is the individual he represents himself
to be, and that he resides in this County.	
Given under my official sign	ature and seal, this JAN 2 1905
day of	1905.
,	1 Ales Charant
Amx your Real Bere Ordin	2, 300000000
Note.—The blank spaces mu	it be filled.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Fulton County.
Personally appears J. C. String of Fulton
County, State of Georgia, who, being duly sworm says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the day of 182; that he is // years old and
by occupation a Marce , that he enlisted in the military service of the Con-
federate States (or of the State of State of Georgia) during the war between the
States, and served for the term of Strat (in Company, of the Regiment of Medical Condition is as
follows:
Infirmity and pareely
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 catitled for the year 1906. I have heretofore, as a resident of H1111071
County, been allowed a pension for the year 1905.
Sworn to and subscribed before me; this the flox all wing farly of JAN 1900. 1909. Heach Ordinary.
State of Georgia,
County.)
I, Ordinary of said County,
do certify that am well equainted with the Collectify
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 1 1906
day of
- Of Rhill Newsons!
After Bare Bordinary County.
Norm.—The blank spaces must be filled.

STATE OF GEORGIA, COUNTY. I, hereby authorize	
to receive and receipt for the pension allowed, and request that he remit same to	
by	
Executed in presence of which the first	
1 Orang	
	an all
SION SION SION SINCE	
Poor fearns 184. A JANY BENNY ENTERNY	13
Con Beagan 184. No. ANO. INDIGENT INDIGENT Regiment Regiment WARRANT LINDER OOWN W. LINDER OOWN T. LINDER OOWN T. LINDER	- S
Constitution of the state of th	4

nelsonie Bath. art. - millidge Co. Ga.

State	of Georgia,
Fulkor	County
	1007.00
	lly appears for long of The
County, State	of Georgia, who, being duly sworn, says on oath that he is a cona fide citizen
	said County and State, and has resided in said State continuously ever
	day of 18 17 that he is 72 years old
and by occupat	
lederate States	(or of the State of) during the war between the
	ved for the term of 2 412 in Company of th Regiment
of Attle	
follows :	Infirmity of poverty.
	The second secon
that his proper	ty consists of the following items:
Market Control	
of the value of	Dollars. I am now earning
y ny labor,	Dollars per month. That by reason of his
hysical conditi	on and poverty he is unable to support himself by his own exertion or
abor, and that	he receives no pension but the one herein applied for.
	t desires to participate in the benefits of the Act approved December 15th,
	cts amendatory thereof, and makes application for the pension to which he
	he year 1907. I have heretofore, as a resident of
	llowed a pension for the year 1906.
	and subscribed before me, this the
da	or Jan 2 1907. Ordinary.
for	Ordinary.
State	of Georgia,
State 0	o corgan,
	County.
1.	John Of Williamson / Ordinary of said County,
.,	
	am well acquainted with Je U. July
	the foregoing affidavit, and am well satisfied that the statements made aid affidavit are true, and I know he is the individual he represents himself
•	he resides in this County.
	Given under my official signature and seal this
	day of
	John M. Minson
	*
your	Ordinary Fulton. County.

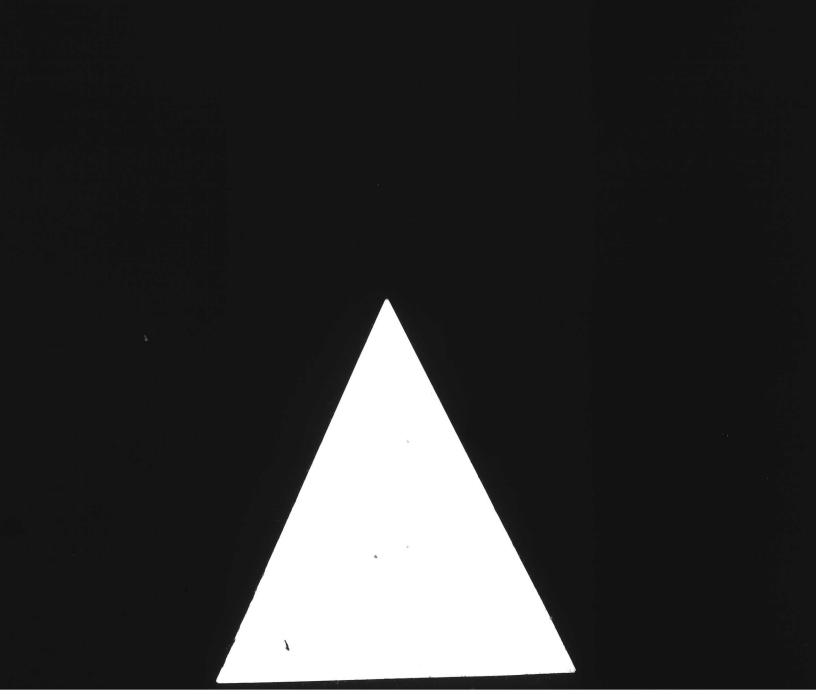
your seal here

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

Comptroller General,

Attenta, Ga., Juin 16 190/

pinkin dur m for the first 1901



King, John H.
No. 428 . Wilton C APPLICATION FOR Applicate of the Applic

APPLICATION FOR

STATE OF GEORGIA.

County.
Personally appeared before me
the county of
and says that he was on the 20th day of September, 1879, a bona, fide resident of this State; that he
emlisted in the military service of the Confederate States, or of this State, as a P.) A. L. G. T.
in Company 6, Regiment of Coroth Lays on Grant Volunteers
that while engaged in such military service, to wit Lat the battle enough goment of R. C. M. C. P. I.C.
in the State of Marganian on the Tropics has t day of
OCTOCKIS
that the same was amputated below the clow
that he has not received the payment allowed him for such limb under an Act entitled an Act to carry into
effect the last clause of Paragraph 1, Section 1, Article 7 of the Constitution of 4877, approved September
20th; 1879; that he hassupplied himself with an artificial
done so, he prefers to supply himself with an artificial
Sworn to and subscribed before me this
Pirint Woomday of otorinhe 1879. Colar St Ding
Suniel Outman Ordinary Jest
Nork.—The above affidavit mant be made before some officer authorized to administer oaths, a Judge of the Superior or County Court, Justice of the Peace, Clerk of the Superior Court, on Ordinary.
COMMISSIONED OFFICERS AFFIDAVIT.
STATE OF GEORGIA,
7
therow county.
1 el
Personally came before me
the county of
and says that he was Similar and in Company Color to the way
and that Mrs H King , the above deponent, was a
in said Company, and that this deponent knows that said, Line It hung
lost a sa
Sworn to and subscribed before me this
2. 4 day of Brownator 1824 . Af G.
2 O'children

AN ACT

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

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

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

SEC III Be it furthe; enacted by the said authority. That no applicant shall receive the sum allowed under this act

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

HERRY R. GOETCHIUS,

Secretary House Representatives.

WM. A. HARRIS,

Secretary Senate.

Approved, September 0th, 1879.

A. O. BACON, Speaker House Representation RUFUS E. LIMTER, President Senat

ALFRED. H. COLQUITT, Governor

STATE OF GEORGIA,

	-J./
	Personally came
	<u></u> ,
	who, being duly sworn, depose and say they are acquainted with
	who, being duly sworn, depose and say they are acquainted with
	that said; that hers a bona fide
	citizen of this State, and we are well satisfied that the facts stated by him in the above affidavit are true.
	citizen of this state, and we are wen satisfied that the facts stated by film in the above amount are true.
	Sworn to and subscribed before me this
	day of A
	STATE OF GEORGIA.
	7: 07
	Justin_ County,
	Chancel Pettrice Ordinary of Sands
	1 / W X > -
	county, do certify that I am well acquainted with the things of the county
•	
	the applicant for a.m
	affidavit are true, and that I am well acquainted with
	Lienterint on Confederate States francy
	the citizens who makes their affidavit, that they are respectable citizens of this county, and that the facts
	stated by them are truezes of nearly his lieve.
	Given under my hand and official scal, this
	· Name In
	day of November 1874
	Land Pethian
	4- Eucell ellringe
	· · · · · · · · · · · · · · · · · · ·
	a minuty

County.

MANDER OF THE MINNER

NO. 13.

NO. 13.

NO. 13.

NO. 14.

NO. 15.

STATE OF GEORGIA.

Finden County

PERSONALLY Appears of the 16 Ming of Freedom 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.

Little 1843; that he enlisted in the military service of the Confederate
States (or of the State of during the war between the States, and in Company be, of the Regiment of States of States of States of States of States of States of the Company be and the Regiment of States of

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 John of King the 6 day of Turney 1889

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

STATE OF GEORGIA,

County.

Preservative comes before me Ordinary of said county, and both known to me as reputable physicians of said county, who, being severally sworin say on oath that they have carefully examined and after such examination say that the applicant has been injured as follows:

Sworn to and subscribed before me, this 304 HIG

Nors.—The physicians will state fully the extent of the wound, and then give facts to show the extent of t disability resulting thereform.

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

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

dered substantially and essentially useless.

dered 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 the amendments have been duly sworn to the swenty and the proofs must show that the amendments have been duly sworn to the swenty of the swenty of the residence of the applicant. The certificate of any other will not be received my any case.

Trullon County.)
Ti, Ord be achini Ordinary of said county.
certify that I am well acquainted with John Me Deen the
plicant in the foregoing affidavit, and am well satisfied that the statements made by him
his said affidavit are true, and that he is disabled to the extent he claims, and I know he is
e individual he represents himself to be, and that he resides in this county. I also certify
at the foregoing witnesses, to-wit:
mara a final a Main a section of
the state of the s
tarin etama eta garanta da 🦠 11 a arra a la garanta eta terra da eta de la garanta
e persons of respectability, and that their statements are worthy of full credit and belief.
I further certify that before whom the foregoing
idavits were made and power of attorney was signed, is a
said county, and that the said affidavits and signatures thereto are genuine.
Given under my official signature and seal, this 6 day of Frances 1889
. W. L. Cachini
Ordinary Thelen) County.
Ordinary Miller County.
in the burners of a residence of the second
and the MO. is a contract of the same a second
POWER OF ATTORNEY.
TATE OF GEORGIA.
County.
KNOW ALL MEN BY THESE PRESENTS, (That I,
of
unty, in said State, do hereby appoint
my true and lawful attorney in fact, for
and in my name, to receive and receipt for whatever amount of money I may be entitled
from the State of Georgia by reason of the injury received as aforesaid in the military ser-
e of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby
thorizing my said attorney to receipt in my name for any Warrant that may be issued by
e 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
y of 188
y 01
(L. S.)
Executed in the presence of us:
)
and the second s
DIRECTION: Control badic salpe by con arous
DIRECTION
Send money to me as follows, by
to P.O.
County, Georgia.

STATE OF GEORGIA,

S

STATE OF GEORGIA. Fullar County.

I, Or. L. & outhern Ordinary of said county. do certify that I am well acquainted with John Ho. Hung 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 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 Jacob day of Palencey 1890.

County.

PPLICATION

STATE OF GEORGIA.

Hullin Conniy.

m. L. Coulling Ordinary of said County, do certify that I am well acquainted with John He. King the applicant in the foregoing affiliavit, 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

signatures thereto are genuine.

before whom the foregoing affidavits were made and power of attorney was signed, is a of said County, and the said affidavits and

Given under my official signatury and scal, this 3 day of Jam on 1891.

Will week ...

Crk Cachin

Ordinary Friedin

For Applicants Heretofore Allowed Pensions.

Tappineante l'interiore l'interiore l'ensions.
STATE OF GEORGIA,
Personally appears form to King of Fulling county,
PERSONALLY appears form to . Our of frulling 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 2 work day of
78 ; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a Private in Company to , of look regularin
of Volunteers Summey 's Brigade; that whilst engaged
in such military service at the hattle of (C in the State
of trys in a on the 33 st day of to remain 1861, he was
mounded as follows: 11 years at by this according ong
destroy of he will New to
The left week and causing audust.
of the Dance & "
No.
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
Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the
me le allone.
NOTE. State felly nature of wound or characters dispase which causes the disability, and explain particularly the extent of the disability.
the disability
POWER OF ATTORNEY.
STATE OF GEORGIA
}
County.
KNOW ALL MEN BY THESE PRESENTS, That I.
ot
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.

For Applicants Heretofore Allowed Pensions.

ror applicants neretolore allowed Pensions.
STATE OF GEORGIA,
Fellon County.
PERSONALLY appears John Stor King of Harlin
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
resident of said State, and has resided therein continuously ever since the first
day of18 ; that he enlisted in the military service of the Con-
federate States (or of the State of
federate States (or of the State of) during the war between the States, and served as a
of Scipic Volunteers 6066 's Brigade: that whilst engaged
in such military service at the battle of Redonnel in the State
of Angenes, on the 25 and day of Avender 1861, he was
of Volunters Cotto 's Brigade: that whilst engaged in such military service at the barde of Recommend in the State of Argument on the 13 and day of Argument 1864, he was wounded as follows: A cardendard from the Carring ampulation of January Resident Carring ampulation of January Resident about the Argument Carring ampulation of January Resident about the Argument Carring ampulation of January Resident about the Argument Carring ampulation of January Resident Carring ampulation of January Resident Carring ampulation of Argument Carring ampulation of Argument Carring ampulation of Carring Carring ampulation of Carring Carri
left hand Carring ampulation of
Janu Just abon the much
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
bu hunder dollars, for \$890
. Sworn to and subscribed before me, this, the
god day of Federal 1801
2nd day of February 1891.) Dr. L. Me william freeway
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
day of1891.
[L, S.]
Executed in the presence of us:
AND THE RESERVE OF THE PARTY OF
DIRECTION.
Send money to me as follows, by
toP. O.
County, Georgia.

T	ATE OF	GEO	ORGI	A,)	O1	Δ	
		··	Cos	unty. S	ents,	That I	
f		***********				County	y

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

State of Georgia, do hereby appoint

Executed in the presence of us:

County, Georgia.

For Applicants Heretofore Allowed Pensions.

	STATE OFIGEORGIA,)
	Ful ton County.
	Personally appears John Haking of Fulton
	County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
	resident of said State, and has resided therein continuously ever since the. 12th
	day of Cotchor 18 42; that he enlisted in the military service of the Con-
	federate States (or of the State of) during the war between the
	States, and served as a Private in Company C, of Control Regiment
	of Grantia Volunteers Sobb's Brigade; that whilst engaged in
	such military service attributes below Rightmond in the State
	of Virginia on the 33rd day of November 1861, he was wounded as follows: againstally by the discharge of his gun
	wounded as colows: Ageturistic of Mrs. Transfered of Mrs. But wounding him in the last wrist and sausa ageture the amputation of his
	hand or arm fust above the wrist
	The state of the s
	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, 1833. I have heretolore been allowed a pension of
	Sworn to and subscribed before me, this, the \ folia the King
	day of March 1893.)
	Jr. L. Lo allimin Carling
	Nora-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,)
	Till of n County.
	I
	do certify that I am well acquainted with John McKing the
	applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
	said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
	dividual he represents himself to be, and that he resides in this County.
	I further certify that
,	before whom the foregoing affidavits were made and power of attorney was signed, is a
	of said County, and the said affidavits and
*	signatures thereto are genuine.
	Given under my official signature and seal, this 6 day of March 1893.
	Intido ocemma)
	Ordinary Fulton County.

STATE OF GEORGIA.	POWER OF ATTORNEY.
Harlon County.	STATE OF GEORGIA,
1. M. Le outhour Ordinary of said county,	COUNTY.
do certify that I am well acquainted with Julia He. King the	Know all Men by these Presents. That I,
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his	County, State of Georgia, do hereby appoint
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.	of
Given under my official signature and seal, this 2 and day of the arch 189 >	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 afore-aid in the military service of the Confederate
One of the second secon	States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attor-
Ordinary Hulliam County.	ney to receipt in my name for any Warrant-that may be issued by the Governor, or fier any sum of money which may be coming to me for the reason aforesaid.
Ordinary. Halliam County.	IN WITNESS WHEREOF, I have bereunto set my hand and seal, this.
	[I, S.]
	Executed in the presence of us
	DIRECTIONS
	DIRECTIONS.
	to
	County, Georgia.
Commission of the commission o	
PENSION PENSION PENSION PENSION PENSION PUNCTORE 24, 1902 PUNCTORE	6
	Arm Arm
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THE SERVICE TO SERVICE TO THE SERVICE OF SERVICE SERVI	
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	16 45
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and the second s	
Are	
wints:	

For Applicants Heretofore Allowed Pensions.
PERSONALLY appears John Mo. Iling Of Handon County State of Georgia who being duly sworn save
of Harman County, State of Georgia, who Deing duly sworn, says on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously since the 12 day of Garage 1842; 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 Parent in Company of both at spectament of Volunteers to the 's
Brigade: that whilst engaged in such military service at the battle of believe hickory in the State of day of day of
186/, he was wounded as follows: Crear suffell
howarding him in the left that and
or arrive must abor the wrist
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 enting October 26, 1892. I have heretofoce been allowed a pension of
One hunderd Dollars for 1891
Sworn to and subscribed before me this the for the first the first day of ello as the 1892.
Nr. & . Cuch mo Ordinary. NorState [6] In nature of sound or character of disease which causes the disability, and explain particularly the
POWER OF ATTORNEY.
STATE OF GEORGIA
County!
Know all Men by these Presents, That I,
of
County, in said State, do hereby appoint
of 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 nillitary 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,
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 of1892.
. [L. s.]
Executed in the presence of us:
DIRECTION.
Send money to me as follows, by
P. O.
County, Georgia.
· · · · · · · · · · · · · · · · · · ·

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA.

Filton	County.) -		1.		
PERSONALLY appears_	John J	King. of		Fulton	•
County, State of Georgia, and resident of said State,					
	18 42; that	he enlisted in th		ice of the C	011-
States, and served as a	Private .	in Con	ipany C , of Co	Part Hage	Hit
of Gaongta Vol such military service aboth			rigade; that wh		
	oil the - 23r			186 4 he	

him in the left wrist and causing the amputationosfilits hand or

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

dollars, for the year 189 3 One l'undred

Sworn to and subscribed before me, this, the \ Jehn to Selicy 13th

m. L. Calhorn Oramany

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

STATE OF GEORGIA. Fulton

and that he resides in this County.

day of

arm just above the wrist

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

Given under my official signature and seal, this



m. L. Calhoun

1348

STATE	OF	GEORGIA,
SINIE	OF	GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I,

County, State of Georgia, do hereby appoint

my true and lawful attorney in fact, for

me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia by reason of an injury received as aforesaid in the military service of the Confederate States (or of this State) as stated in the foregoing affidavit; hereby authorizing my said Attorney to receipt in my name for any 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 52t my hand and seal, this

Executed in presence of us

DIRECTIONS.

Send money to me as follows, by

- to

P.O.

County, Georgia.

SOLDIER'S PENSION

POWER OF ATTORNEY.

STATE OF GROPGIA

****	County.		
I,		hereby authorize	
		of	
to receive and	receipt for the pension	n paid hereon and re	quest that he remit same t
		_by	
at			14
IN WITN	ESS WHEREOF, I ha	we hereunto set my ha	nd and seal, this
day of		1896,	

Executed in presence of us

For Applicants Heretofore Allowed Pensions.

on the sara day of

Fulton

in the State

November 186 1, he was

) during the war between the

in Company 7 , of Cobbs Legion

's Brigade; that whilst engaged in

County.

John H.King

Frivate

such military service attended bankouf pelow Pichmons

STATE OF GEORGIA,

Fulton

States, and served as a triv

of ir-init

Dersonally appears

federate States (or of the State of

. tre imit wrist	and couling the int	utation of ri	a bani or er	m just .
povi tre mrist				
, ,	7.			
Deponent desires to	participate in the bene	fits of the Act, a	pproved Octobe	er a4th, 1887,.
and the acts amendator	y thereof, and makes a	pplication for th	e allowance to	which He is
entitled for the year end	ling October 26th, 189	. I have hereto	fore been allow	ed a pension
of One Hurd	rei doll	ars, for the year	180 4	•
Sworn to and subs	cribed before me, this,			
4.7		1.10/11	1 4 Ja	1.9
day of	1	95.)		
		sucry,		•
Note-State fully the nature of the disability, resulting from th	of wound or character of disease,	which causes the disabi	lity, and explain part	icularly the extent
in the amounty, resulting from pa				
STATE OF C	PEODOIA	1		
STATE OF	,	ļ		
₹ulton	County.	J		
Ι,	W.I.Calboun		Ordinamias	said County,
		John H.Ki		
do certify that I am we				the
applicant in the foregoi				
in his said affidavit are		the individual	he represents	himself to be
and that he resides in t				
	Given under my office	ial signature and	seal, this	
day	of. Warob	.1895.		
• ~~~				
your s		2.6a	ehm	
here	, ,			
	0:	rdinaryF	ulton	County.
	*	•		,

For Applicants Heretofore Allowed Pensions.

S	TA	TE	OF	GEÓ	RGIA,

SIAIL	OF	EUNU	124,	ţ		
	ulton	.C	ounty.			
Dergoi	ang app	cars Jo	hn H.King			Fulton
			g duly sworn	i, savs on oatl	that he is a	bona fide citizen
and residen			resided ther	ein continuo	ısly ever sinc	e the 12th
day or		. 10	; that he c	nlisted in the		vice of the Con-
federate Sta States, and	served as		Private	· in Com	~	cobb region
of. Georg		Volunteers, se in the St	Tobb ate of	"irginia	Brigade; tha	whilst engaged
of . "079				, injured or d	100000000000000000000000000000000000000	
		e discharg	e of his	gun woundin	g hix in th	ne left wrist
end causin	ng the am	outstion o	f his hand	or arm jus	t above the	mrist
	•					A B
				,		
					3.	
2.					,	
						tober 24th, 1887,
						to which he is
		1.7				as a resident of
	lton	5	en allowed a p	ension of	One Br	inarea 💄
dollars, for				. /		
Sworn	to and sub	scribed befor	e me, this, th	10 1900	intt 3	5 meg
260	day of	Feb♥	189	3.		
m. %.	bal	home (Ords			
Nore-State	fully the natu	re of wound or cha	ractor of Greage w	nich causes the lisa	bility, and explain	particularly the extent
		•				
STATE	E OF (GEORG	I:A.)			
Fultor			nty.			· · .
		Cou	nty.		·	·. · · ·
Ι,	W.L. Cabb	oun	-		Ordinary	of said County.
do certify th	hat I am we	ll acquainte	with.	P ndo!.	.King	thethe
applicant in	the foreg	oing affidavit	, and am wel	satisfied tha	t the stateme	nts made by him
in his said a	affidavit ar	e true, and I	know he is	the individus	l he represe	nts himself to be
and that he	resides in	this County				÷ . 0
				signature and	seal, this '	16.
	day	of_	Pebv	1896.		• •

Affix your seal here.

Ordinary Fulton

County.

STATE OF GEORGIA,	١,				
Count	y. }				
Ι,	,	hereby authori	ze	9	
	of	,		.*	
to receive and receipt for the pel	. 7	ereon and request	that he re	amit same to	
to receive and receipt for the per	, , ,		time ite it	eunt same to	
		by			
at	6			14 × 1	
IN WITNESS WHEREOF,	I have here	unto set my hand	and seal, th	is /	
day of	1897.			<i>r</i>	
				[L, s.]	
Executed in presence of				*	
	1				
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	1				
				S 8	
			. •		
=		7- 785	* ****		
	01		Pens	1. 1	
For Those Already Enrolled. No. C. A. C. IN VALID LDIER'S PENSION 1897.	1.4	1	NO	2 / 1	
N. E. C. L.	4. 10	. 21 .	RICHARD JOHNSON	CANDED TO	
AT AT O	1.19	.0/1	. OH	WARRANT HANDED OMESTICATION ON THE CONTROL ON THE CONTROL	
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NVA)	1 3 Kg	14. W	IAR	2 P	
	Ju w	. 5	ICF	WAN WAN	
F I	1. "	E T	24		
	Name	Disability Amount,		95	
ii ii iya	7 0	D A.	1 1	. 11	
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	R OF A	TTORN:	EY.	
STATE OF GEORGIA,	.}			
I,		rahu autKosis		٠.
			•	A Management of States of the seal
to receive and receipt for the per			est that h	e remit same to
	by			, •
at	-			
IN WITNESS WHEREOF	I have hereur	to set my ha	nd afid seal	, this
day qf	1898.			•
. Executed in presence of	·	•	' '	[L. s.]
	\ .	٠.		· : · · .
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9 9	. 31	: 2	Pengion	
	313:		SON	D. Lorenza
TVAL	200	1	JOHNSON Commissioner of	HANDED TO
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No. 2.2. No. 2.2. ER'S. PI	4 2	9 4.	RICHARD	SHANT
	0	t s	RIC	H 2
	1 15	E E •	1	

INVALI SOLDIER'S. PEI

Name Copye A

Amount, \$ 100 Disability .

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA.

Lullon - County. personally appears John HI ving of Fullow. County, State of Georgia, who being duly sworn, says on oath that he is a boda fide citizen and resident of said State, and has resided therein continuously ever since the /2 44 day of CEF 18#2; 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 frivate in Company C, of Cotton Kellinger Volunteers. Cobb 's Brigade; that whilst engaged.

in such military service in the State of Vigueta , on the 23 and day 186 / , he was wounded, injured or diseased as follows:

Hecillentally shot by the dir. Charge of his fun wounding him in the left for it and factoring Cause. The amfutation of his hand he are and full abore the snist,

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 20th, 1807. I have heretofore under said law as a county been allowed an invalid pension of Clark hunder & Dollars, for the year 1896

Sworn to and subscribed before me, this, the I John He Jeing

STATE OF GEORGIA,

Lutton, County. IMIt thulsey

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

Given under my official signature and seal, this

Affix your seal -here.

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA.

Fire to a County.	•
Dersonally appears John JA Ming of Free	e Hon
County, State of Georgia, who being duly sworn, says on oath that he is a bo	ana fide citizen
and resident of said State, and has resided therein continuously ever since	
day of Ock 1842; that he chlisted in the military servi	
federate States (or of the State of) during the wa	
States, and served as a Purite in Company C, of	_th Regiment
of Volunteers, 's Brigade; that	whilst engaged
	13 Dday
of 186 /, he was wounded, injured or diseased as f	ollows:
assidentally shed by disc	horge
· Mugning rounding him in	leck
mixt causing appoint	tion
of hand above the mi	en
• • • • • • • • • • • • • • • • • • • •	
Deponent desires to participate in the benefits of the Act, approved Octo	ber 24th 1887.*
and the acts amendatory thereof, and makes application for the pension to	
entitled for the year ending October 26th, 1898. I have hererofore under	
resident of fully county been allowed an inve	
The Adecided Dollars, for the year 189 7	
Sworn to and subscribed before me, this, the	
12 day of Zees 1898. POST-OFFICE Colors	4 Mins
The state of the s	
North Nista fully the nature of wound or character of disease which causes the disability and strategy and	erticularly the extent
Note-State fully the nature of wound or character of disease which causes the disability, and explain part of the disability, resulting from the wound or disease.	ricinary the extent
STATE OF GEORGIA,	
Fulton County	
IT AND AND COMME	
	said County,
applicant in the foregoing affidavit, and an well satisfied that the statements	made by him
in his said affidavit are true, and I know he is the individual he represents	
and that he resides in this County.	armsen to be
Given under my official signature and seal, this/	7
day of	
(Affix)	
(real lare.)	-
Ordinary Freeze	County.
/	

STATE OF GEORG	IA, ·	
	County.	
I.	hereby authorize	
	of	
to receive and receipt	for the pension paid hereon and reque	st that he remit same to
	by	
at		
IN WITNESS WE	HEREOF, I have hereunto set my hand	and seal, this
day of	1899.	1
		[L. S.]

Executed in presence of

SOLDIER'S PENSION.

1899.

INVALID

(Fer Those Aiready Enrolled.)

· No. 14 60

County Statistics | Disability Amount, \$ (0.0 - 1888) RICHARD-JOHNSON, Communications of Presents WARRANT HANDIED TO SAMALY CALL AMORROW STATE PRINTER, ALLANA COUNTY STATE PRINTER COUNTY STATE PRINTER, ALLANA COUNTY STATE PRINTER, ALLANA COU

POWER OF ATTORNEY.

I,	County. }	
	of	
	pt for the pension paid hereon and request the	
at	and the second s	
IN WITNESS	WHEREOF, I have hereunto set my hand an	d seal, this
	* . 1000	
day of	1900,	
day of		[L. S

Ger Theo Areas Endels)
No 4994
INVALID
SOLDIER'S PENSION
1900.

ON N. WARRANT HANDED TO

JOHN W. LINDSEY,

8.0

For Popularial Horetofore Alloward Pensions.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
Fullon County.	
personally appears Ino. H. Thug of Fulkon	
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 Act 1873; that he enlisted in the military service of the Con	
federate States (or of the State of States, and served as a Correcte in Company of the Regiment	
of Calta legion Volunteers, Calta 's Brigade; that whilst engaged	
in such military service in the State of 2 a , on the 2 3 day	
of 12 186/, he was wounded, injured or diseased as follows:	
•	
lecidentace that by discharge	
of his gim, mouding list with	
The give monding life with	
above mich nower, roment	
Deponent makes application for the pension to which he is entitled for the year end-	
ing October 26th, 1899. I have heretofore under said law as a resident of	
County been allowed an invalid pension of	
Dollars for the year 189	
Sworn to and subscribed before me, this, the Swain to Area y	
day of Zee 1899, Post office	
day of. Test 1899. Post office	
day of 1899, Post office	
Any of 1899. POST ORFICE Not a -State fully the nature of wound or character of linears which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.	
NOIR - State fully the nature of wound or character of these which causes the disability, and explain particularly the STATE OF GEORGIA,	
Note-State fully the nature of wound or character of Justice which causes the disability, and explain particularly the STATE OF GEORGIA, County.	
day of 1899. POST ORFICE None-State fully the nature of wound or character of these which causes the disability, and explain particularly the STATE OF GEORGIA, County.	
day of 1899. POST ORFICE Nove-State fully the nature of wound or character of Jusase which causes the disability, and explain purticularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. 1. While County of said County.	
day of 1899. POST ORFICE NoveState fully the nature of wound or character of disease which causes the disability, and explain purticularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. 1. A County. 1. A County. 1. A County of said County, the certify that I am well acquainted with. See H. A County, the	
Nora—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, County. County. County or the disability and explain particularly the extent of the disability and explain particularly the extent of the disability and explain particularly the the statements and county, do certify that I am well acquainted with Sec. 4. The proposed of the applicant in the foregoing affidavit, and am well satisfied that the statements made by him	
day of 1899. POST ORFICE NoveState fully the nature of wound or character of disease which causes the disability, and explain purticularly the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. 1. A County. 1. A County. 1. A County of said County, the certify that I am well acquainted with. See H. A County, the	
Norz-State fally the nature of wound or character of Jusase which causes the disability, and explain particularly the extent of the disability resulting from the wound or disasses. STATE OF GEORGIA, County. County. I A County of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.	
Not a - 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, County. County. County. County of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this	
Norz-State fally the nature of wound or character of Jusase which causes the disability, and explain particularly the extent of the disability resulting from the wound or disasses. STATE OF GEORGIA, County. County. I A County of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.	

For Applicants Heretofore Allowed Pensions.

	STATE OF GEORGIA, County.
	personally appears to N. King of Falkon
	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
	12 day of all, 18/2; that he enlisted in the military service of
	the Confederate States (or of the State of) during the war be-
	tween the States and served as a provide in Company of th
	Regiment of Stoo legation Volunteers, 's Brigade; that whilst
	engaged in such military service in the State of Casto on the 23
	day of
	deichentily shat by dechan
•	of his original months low
	Terrish 16. 1 to 1. 1 1/2 1/2
	in put and
	Deponent makes application for the pension to which he is entitled for the year
	ending October 26th, 1900. I have heretofore under said law as a resident of
	County been allowed an invalid pension of
	Dollars, for the year 189
	Sworn to and subscribed before me, this, the \ La har the ine q.
	day of Marile 1900. POST OFFICE
	· maria
	Willows
	NOTE. State fully the nature of wound or character of diseases which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
	STATE OF GEORGIA,
	falkon County.
	I, Widd, Lalace - Ordinary of said County
	do certify that I am well acquainted with Sa. Id. The the
	applicant in the foregoing affidavit, and am well satisfied that the statements made by him
	in his said affidavit are true, and I know he is the individual he represents himself to be
	and that he resides in this County.
	Given under my official signature and seal, this
	Amx day of Draw of 1900.
	and born many
	Ordinary Frelling County
	Ordinary County.
	•

DISABLED

STATE OF GEORGIA.

Executed in presence of

SOLDIER'S PENSIO 1901.

POWER OF ATTORNEY.

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

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

_hereby authorize.

__ County.

DISABLED DIER'S PE

JOHN W. LINDSEY

POWER OF ATTORNEY.

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

FIREFOL COUNTY

___[L. S.]

Executed in presence of

unis ants Heretotore Allowed

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Zul m County.
Personally appears Ino X King of Quetan
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the 12 1
day of Cl
federate States (or of the State of) during the war between the
States, and served as a Struckt in Company C, of th Regiment of abt Legier Volunicers, Brigade: that whilst engaged
of Abts Legison Voluniteers, 's Brigade; that whilst engaged in such military service in the State of Abts, on the 33. day
of N N186 / , he was wounded, injured or diseased as follows:
his your sommating left wrist
his your worm ding left wrish
that he augustated
and the second of the second o
A party of the second s
The same of the sa
Deponent makes application for the pension to which he is entitled for year end-
ing October 26th, 1901. I have heretofore under said law as a resident of
One Security Dollars, for the year 1900.
Sworn to and subscribed before me, this the 10612 Se Storg
1/16 day of Jan 1901. Postoffice allasta ego-
John Re Wilkinson
Note -8 Gate fully the nature of the wound or character of disease which causes the disability, and explain partic-
ularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Muchell letiusm Ordinary of said Country
Ordinary of said County,
do certify that I am well acquinted with her K Aring the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him .
in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
7~
Given under my official signature and seal, this
day of June 0001.
white Welkinson
Ordinary Lulin County.
the second of the second of

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

·
STATE OF GEORGIA.
Fulton. County.
•
Personally appears & Haking of Fulton
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the /2 /h
day of18 42; that he enlisted in the military service of the Con-
federate States (or of the State of 1990), during the war between the
States, and served as a forwall in Company 6, of - oth Regiment
States, and served as a foundth in Company 6, of th Regiment of Volunteers, Orbit Leyou 's Brigade; that whilst engaged in such military service in the State of
day
of Mov
Wounded in left wind which was unfectated.
· E.
The second secon
Manufacture of the second of t
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
Fulto County, been allowed an invalid pension of
Our hundred Dollars, for the year 1901.
Sworn to and subscribed before me, this the) Whit H. My.
day of 1444 Post-office
Comment of the contraction of th
More.—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.
puriously the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA.
Fulto County.
The Milking
Odinary of said County,
do certify that I am well acquainted with
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this
day of JAN 13 1902 1902.
Affar Control of the
Man Make Kulto
FORE.—Fill all blacks and of Company and Radinage.
Nove.—Fill all blacks and of Company and Regiment. Nove.—All vouchers and affidavite must bear date after January 1, 1902.

TATE OF GEORGIA,	1/	POWER OF ATTORNEY.
I,of	nit came to	STATE OF GEORGIA,COUNTY. }
o receive and receipt for the pension paid hereon and request that he renate by		I
day of. 1903. Executed in presence of	_ [L. S.]	IN WITNESS WHEREOF, I have hereunto set my hand end seal, this
SOLDIER'S PENSION No. C DISABLED SOLDIER'S PENSION 1903. TOO County Coun	My Market 148 BED TO My Martine Rese Fritter, Alberts No Latte. Martine Martine H.	CONTINUE CON

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Personally appears & Suny
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 Oct 1842; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a Sewalt in Company 6, of th Regiment
of ga Volunteers, Gobbe Legion 's Brigade; that whilst engaged
in such military service in the State of, on the 23day
of Hov 1861 he was wounded, injured or diseased as follows:
East lift hand + wint
to the second of
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1903. I have heretofore, under said law, as a resident of
County been allowed on invelid county of
Dollars, for the year 1902.
Sworn to and subscribed before me, this the John K. King
day of 1903 Post office
fork State fully the nature of the wound or character of disease which causes the disability, and crutain
puring landy the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA, 1
County.)
I, Ordinary of said County,
do certify that I am well acquainted with Hosting.
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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
Jem & Williams
Nors.—Fill all blanks and of Company and Regiment.
New All searches and afficiency has date for January 1 1000°

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. County.
1102
Personally appears 16 Rang in
County, State of Georgia, who being duly sworif, pays on oath that he is a dona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of let 18 42, that he enlisted in the military service of the Con-
federate States (or of the State of Man) during the war between the
States, and served as a
of Mu Volunteers Colle Legina Brigade; that whilst engaged
in such military service in the State of on the 2 3 day.
of 180 , he was wounded, injured or diseased as follows:
List left hand & west
a let aft mana there
management of the contract of
A STATE OF THE STA
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
Fulton. County, been allowed an invalid pension of .
Dollars, for the year 1903.
Sworn to and subscribed before me, this the
Aday of JAN 21 1904 1904 Post-office
Post-once Post-once
Note.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Fulton. County.
I, John R. Wilkinson O 12 Ordinary of said County,
do certify that I am well acquainted with _ fe sing
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this JAN 21 1904
. day of
Ent. P. Wicking.
Ordinary Fulton County.
Norn Fill all blanks and of Company and Regiment.

STAT	E OF (GEORGIA,)		-						
			Сс	UNTY.					1			houina
		Ι,							⊸ 1	iereb	y auti	horize
					. of_							
to rece	ive and	receipt for	the pe	nsion p	aid here	on, an	d requ	iest t	that l	ie rei	mit sa	me to
					by				2 12			
at.					4.5	6						,
In	WITNE	ss Whereof,	I hav	e hereu	nto set i	my ha	nd and	l sea	ıl, thi		- 1	
day of				190	5.				×			
											100	[ւ. թ.]
	Execut	ted in the pr	esence	of								
		40										
<u> </u>					*	7.	Š	909		III.		11.
CODE SECTION 1280 (FOR THOSE ALREADY ENROLLED		=		0	ξ.,	Z		1		Cemmissioner of repsion	_	1 .
0 8				. 3	14	S			Υ.	6	WARRANT HANDED TO	Pearl
280 E	,	田田	10	16	192	13	7	1	JOHN W LINDSEY	ione	DE	N STATE X
Cops Section 1250	. >	32	3	13	On.	H	9 11	-	LIN	em iso	C HAN	1
Sec.	1	A S	6	3.	2000	3	0.		8 €	3	Į.	8 ×
Cops	°N	DISAB IER'S	7	1	SE.	1	2		HN	-	RA (Harris Per
40s	4			13	THE)	S.		JC	- 1	WAF	DEO. W.
=		3		1	2 /3	ilit	ınt,					1
101		0		Name	Country Co.	Disability	Amount,	1				11.
	c 1			1 2	0 0	н.	₫,	0.00		11		0.3

POWER OF ATTORNEY

	OF GEORGIA,	. ,	·			
	I		of		hereb	y authoriz
to receiv	e and receipt for					
			by			
at	13.					
	WITNESS WHERE		eunto set my	hand and se	eal, this	
day of						
						[L. S
	tecuted in the pre	sence of	*			
E		**	*			
E						
E	· · · · · ·		-	* .		
Es		:		*		
E			-	*.		

COR THOSE ALREADY EMBOLLED,
No. M. D
DISABLED

SOLDIER'S PENSION

1906.

WARRANT HANDED TO

JOHN W. LINDSEY.

Disability XOL

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. COUNTY.
Personally appears John He Ming of Fulton.
County, State of Georgie, 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 all
day of his life 18 , that he enlisted in the military service of the Con-
federate States (or of the State of State Tix) during the war between the
States, and served as a Chivate in Company C, of th Regiment
of bobbs (fur Wolunteers 's Brigade; that whilst engaged
in such military service in the State of, on the, on the
of 100 _186/ , he was wounded, injured or diseased as follows:
lasi cirne Richmond, Va.
· · · · · · · · · · · · · · · · · · ·
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1905. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1904.
Swort to and subscribed before me, this the
Sworp to and subscribed before me, this the while the Suite Deing and JAM 2 1905.
1 10 Post-office Attauta
Note.—Stafe fully the nature of the wound or character of disease which causes the disability, and explaint particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA.
A AAA CAA
Ordinary of said County
COUNTY, Ordinary of said County, do certify that am well acquainted with John M. Sting
the applicant in the foregoing affidavit, and am well patisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under mylofficial signature and seal, this JAN 2 1903
day of
CAME CONTRACTOR CONTRACTOR CAME
Beat Pour Fulton. County.
Norn. Fili all blanks and of Company and Regiment.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Fulton. County.
Terlian
Personally appears John 10. Sling of Fulton.
County, State of Georgia, who, being duly sworn, says on sath that he is a bana fide citizen
and resident of said State, and has resided therein continuously ever since the 12
day of 1842; that he enlisted in the military service of the Con-
federate States, (or of the State of Slangua) during the war between the
States, and served as ain Company of th Regiment
of College, Volunteers Lyon, 's Brigade; that whilst engaged
in such military service in the State of, on theday
ofhe was wounded, injured or diseased as follows:
110
Lost arm, at technous, Va.
, / · · · · · · ·
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1906. I have heretofore, under said law, as a resident of
Fulton. County, been allowed an invalid pension of
One Houndred, Dollars, for the year 1905.
a la la la la como distributa la
Sworn to and subscribed before me, this the
The state of the s
Com A Wil Kinson
ArnState 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 Ornit William / Orginary of said County
do certify that I am well acquainted with the Ming
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this. JAN 1 '906
day of
John Albie Kierson
Jan Santian
ordinary County.

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

ATE OF C		Cc	DUNTY.				
. I,	×			eranamin and management	, herek	y authorise	
			_of				
receive and	receipt for	the pensi	on paid here	on, and reque	est that he re	mit same to	
		*	by				
			w .		,		
I. W.	og Wunnno	r. I have b	eraunto set m	y hand and s	eal this		
				.,	,		
of .	a) to the rectal	1907.				F:	
				-		[L. S.]	
Exec	cuted in pres	sence of				,	
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					XI.		٠
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6			2 2	1907.	ntions	:	
LEO)	· NOIS		6.70	1907.	y Pensions.		
(ROLLED)	NOISN		money.	now. 1907.	SY, ner of Pensions. priro	Yun'ing	
Y EMPOLLED)	NOISN	Z	Tung Farin	Browl.	DSEY, interior of Pentions. RDEP TO	marke Arters	
EADY EMROLLED)	NOISN	77,	Hung H. Hopen	V Chall	LINDSEY, Doministioner of Pentions, HARDEPTO	CAN STREET	
already ENROLLED)	NOISN	00%	the fluid	Mose. 1907.		and some furnite frager.	. +:
Cons Section 1350. SE ALREADY EMPOLLED) 5. /+ 2.	NOISN	907.	Mr. Hund	Los Correct.		Branch was French Arters	. #
FOR THOSE ALREADY EMPOLLED) No. 14 2	SABLED R'S PRNSTON	1907.	la R. Hung	Disability Low Chaul.	JOHN W. LINDSEY, Commissioner of Pensions. WARRANT HANDEPTO	V Brammer corn Forester.	*

Audited Feb. 6th 1889.

Wenter No. 83

Wom semiglish
Amount 8 160,

Part to folia Stilling

For 10 A strong Lay 1

Stilling 6. 1889

included in Warrant No
issued to Treasurer

1889

NARANI TERM

Will Lamped Mate Prince, Frontining Solicities

kOs YALEL KUN SINGER

Programma Survey

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,	
Personally appears force Mo. Ming of Tuiton.	No. 83
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 12 Celtow 1842, the he enlisted in the military service of the Con-	STATE OF GEORGIA, EXECUTIVE DEPARTMENT & Allanta, Ga Moly (1584)
federate States (or of the State of Alaragaa) during the war between the	, and the parameter)
States and served as a in Company la of the Regiment of Wollish Volunteers life of Brigade; that whilst engaged	*1
in such military service in the State of, on the day	Mr. Ochu W. King wo of the Country
of186 , he was wounded, injured or diseased as follows: *	Mr. Scill St. St. County
	of Ole Clar. having filed his application in the Executive
Fortain Richmond, Na.	Department for an allowance under the Act approved October 24, 1887, as amended by Act,
vivilin armoner, our	Dec, 24, 1888, and the same having been allowed for DO J. J.
	Sifk amo
	He is entitled to receive the sum of all Milled and Y & Dolhars
	He is entitled to receive the sum of Q / (V)/ ((A) (A) (A) (A) (A) (Dollars
Deponent makes application for the pension to which he is entitled for the year	for such disability, the same being the allowance due for the year unding October 21, 1889.
ending October 20th, 1907. I have heresofore, under said law, as a resident of	The Treasurer will pay the same and track the region on this voucher, and return same to
County, been allowed an invalid pension of Dollars, for the year 1906.	Executive Department for warrant
Sworn to and subscribed before me, this the	Governon.
_day of1907.	By the Governor
John R. Williamson. Postoffice	CLERK EXECUTIVE DEPARTMENT.
Norz.—State fully the nature of the wound or character of disease which causes the disability, and explain	
particularly the extent of the disability resulting from the wound or disease.	
State of Georgia,	
Fulton county.	RECEIVED OF STATE THEASURER, R. U. HARDEMAN,
1, John St. Holmon A grainary of said County,	Carlo 1 1 and
do certify that I am well acquainted with Den Holing	
the applicant in the foregoing affidavit, and am well satisfied that the statements made	per above voucher, this & of Hebry 1889
by him in his said affidavit are true, and I know he is the individual he represents himself	John H. King
to be, and that he resides in this County.	
Given under my official signature and seal this	
day of	
AME	
here	
Norg.—Fill all blanks and of Company and Regiment. Norg.—All vouchers and affidaviss must bear date after January 1st, 1937.	

Application

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer. STATE OF GEORGIA. County. of said State and County, hereby applies for the pension provided by Act of 1910, to Confederate Soldiers, and submits his sworn statement, with his estimony to make out the same, and after being duly sworn-true answers to make to the quesions propounded, answers as follows, to wit: 1. What is your name and where do you reside? (Give County and Post-office) 12. How long and since when have you been a continuous resident citizen of this State? I have Such July Jan Owice 1856 3. Did you enlist in the Army of the Cynfeligate States or of the Organized Militin of this State from 1861 to 1865?

4. When and where, and in subst Company and Areignent did you enlist (Give the arm and class of Service Military Bervice with said Company, and Rogiment:

(Sive date of discharge of the Army of the Army of Service with said Company, and Rogiment:

(Give date of discharge of the Army of the Service with said of the Army of the Service with said of the Were you actually present with your Command when it was surrendered or discharged? 8. If you were not actually present, state specifically and clearly where you were W WAD a. Where was your Command when you let; it & entirely in a low land of the inclaires of both b. When did you leave the Command? For what cause flid you leave? In the both of the both Why did you not return to your Command after heavy expired?

I. Why did you not return to your Command after heavy expired?

In what way were you prevented?

Manual Manua Were you captured during the war?. when were you released? j. Lea, when, and where? In what prison were you held may when were you release?? If the state of the state o What property of any kind have you or your wife disposed of any for what purpose since 4 Nov., 1908. To whom and for what price?.... 11. What property of any discription of any kind, and of any value now owned and in the ssion and control of yourself and wife and its cash value? (Make itemized list).

What annual or monthly income or earnings of yourself and wife and the source derived havyou? Alone me water & dryer 50 limin on broad

13. Are you drawing a pension of any amount from this State or the Uni

14. Have you ever applied for the Georgia Ponsion and Ind it refused? and for wing thus allowed to the Control of the Control

day of Ogr Ordinary,

Q UESTIONS FOR WITNESS AS TO SERVICE.
STATE OF GEORGIA:
County.
J. C. Wuff ord Que said State and County is hereby presented
by the Act of 1910, in said State, and after being sworn true aparts to make to the questions propounded,
answers as follows:
Cartinarile Barlow Config.
2. How long and since when have you known. The applicant? Direct March (1862)
3. Where does he now reside and since when has he been a bonafide, continuing resident in this .
From in Some 1862 Or for My forgard from Sold gast
4. When, where and in what Company and Regiment did
war from 1861 to 1865? (Give date and place) 802 (Give date and place)
in How did you obtain your information of this Bergice I and the least of the work of the state
6. How long within your own personal knowledge did he persona actual military service with this Company and Regiment? (give date)
this Company and Regiment? (give date) The first state of the state of
are 40 4 90 May. Numbered Mant 36406 Gunder NC
8. Were you personally present at the Surrender P. C. Millians for the Management of the Surrender of the Su
to report to an IN I wife or much for
10. Was the applicant personally present with his Command at surrender.
L. I wow where was he and how came him there? The Dony Willed in the low along Nov- 1868, After that I was not worth him
12. When did he leave his Command?
when he left it?
By whose authority did he leave and how
long was he granted leave?
an that you have stated to be true. If or your own anothering (Ten deemly and specifically)
13. In what way was he prevented from returning to his Command?
How do you know?
14. What effort did he make to return to his Command and how do you know?
15. Was applieant captured as a prisoner
Sworn to and subscribed before me, this the)
294 day of 104 101
Gudnones o Ordinary.
of Garlow County.
AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA.
County.
Personally before me somes
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.)
 What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.

1908? (State it fully by item				
O. When and an other	n was it sold or given to?			
	paid or stated to be paid?			
	e party to applicant?			
	vas made of the proceeds o			
6. Was the dispositio	a of this property made in	good faith and fu	ıll values?	
or was it made to obtain a p				
Sworn to and subscrib	ed before me, this the			9
Sworn to and subscrib	of191 5	. • .		
		dinary.		
	of		County.	
	ORDINARY'S CI	ERTIFICAT	F .	
STATE OF GEORG				
	County.			
I,,		Ordinary of sa	id County, certify that	I know
the applicant	for Pension is the p	erson he represent	s himself to be and re-	sides in
said County. That I also kn	ow		the witness swearing	to the
service and				
they are all residents of said C	ounty and were duly swor	by me before sign	ning the foregoing affida	vit and
Tax Results of		shows that	Al Al	nd wife
value for tax is in 1908				
	and official seal of office th			
				ounty
NOTES 1. Before any questions: "You do solemnly swe shall give shall be the 2. Additional affidavits 3. All affidavits must be	re answered the Ordinary shal ar that you will (rue answers whole truth; so fill p you God. nay be attached fi blank space made before the Ordinary and	l swear applicant and make to each questions are insufficient.	all witnesses in the following asked you and the evide	ng words
 If applicant has no prounnecessary. 	perty at all in his possession, u	se or control of self	and wife, affidavits of Free	holders

the applicant fo	or pension as	nd we know	the property t	hat is now	in the use	e, possession	and control of hir
and wife and of	its cash val	ue to wit:	(Make List by	items and	value.)		
		*,			P. Tarrey	200 L	
***************************************		42	5-4-2-1	- 28	2014	1177	
***************************************	***************************************			***************************************		7	at the second

Audited Feb. 5° 1890 UM S.M. GUA

1. What property, if any, has been sold or given away by the applicant or his wife since & Nov.

	. 2	1		_
	Maim	red Sol	diers.	-
Vouch	ier No.	157		
	ini \$ 10		,	
	John		Kuig	3
For O	Las	s of	left	,
	and.			
9	ely		189	90
	- 4			
Includ	led in war	ant No.		
	issนู้เอเ	lo Treasu	rer.	7
	5	5	4	
	4 45	ь	18	
		1 /	S WARRANT CLER	к.
W	J. Campbell, State	Printer, Constitu	tion Job Office.	-
	0110		~	
0	ype	ea	en	
1				

1891. Maimed Soldiers. issued to Treasurer. applicant

No. 257
STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Allanla, Ba., Fiby 5 1099
Mr John & Ring of the County.
of Kullar having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
Morrow Letter 1888, and the same having been examined and allowed for the sentitled to receive the sum of Old Partitional Politics and
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 techipt on this voucher, and return same
to Executive Department for warrant. Governor.
By the Governor,
(C. M. Ha-1218 EN CLERK EXECUTIVE DEPARTMENT.
(C. V. W. 1)

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Due Hundied roof Dollars,
per above voucher, this fohn it thing

Allanta, Sa Foly 3 1891. STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Mr. John Kring having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887, as amended by Acts pppfored Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for He is entitled to receive the sum of the Milled Dollars for such disability, the same being the allowance due to the same and hold to receip on the same and return same to Executive Department for warrant. GOVERNOR By the Governor.

Sec'y Executive Department. 100 RECEIPED OF R. U. HARDEMAN, Treasurer of the State of Georgia.

1891.

E King, J. H.

WHERE BORN? Resident of Georgia since 1886

ENLIGHED WHEN AND WHERE? March 1868, Big Shanty, Cobb County, Ca.

RANE:

BOME ANY AND REGIMENT? Go. H, 60th Georgia Regiment.
And----- 06. L, 62nd Georgia Cavelry.

NAME OF CAPCAIN AND COLONEL?

WOUNDED? Jan. 87, 1884, wounded in the neck in battle near Seviewville ? Tempessee.

HAITURED, WHEN AND WHERE? Jan 27, 1864, kept in Knowville until April. Sent to Camp Chase, Ohio.

RELEASED: Does not state when.

-WHEN AND WHERE SURRENDERED? Oquumand surrendered; April 26, 1068, Oreensbore, N. C.

-IF NOT PRESENT AT SURRENDER, WHERE WERE YOU? At home in Bartow County, Ca. wounded.

DIED, WHEN AND WHERE?

BURIED:

WITHKSSES: J. G. Wofford - Co. I, same Regt. No data.

Shite of horsein & Fullow County }, There are mun by their

mounts that I John it King of the bound; of fullen and state afensaid have this day constituted and appended and by their so hints.

append Milliam CHodysin Monte, ut down of the County and State afendad, ask for round and order. Minden som of Minu,

and cutilled to form the tak of moyen ander. The let entitled an not a com, int

effect the last clause of Paragraph 1. 500 1. Art = 1ch ". of the Consolution of 1899, approved to pt = touten 204 1899," And Mut a shall never

full power and entimber to sign neight for his sum. and do any other est or cot

in the promises in my name, and in as for a manner, was by

Le vilier where I have remt vet

my aund and seal. This, Junt- Lound buy

Janiel Cottonian, Ordany Jet.

attent) BURIED: Janiel Cottonian, Ordany S. C. WITNESSES:

POWER OF ATTORNEY.

When y where his lin Many Man Commendade as the transfer of the Commendade as the comme

This is not an agree her for the star and the star of the star of

Status afficient land to the Association 1899,

RICHARD JOHNSON,

WARRANT HANDED TO

Co & - 40 Ga

Approved

INDIGENT PENSION

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

hereby authorize

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

Witness my hand and seal this

Executed in presence of

Quectono lo, Applicant.

STATE OF GEORGIA.

Hulo. County.

of said State and County, desiring to avail himself of the Pension Act (Section 1264, Code), hereby submits his proofs, and ofter 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.) State of margine in comment, want ou
- Georgia would have issilled have and all 3. When and where were you born? . 108 Carre in Cartier copers.
- 4. When and where and in what company and regiment did you enlist or serve? I could de in the of a 1962 infament georgia your,
- 5. How long did you remain in such company and regiment : 111. Let 1545-
- 6. For how long a period did you discharge regular military duty? From 1561 4 1616
- Luch france . 11. 12 22 . - 1. 1. 146
- Tusica de Muna
- 8. What is your present occupation?
- 9. How much can you carn (gross) per ausum by your own exertions or labor : Lal 11016 ... Align 10. What has been your occupation since 1865? - I market were waster street of the
- 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": Angelia in the control of the con 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 done to contain a will great visually indirections Live Chemicalisms & widery woulders
- 13. What property, effects or income do you possess, and its gross value? Beality
- 14. What property effects or income did you posters in 1894, 1895, 1896, 1897 and 1898, and what disposition, if any, did you make of same? It'd J. w. hecean,
- Bouly in he see . " all while and a surely 111 1574 1875 1878 1897 1:15
- 15. In what County and you reside during those years, and what property did you then return for taxation? In 1314 trisys a hearded in toweld with all 15:6.50 16. How were you supported during the years 1897 and 1898? Le and hatter when the sale of
- in the Educat racidity. 17. How much did your support cost for each of those years, and what portion did you contribute thereto
- by your own labor of income " (26 11. coidle a doctal) a or income de
- 18. What was your employment during 1807 and 1808? What pay did you receive in each year? tidiney oscialy in lunars rack france
- 19. Have you a family? If so, why composes such family? Give their means of support? Have they homestrat? I have a like some a le decepher in Souther Lephant, in same no parties in The satter-Mills I have so homestran
- 20. Are you receiving any pension? If so, what amount, and for what disability? It is at all

Mo Pulicia ward success he and were willy Sworn to and subscribed before me this the

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,	
COUNTY.)	
as a witness a support of the application of Control of Said State and County, having been presented 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 routed a world Typice	
2. Are you acquainted with . John It. Ling , the applicant; if so	
how long have you known him? Les lines (186). 3. Where does he reside, and bew long and singe, when has he been a resident of this State?	
sives in Atlanta Ja, vas been a resident of state all his life	
attenville 1862 Co I - 40 Las Wason samy programment of the collect, and how do you know?	
5. Were you a member of the same company and regiment? Co. II 40 Sec	
soldier, and the time and circumstances of his discharge from the service? With regiments intel	
a misoner he did not reserve discharge	
7. What property, effects or jucome has the applicant.' (Give your means of knowledge).	
ine or ran not through	
8. What property, effects or income did the applicant possess in 1896, 1897 and 1898, and what dispo-	
sition, if any, did he make of same? Nothing	
9. Has be conveyed away any of his property in the last three years, if so, what was it, and to whom?	
10. What is the applicant's occupation and physical condition Pedfer, his bryaica. Condition seems to be very bad and has been so lines.	
10. What is the applicant's occupation and physical gendition : Pedfer, his bryaica condition seems to be very bad and has been so lines he came back from business	
10. What is the applicant's occupation and physical condition? Pedfer Air bry acca. Condition seems to be very tad and has been so lance he came back from busin. 11. Is the applicant analyte to support himself by labor of any port, if so, why to Almit he	
10. What is the applicant's occupation and physical gendition? Padfer his bry secon Contribution secured for the very trad and has been so time he came has from Surson. It is the applicant analyte to support himself by labor of any port, if so, why to them of he wo not able to support himself by labor of any port, if so, why to them of he we not able to support himself by labor of any port, if so, why to them of he was able to support himself by the more able to support himself by the support	
10. What is the applicant's occupation and physical condition? Peofer his ony according to the new back and has been so know he came back from business of any act. 11. Is the applicant unable to apport himself by labor of any act, if so, why to them the some able to publicate market properly by many actions. I from that some the telement from the some back to be the some form the some back to be apported during the years 1897 and 1898.	
10. What is the applicant's occupation and physical condition? Peofer his ony according to the new back and has been so know he came back from business of any act. 11. Is the applicant unable to apport himself by labor of any act, if so, why to them the some able to publicate market properly by many actions. I from that some the telement from the some back to be the some form the some back to be apported during the years 1897 and 1898.	
10. What is the applicant's occupation and physical gendition? Padfer his bry secon Condition second for he way to a now has been so been so been less the papier to applicant made to support himself by labor of any nort, if so, why to forms free work about to support himself by labor of any nort, if so, why to forms free work about to support during the years 1897 and 1898. I have have been broken 12. How was be supported during the years 1897 and 1898. I have been from the support for these two years was derived from his own labor or income? How was perhaps to these two years was derived from his own labor or income? A very finall perform of his support for these two years was derived from his own labor.	
10. What is the applicant's occupation and physical gendition? Padfer his ony secon conclusion seems to be very tradition? Padfer his ony secon for earner than the second form but and has been so timed for earner than the padfeant analyte to support himself by labor of any port, if so, why to them the so not able to support himself by labor of any port, if so, why to them the sound has been broken that so not be placed formally the second for the padfeling of the second formally th	
10. What is the applicant's occupation and physical goodition? Parfer Air Singuistics Predictor scenario to the rough that and has been so brance he came back from business. 11. Is the applicant unable to support himself by labor of any sort, if so, why to them fore the scenario able to support himself by labor of any sort, if so, why to them fore the scenario able to support of the support	
10. What is the applicant's occupation and physical gendition? Parfer his on your a service of relation secured to the very took and have been so longer to relation to apport himself by labor of any ort, if so, why? Therefore the substances of the physical part of the substances of	•
10. What is the applicant's occupation and physical gendition? Parfer Air on your a series of the range that and has been it of any or a series for earner to be seen	•
10. What is the applicant's occupation and physical gendition? Parfer his on your a service of relation secured to the very took and have been so longer to relation to apport himself by labor of any ort, if so, why? Therefore the substances of the physical part of the substances of	•
10. What is the applicant's occupation and physical goodition? People. And on your of predictor secure to be now to	•

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

tookii.
Personally came before me of the fire me and
, both known to me as reputable physicians
The 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 has precise physical condition is as follows:
SASTROFATEN
the the
T' of Il apate Late.
monecofor a des cijolitico
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 (1899.)
Ordinary. Wheaton King to
CORDINATIVE CONTINUE OF THE PROPERTY OF THE PR
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA, The
Fullow COUNTY
I, Ordinary in and for said County, hereby certify
that the applicant. 197 7 Change resides in said County, and has
been a bona fide resident of this state since the day of
and that the witnesses, viz:
ard 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 A County show that applicant
naturnal for taxation in his passe in 1897.
of property, and in 1896 Dollars of property.
In my opinion the foregoing claim ismade in good faith.
Witness my hand and seal of office, this
Ordinary.
County.
NOTE.
 Before any questions are answered, the Ordinary shall -wear 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 won field."
you too, Additional affidavits may be attached if blank spaces are insufficient.

POWER OF ATTORNEY.

STATE OF	GEORGIA,
	County.
Ι,	hereby authorize
-	_of
to receive an	d receipt for the pension allowed and request that he remit same to
	_at
by	
Witnes	ss my hand and seal, this day of 1902/
	[L. S.]
Executed	in presence of
-	,
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- 6	
9	1902
CODE SECTION S.A. (FOR THOSE ALREADY ENROLLED No. 379	S 2 2 2
EN	INDIGENT JER'S PEN 1902. Fult Regiment of Active of Committeer of Com
CODE SECTION 154	INDIGENT IER'S PER 1902 Guitt. Edition. WARRANT ISSUED HI Y NARRANT HANDED TO THE HAND
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HOS No.	
- H	
E	SOI Name.

POWER OF ATTORNEY.

STATE OF GEORGIA.	
COUNTY.	
I,	, hereby authorize
of	
to receive and receipt for the pension allowed, and request the	at he remit same to
at	
by	
WITNESS my hand and seal, this day of	1907.
	[I. S.]
Executed in presence of	
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THE THOSE ALESANT IS REGIME WARRANT IS WARRANT IS	VAR WAR
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Name Coupty	

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, Fulton. County. Personally appears M. Fulton.
County, State of Georgia, who being duly sworn, says in oath that he is a bone fide citizen and resident of said County and State, and has resided in said State continuously ever since the day of MM 18; that he is years old and
by occupation a that he enlisted in the military service of the Con-
States, and shreed for the term of the state of the term of that his physical condition is as
Heart trouble
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 bereforce as a resident of Fulton.
county been allowed a pension for the year 1902
Sworn to and subscribed before me, this the day of the standard of the standar
STATE OF GEORGIA.
Full C. County.
I. John R. Wilkenson. Soly Stranger 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 Acce) 1902.
AMI TOUT OF THE PROPERTY OF TH
Ordinary Fulton County.
Nors.—Affidavit should not be attested before January 1st, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,		
r IIII Cour	ity.	
Personally appears	Jairy	of
County, State of Georgia, who, being di		
and resident of said County and State,		
since theday of	18.4/; th	
and by occupation a		he military service of the Con-
	uormia	during the war between the
States, and served for the term of	ho /in Company	t, of 44 th Regiment
of DA Rulo Jung	/	his physical condition is as
follows: Infizingth	1 4 POZE	2 to
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that his property consists of the follow	ing items;	
N. K. C. C. Carrier of the Control o		
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of the value of		Dollars. I am now earning
by my labor,	Dollars per mo	onth. That by reason of his
physical condition and poverty he is una		
abor, and that he receives no pension b		
Deponent desires to participate i	n the benefits of the A	ct 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 he	retofore, as a resident	of Valley
County, been allowed a pension for the	year 1906.	
Sworn to and subscribed before n	ne, this the	i ha
Taken The Wilke	_1907.	7
John R. Wilke	_Ordinary.	
State of Coopeia	1	
State of Georgia,	ļ	
Coun	tv.	
La fan Si. Wilk		Drdinary of said County,
	1/ 1/ 1/	ins
do certify that I am well acquainted w the applicant in the foregoing affidavit,		1
by him in his said affidavit are true, and		
to be, and that he resides in this Count		
Given under my official	signature and seal thi	is
day ofAN	1907.	
8	John R. W.	thens
Amx	0	
neal here	Ordinary	County
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POWER OF ATTORNEY

STAT	E OF	GEO	PCIA.	DIC OI	AII OMI	11.	
SIAI	L OF	GEO	KUIA,	_County.			
1,				_county.)	hereby author	ize	
				of.	nercoy author	12.6	
to rece	rive and	Lrecei	ipt for the		wed and req	nest that he ren	it same to
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by							
Wi	itņess m	y hanc	! and seal, t	his	day of		1903.
							[L. S.]
Ex	ecuted i	n pres	ence of				[2. 3.]
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CODE SECTION 154 SE ALREADY E		INDIGENT	IER'S PE	1/2	Regiment for Yolk	JOHN W. LINDSEY	WARKANI HANDED TO
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POWER OF ATTORNEY.

			-		
STATE OF GEORGIA,	1				
	COUNTY.				
I,				h	ereby authorize
		of			
to receive and receipt for the	репайон	allowed, a	nd request	that he	remit same to
		at			
by					
WITNESS my hand and seal,	this	đ	lay of		.1904,
					[L. S.]

Executed in the presence of

SOLDIER'S PENSION 1904.

(FOR THOSE ALREADY ENROLLED.)

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County Regiment A.D. Regiment A.D. Regiment A.D. Markant ISSUED
WARRANT ISSUED
WARRANT ISSUED
15
10HIN W. LINDSEY.

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WARRANT HANDED TO

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF CEOPCIA
STATE OF GEORGIA,
County.)
Personally appears John Williams of The Ton
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 Justin 18; that he is 6/ years old and
by occupation a , that he culisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of 4 yr in Company I, of 46th Regiment
of Gu Vole Inf. ; that his physical condition is as
follows:
J PP
The second of th
that his property consists of the following items:
J
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 17-11-17,
county been allowed a pension for the year 1.
Sworn to and subscribed before me, this the
day of JAN, 20 1903.
Ordinary.
STATE OF GEORGIA,
County. \
I, Ordinary of said County,
do certify that, I am well acquainted with John WKing
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and, I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this
day of 1903
See !
Ordinary County.
Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January lat, 1903.
The contract of the contract o

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton, County.
Personally appears John Willing of
County, State of Georgia, who, being duly sworn, says on oath that he is a hona fide citizen
and resident of said County and State, and has resided in said State continuously ever ince the day of Simb 184%; that he is years old and
y occupation a, that he enlisted in the military service of the Con-
ederate Cates (or of the State of) during the war between the
States and served for the term of 4 yr in Company I, of 40 th Regiment
of fu Call. Fuf ; that his physical condition is as
ollows:
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hat his property consists of the following items:
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of the value ofDollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
hat he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
894, and the Acts amendatory thereof, and makes application for the pension to which he sentitled for the year 1904. I have heretofore as a resident of
County been allowed a pension for the year 1
Sworu to and subscribed before me, this the
ofm AWilkinson Ordinary.
STATE OF GEORGIA.
, }
County.)
Ordinary of said County, lo certify that I am well acquainted with John Whing
he applicant in the foregoing affidavit, and am well satisfied that the statements made
y him in his said affidavit are true, and I know he is the individual he represents himself
o be, and that he resides in this County.
Given under my official signature and seal, this dian
day of
John of Wil Ninsons.
your Beal
Fulton County.
Note.—The blank spaces must be filled. Note.—Affidavit should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

STATE OF GEORGIA,	1	
	COUNTY.	
1,		hereby authorize "
	of	
receive and receipt for the	pension allowed, and re	quest that he remit same to
	at	
y .		/
WITNESS my hand and sea	l, this day of.	1905.
		_ [t., s.]
Executed in the presence	of	[L. 5.]
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POWER OF ATTORNEY.

TATE OF GEORGIA,County	}			
Ι,			hereby	authoriz
receive and receipt for the pensio				
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WITNESS my hand and seal, this		day of		1906.
				[L. S
Executed in the presence of				
		,		

Fulton.

FLOTEN G., SOLDIER'S PENSION 1906.

) date

WARRANT HANDED TO

JOHN W. LINDSEY.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.
Pearsonally appears Jet Ming of Final
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; that he isyears old and
by occupation a, that he enlisted in the military service of the Con-
federate States for of the State of Slongea) during the war between the
States, and served for the term of the fin Company , of 40 th Regiment
of La. Yolk Inf that his physical condition is as follows: Infirmity and poverty
that his property consists of the following items:
The second secon
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of the value ofDollars. 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 Ant approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1905. I have heretofore as a resident of
County been allowed a pension for the year 1904. Sworn to and subscribed before me, this the
day of 1905.
Ordinary.
STATE OF GEORGIA.
J. County
I Ordinary of said County,
do certify that I am well acquainted with the Stand
the applicant in the foregoing affidavit and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this JAN & 1900
day of
· // // // // // // // // // // // // //
Ama County.
bere }
Nora.—The blank spaces must be filled. Nora.—Affidavit should not be attested before January ist, 1906.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

Arthurs and a second a second and a second and a second and a second and a second a
State of Georgia,
Fulton County.
71//
Personally appears following of ulton
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 44 years old and
by occupation a Ledder, that he enlisted in the military service of the Con-
federate States (or of the State of Vice 2 Jica) during the war between the
States, and served for the term of 2 1/2 / in Company , of 1/2 th Regiment
of that his physical condition is as
follows: Infirmately and percenty.
* /
that his property consists of the following items:
of the value of Dollars. I am now earning
by my labor,Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1906. I have heretofore, as a resident of
County, been allowed a pension for the year 1905.
Sworn to and subscribed before me, this the
(day of wall 1906.)
Ordinary.
State of Georgia,
Full pl County.
I. Ordinary of said County,
do certify that I am well acquainted with J. Will
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this JAN 1 1906
day of 1908.
(AMI)
from seal here County.
Norn.—The blank spaces must be filled. Noru.—Affidavit should not be attested before January 1st, 1906.

Leorgen sen person umen now Thatlow (7.) john W. Shing,, is an amendment trais Vilition for Vension in the Enterrogalory No. 7. he ways, that the was in acroice with history, and while the 15th try of / wey 1864, at which ime and on that day the was captured of the Book rat rece, at and in the rattic of Leonoa, in Sa, and from the we was transported, and lonin it at, exclon, ellinsio, on mus; -4, 1864, and from there he was out to it is he skland, in Allinois, 2 counter 4-, 1864, and that he win heed there was prisoner of was mulit after the Mo. e of the war, and that he was revalent then on the 22 nday of May, 1865, at which lime the was required to total an valle of a regione to the united states, before being beleased, and in assumet as his own 9 boomment had surrondered and ceased to exist, he took the oath so that he might obtain his recall from prison.
The organizational as ancholment? The King is sworn to and outservit a before me marking this 27 day of January 1901 John N' Will inson Ardi any

Georgia Barton County 3 me James lo Wofferd of said County, who ofter being Divova in voth says that he was a member of Company " of the 40th Regiment of Georgia Voluntum and Derved in said Company from march 1862, till Jaunon 1865 and that John W. King served in said Company Cluing the line I served in the same as obove stoled, and that The said John W. Sting was a good and faithful Soldier from the line he Levorn to and subscribed ICM ford before me Od: 162 1900 110 Dundrick Ording Barlow Country Georgia 3 O Certify that James 6 wof ford is a man of trustrivity Character, and That he was the above of the don't before Digning the Daine

Barton County Leongia

NAMES King, John W. / YEAR 1901 COUNTY Pulton

WHEN AND WHERE ROKEN? March 17th. 1848 - resident of Ga. since birth

RANK. Private

GORPARY AND REGILENCY Co. I, 40th. Regt. Georgia Vols.

NAME OF CALCADA ACT COLOCUL?

REI BADED. May 22nd. 1865.

WHEN AND MARKE SURREADSAUD?

TALISTED WHEN AND WEEKE? 1868

CAPTURED, WHEN ALL MAKES May 18th. 1864 was captured at the battle of Reseas, Ga. cost to Alton, Ill. May 84th. 1864 from there was sent to Rock Itland, Ill. December 7th. 1864.

From Rock Island . Ill.

TE NOW TRUNCKTO AN PURCHNOLOGY, WHERE WIME YOUR

DIED, WHEN AT SHERET

BURIED.

JWT

X

Davis G. Wylie, Co. D. 40th. Regt. Ga. Vels. WITNESSAS. J.C. sofferd, same command--- de date. . Jut

APPROVED War Dept., The Adju-tant General's Office, Washingten, Apr. 13, 1937. Widow's Application

Respectfully returned to Assistant Director, Veterans Service, 405 State Capitol, Atlanta, Gg. Under Act of 1910-As Amended by Act of 1919, and Constitutional Amendment. The records show that W.F. King, given name also shown as Wilber and Wilbur, privates Ge. G. 12th Regt. Mississippi Infeatry, C.S.A., enlisted Moh. 17, 1862, at Nathez. The company muster roll for Nov. and Dec. 1864, last on file, show him present of 1920.

SHEET WHEN THE REAL PROPERTY.

Captured at Petersburg, Va., Apr. 2, 1865, and imprisoned at Hart's Island, New York Harbor, where he was releas-sd June 15, 1865.

Above is true excerpt from

record on file in this of-

Lilling Confuent

fice.

gtat : D.

before signing the

(SEAL OF ORDINARY)

under my hand

County.

INSTRUCTIONS

STATE OF GEORGIA

Ordinary's Certificate

Ordinary's Certificate

13

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

Widow's

TUITE COUNTY.

, Ordinary of said County, do certify the applicant for pension; that

she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know 1 too who had fire 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 are truth-

ful and trustworthy and their statements are entitled to full faith and credit Given under my hand and official seal of office

(SEAL OF ORDINARY) County.

INSTRUCTIONS

- v. 1. Before any questions are answered the Ordinary shall saver applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God.

 3. Only widows who married prior to January 1st, 1881, are entitled.

 4. All afflavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.

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

- A Attach cerumes copies of marriage fection to obsainable. In our process marriage, by some person, of y general process of the process of th

APPLICATION FOR PENSION BY A WIDOW

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA

BIATE OF GEORGIA,	
Fuctor county	
Personally appears before me, Natt E. Navag of said State and C and hereby applies for the pension allowed by the Act of 1910 as amended by the Act of 191	oun
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 191	9 a
the Constitutional Amendment of 1920, and submits testimony to support the same, and after	bei
duly sworn true answers to make to the questions propounded, answers as follows, to wit:	

- 1. What is your name, and where do you reside? (Give Post Office and County) ate & lung, 30 | southtree are atfunta for
- 2. How long and since when have you been, continuously, a bonn fide resident citizen of the State of Georgia?

······································	
3. When, where and to whom were you married?	Car 21/11/15
adams Co Musa to	1.18 E. I Vener
comment of the comment of the	ouring 1

- a. Have you married since the death of first and soldier husband? TL1)
- 4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia 7-4State the arms and class of Service, and give name of Colonel and Captain.) neither tensifles, of Natalez Miss. 5. When and where did the commands of your husband surrender or discharge from the Services
- 6. Was your husband personally present with his command when it was surrendered or discharged? Celuve he was a set made the let
- 7. If he was not present, state specifically and clearly where he was? When did he leave the Command? Bulling has a
- a. For what cause did he leave? By whose authority did he leave?...
- For how long was his leave of absence granted?
- What was his physical condition when he left his command?
- What effort did he make to return to his Command?
- In what way was he prevented from going back to Command?
- Was he captured by the enemy at any time? at Peterstung Pa.
- If so, when and where? In what prison was he held and when was he released?
- When and where did your first husband die? In 1917, at Yeelsshug Mass
- Were you residing together when he died? (1 4)
- If not, how long have you resided apart?...
- If so, when and for what cause were you or your husband placed on the roll?

never applied Sworn to and subscribed before me, this the

a & Battalon, Ordinary tulton (SEAL OF ORDINARY)

Rati C. Kom Applicant.

	questions for witness as to Service of Husband and Marriage
STAT	E OF GEORGIA,
	t ulton county.
h	no Frank Sea for of said State and County is hereby presented
as a v	vitness in support of the application of the Nata E Line of for the pension
provid	led by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of
	in said State, who, after being sworn true answers to make to the questions propounded, an-
	as follows, to-wit:
	What is your name and where do you reside?
	his Frank Bedford, Victoring m
2.	How long and singe when have you known Rate 9 Reny applicant
	Since 1799
	Where does she now reside, and since when has she been, continuously, a bona fide, resident
citizer	of this State? 30 Prochtice are attack to serve
4.	When and to whom was she married? William Fluss, How do you know?
5.	How long and since when did you know that I then I would her her
husba	nd? with 1794
6.	When and where did
the h	isband of applicant, die?
7.	Were the applicant and her husband living together as husband and wife at the date of his
death	?
death	(
g	If not how long did they live short before his death at 2 2 2 4 4 1 4 2 2 6 4 4 1
	If not, how long did they live apart before his death?
were	they divorced? LLD
	When, where and in what Company and Regiment did.
10.	date and place)
11.	How did you obtain your information of this service?
	this strain your personal knowledge did he perigrin actual military service with this
Comp	any and Regiment? (Give dates.)
	When and where was his Command surrendered or discharged? (Give date and place)
	Were you personally present with this Command when it was surrendered?
	where were you
	West the human of a self-self-self-self-self-self-self-self-
	Was the husband of applicant personally present with his Command at its surrender?
	where was he?
	where and for what cause did he leave his Command? (Give date.)
	ose authority did he leave his Command?
	w long was he granted leave?
	o you know all that you have stated to be true? (If of your own knowledge, state clearly and
specifi	cally)
	For what cause, if you know of your own knowledge, was he prevented from returning to his
	and?
	What effort did he make to return to his Command and how do you know this?
	Was he captured as a prisoner?
In whe	t prison was he held?and when released?
Swo	on to and subscribed before me, this the
8	day of Goul 1927 (Witness)
Ch	1 Borthon, Ordinary
C.	
الم	+ weton County.

Form H. D. 66 80M 2-37

STATE HIGHWAY BOARD OF GEORGIA

INTERDEPARTMENT CORRESPONDENCE

OFFICE

FILE .

FROM

Atlanta, Georgia, April 1 -1937

TO

To Clerk of County Court,

Adams County, Natches, Miss.

Dear Sir:

Kindly send me a Certified copy of Marriage License of Miss. Emma Catherine Miller

to

Mr. Wilbar F. King

Performed by Dr. Stratton, Presbyterian Minister, in the year 1875 , Matches , Mississippiin Ga I desire to file application for pension of

my Mother Mrs. W. F. King, widow of a Confederate
Veteran whom enlisted in the "MATCHEZ FEW IBLES"

Company "G" 12 th, Mississippi; and served four year
in Virginia under General Rebert E. Lee, and Stenewall

Jackson, returning to Matchez in 1864; buried in Vicksburg, Mississippi. 1917. I inclose herewith (one Dollare)

Please send bill for same;
Very truly yours.

W. F. King

50 Peachtres, Ave. N. E.

State Bepartment of Bublic Welfare

HURT BUILDING

ATLANTA



LAMAR MURDAUGH

WHEREAS:

STATE BOARD OF PUBLIC WELFARE

J. HALLMAN BELL, Richland DR. J. S. GOLDEN, Jasper ARTHUR LUCAS, Atlanta

> Mrs. Kate E. King, widow of Wilbur F. King, Fulton County, Georgia,

has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual military service as a Confederate soldier and was honorably separated from such service; and that applicant was married to said soldier prior to the year 1881, and that she has not remarried; it is, therefore,

OR DERED:

That said applicant be admitted to the pension roll of the State of Georgia, for the month of July, 1937, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 19th day of August, 1937.

Director, Confederate Division, State Department of Public Welfare.

6

State of Mississippi, County of Adams.

I, Slifford H. Field, Clerk of the Circuit court of Edams County, Mississippi, and by virtue of said office am custodian of the Earriage Meacrds of said county, do hereby certify that this is a true copy of the record of the Marriage License issued(and the returns thereon) to Er. Wilbur F. King end Miss Emma C. Miller as is shown by Book "I", page 69 of the records of marriage now in my office.

Titness my hand and seel, this the 5th day of April, 1937.

Sircuit Fourt of Adams Sounty, Mississippi

By Luce Ledds D. C.

Harriage License and Certificate

Tilbur F. Ling

ADAMS COUNTY, MISSISSIPPI

GEORGIA

FULTON COUNTY

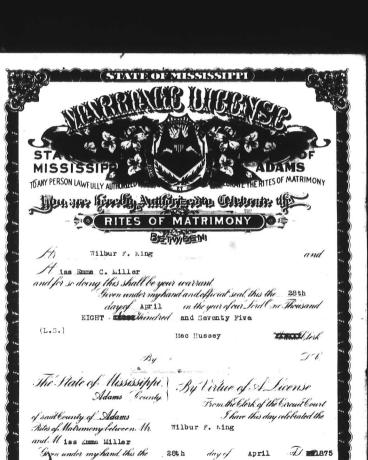
Judge Court of Ordinary of Tulon Count

April 9, 1937.

MR. ASKEW:

Mrs. Henderson has written for the War record of this veteran and will furnish same to you as soon as she receives same. Hrs. King knows nothing of his record other than outlined on the application.

MRS. BATTERTON



Jos. B. Stratton

Minister of the Gospel

Minister of the Gospel

Records on file in Roster Office, State Capitol, show that Heratic L. King enlisted as a private, Co. A, 14th Batty. Ga. Light Artillery Apr. 26, 1862, and surrendered, Greensboro, N. County Fulton Apr. 26, 1865. Name Mrs. Margaret J. King. Caruleises -Widow of Horatio L. Ring. Date of Marriage Nov. 23, Company Regiment 14th Batty. Ga. Lt.
Aptillery.
Approved John W. Clark 18 may 26.

STATE OF GEORGIA self to be, and that she has been, 0

Ordinary of said County, do certify

n, continuously, a bona fide resithe applicant for pension; that

of

Ordinary's

County and were duly dent citizen of said State since January 1st, 1920; that I also know (SEAL OF ORDINARY) Given under my hand and official seal of office who swears to the service of husband; that both of them are ne before signing the foregoing affidavits, and that they are truth are entitled to full faith and cri

re Certifica by gen-

12-26

Commissioner of Pensions.

Capttol, 111e Artillery bratio (Mrs) of Horstio

Ordinary's Certificate

STATE OF GEORGIA,		
Fullow a COUNTY.	-	
Thos H Joffines, Ordi	inary of said County, do certify	
that I know Mis margaret & long	the applicant for pension; that	
she is the person she represents herself to be, and that she has be	en, continuously, a bona fide resi-	
dent citizen of said State since January 1st, 1920; that I also know	Leo E. Jung	
the witness who swears to the service of husband; that both of t	them are now residents of said	
County and were duly sworn by me before signing the foregoing a	ffidavits, and that they are truth-	
ful and trustworthy and their statements are entitled to full faith		
Given under my hand and official seal of office this day	61 July 1926	
(SEAL OF ORDINARY) hus IT	Ordinary.	
of tul	County County	

Instructions:

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

2. Additional articavits may be after the proof of the standard of the contact of the

eral reputation.

6. Fill out the back of the application carefully.

7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is

APPLICATION FOR PENSION BY A WIDOW

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA.

Fulton

COUNTY.

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

- 1. What is your name, and where do you reside? (Give Post Office and County) Mrs. Margaret J. King., 925 Peachtree St., Atlanta, Fulton Co., Ga.
- 2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? About twenty years.
- 3. When, where and to whom were you married? Rov. 23, 1876, Wood County, Texas.
- a. Have you married since the death of first and soldier husband?
- 4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.) Co. A. 14th Battery Ga. Light Artillery. App. 26, 1862 Houston County, Ga. Capt. Jos. Palmer, later colonel.
- 5. When and where did the commands of your husband surrender or discharge from the Service? Greensboro, N. C.
- 6. Was your husband personally present with his command when it was surrendered or discharged?
 - 7. If he was not present, state specifically and clearly where he was?
 - 8. When did he leave the Command? War ended.
- a. For what cause did he leave?
- b. By whose authority did he leave?
- c. For how long was his leave of absence granted? nnnn

- e. What was his physical condition when he left his command? Fairly good.
- War ended .. 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? In what prison was he held and when was he released?
- j. When and where did your first husband die? May 30, 1904. Atlanta, Ga.
- k. Were you residing together when he died?
- 1. 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?
- If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me, this the . Ordinary

(SEAL OF ORDINARY

Questions for Witnéss as to Service of Husband and Marriage $_{\mbox{\scriptsize STATE}}$ OF GEORGIA.

	See & Hurst of said State and County is hereby presented
	as a witness in support of the application of Margaret There 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.
	newers as follows, to-wit:
	1 What is your name and where do you reside?
	Les E King allanda Ja
	12 How long and since when have you known Marsaret & Kinda applicant
	Dive 1877
	1. What is your name and where do you reside? Alo E. Young 2. How long and since when have you known françaist I kning applicant 3. Where does she now reside, and since when hus she been, continuously, a bona fide, resident
	citizen of this State:
	4. When and to whom was she married? Horatio L. Ring How do you know? Walled Mr. 5. How long and since when did you know? Horatio & Mring her
	/
- 2	6. When and where did Horatio L. King
1	the husband of applicant, die? May 30, 1904, Atlanta, Ga.
1	7. Were the applicant and her husband living together as husband and wife at the date of his
-	death? Yes.
	D
	8. If not, how long did they live apart before his death?
	Were they divorced? To Periment did College 116 L. Bling. enlist
	9. When, where and in what Company and Regiment did
	(Give date and place) Apr. 1862, Go. A, 14th Batty. Ga. Lt. Artillery. 10. How did you obtain your information of this service?
	11. How long within your personal knowledge did he perform actual military service with this
	Company and Regiment? (Give dates.)
	12. When and where was his Command surrendered or discharged? (Give date and place)
	Greensboro, N. C. Apr. 26, 1865.
	13. Were you personally present with this Command when it was surrendered?
	If not, where were you hat he army and how came you there?
	14. Was the husband of applicant personally present with his Command at its surrender? You
	If not where was he? and how came him there?
	When, where and for what cause did he leave his Command? (Give date.)
	By whose authority did he leave his Command?
	and how long was he granted leave?
	How do you know all that you have stated to be true? (If of your own knowledge, state clear)
	and specifically). Records on file in Roster Office, State Capitol
	and specifically).
	15. For what cause, if you know of your own knowledge, was he prevented from returning to h
	Command? 16. What effort did he make to return to his Command and how do you know this?
	16. What effort did he make to return to his communication
	17 Was be captured as a prisoner? To lf so, when and where?
	11. Was it captured as a product of the state of the stat
	In what prison was he held?
	Sworn to and subscribed before me, this the
	11 day of May 1926. (Witness)
1	thus Remarket ordinary
L	of Fulton County.
	(CEAN OF ORDINARY)

16. What effort did he make to return to his Command and how do you know this? If so, when and where? 17. Was he captured as a prisoner? and when released? In what prison was he held? Sworn to and subscribed before me, this the 11 day of May , 1926 archus Remarblita ordinary County. (SEAL OF ORDINARY)

Widow's Application

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

Fulton County Name Mrs. Mary A. King Widow of Frank W. King

Date of Marriage Feb. 21, 1884 Date of Husband's Death June 6, 1914

STATE DEPARTMENT OF PUBLIC WELFARE

STATE OF GEORGIA

Ordinary's

Certificate

YINDOO.

THOMAS H. ST INGER !

she represents herself to be,

King

the applicant

and that she has

January 1st, 1920; that I also know

by

entitled to full faith signing the foreg

> they are

(SEAL OF ORDINARY)

you you

mble. If not, prove

which the applicant or

9 10

AUG 19 1937

Under Act of 1910 -As Amended by Act 1919, and Constitutional Amendments of 1920 and 1937. Mrs.Mary

Ordinary's Certificate

STATE OF GEORG	GIA.
----------------	------

COUNTY. Fulton THOMAS H. JEFFRIES . , Ordinary of said County, do certify that I know Mrs.Mary A. King the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know. Arg. Fred S. Davia the witness who swears to the secret stranger and are marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit. 193.7 Given under my hand and seal of office this . . . 4 (SEAL OF ORDINARY) Ordinary. 4 INSTRUCTIONS:

- Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You many swear that you will true answer make to each of the questions asked you and the evidence you shall give will be Additional fidners imany be stached if biank spaces are insufficient. Only widows who married prior to January 1st, 1970, are entitled. All affidavis must be made before the Ordinary of the County in which the applicant or witness resides and must be all affidavis must be made before the Ordinary of the County in which the applicant or witness resides and must be Match and the County of the County in which the applicant or witness resides and must be Match and the County of the County in which the applicant or witness resides and must be Match and the County of the County in which the applicant or or by general reputation. Fill out the back of the application carefully.

 Don't use the bulky form of Marriage Certificate in yougus throughout the State. Y short, simple form is easier to handle. Do not take an application from any widow who is already receiving a persistent.

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,
Tulten
Personally appears before me, MARY. A 5106
SECTION I.
1. What is your name, and where do you reside? (Give Post Office and County)
Ars.Mary. A. King, 188 Waverly Way, Atlanta, Georgia, Fulton County 2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? . for .eightaen yaars Give date, or year, of your birth March 10, 1864. Age? . 73. 3. (1)When, (2)where and (3)to whom were you married?
February 21, 1884, Wilmington, N.C. Frenk W. King
 a. Have you married since the death of first and soldier husband? No. b. When and where did your first husband die? June 5th, 1914, Forrest City, N.C. c. Were you residing together when he died? Yes
d. If not, how long had you resided apart?
e. Are you now a widow? Xon
f. Have you or your husband heretofore been paid a pension by the State? North Carolina
g. If so, when and for what cause were you or your husband placed on the roll?
SECTION II.
Answer the following questions if your husband was not a pensioner:
1. When, where and in what Company and Regiment did your husband enlist as a soldier in
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-
try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops. 1861, Mecklenburg County, Morth Carolina, Company G, 8th Regimen
North Carolina State Troops. Col. Alfred M. Waddell
Infantry
2. When and where did the Commands of your husband surrender or discharge from the Service?
r mercanical and the control of the
3. Was your husband personally present with his Command when it was surrendered or discharged?
4. If he was not present, state specifically and clearly where he was?
5. When did he leave the Command?
a. For what cause did he leave?
b. By whose authority did he leave?
c. For how long was his leave of absence granted? d. In what way?
e. What was his ph/sical condition when he left his Command?good health
f. What effort did he make to return to his Command?
g. In what way was he prevented from going back to his Command?
h. Was he captured by the enemy at any time?XQD
i. If so, when and where? In what prison was he held and when was he released?
Sworn to and subscribed before me, this the
3,2 day of July 193.7 Mary a, King Appleant.
A Tremp C. C. Ordinary Mary a. Ang.
Applicant.
of. Hullow County.



Repartment of the State Auditor Raleigh, N.C. oct. 29, 1929.

TO WHOM IT MAY CONCERN

This is to certify that the Confederate Pension Records in this Department show that on the 17th day of June 1911, Franklin William King applied for a Confederate Pension from the County of Mecklenburg. His application shows that sometime during 1861 he enlisted in Company C... 8th Regiment, North Carolina State Troops. It also shows that he was wounded at Hanover Court House and Malvern Hill. Mr. King's application was accepted and he drew a pension until his death in 1914 when his name was dropped from the list.

Jane Delan

State Auditor.



Department of the State Auditor Raleigh, N.C.

Oct. 29, 1929.

Mrs. Mary King, 189 Elizabeth Street, N. E., Atlanta, Ga.

Dear Mrs. King:-

Replying to your favor of Oct. 23rd I take pleasure in enclosing herewith a Certificate showing that your husband, Franklin William King, drew a Confederate Pension in this State.

I trust that this will be sufficient to enable you to secure a pension in Georgia.

With best wishes, I am

Yours very truly,

Baxter Durham, State Auditor,

STATE OF GEORGIA,

TO WHOM IT MAY CONCERN:

This is to certify that I have known Mrs. Mary A. King for forty-five years, and that she has hever married since the death of her husband, Frank W. King, a deceased Confederate Veteran.

Mrs. Fred & Sarie

Sworn to and subscribed before me, this sand day of July, 1957

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLAITA

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

WHEREAS:

MRS. MARY A. KING, WIDOW OF FRANK W. KING,

has filed in this office an application for the Georgia pension allowed to vidows of Confederate veterans; and it appearing that the late huchand of this applicant performed actual militury service as a Confederate soldier and was honorably sequented from such service; and that applicant was married to said soldier prior to January let, 1930, and that she was not remarried; it is, therefore.

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of January 19 38, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 19 37 .

S. This "Pat" Gillen

Director, Confederate Division State Department of Public Welfare



Repartment of the State Auditor Raleigh, N.C. Oct. 29, 1929.

TO WHOM IT MAY CONCERN

This is to certify that the Confederate Pension Records in this Department show that on the 17th day of June 1911, Frankini William King applied for a Confederate Pension from the County of Mecklenburg. His application shows that sometime during 1861 he enlisted in Company G... 8th Regiment, North Carolina State Troops. It also shows that he was wounded at Hanover Court House and Malvern Hill. Mr. King's application was accepted and he drew a pension until his death in 1914 when his name was dropped from the list.

Joseph Delam

State Auditor.



Department of the State Auditor Raleigh, N.C.

Oct. 29, 1929.

Mrs. Mary King, 189 Elizabeth Street, N. E., Atlanta, Ga.

Dear Mrs. King; -

Replying to your favor of Oct. 23rd I take pleasure in enclosing herewith a Certificate showing that your husband, Franklin William King, drew a Confederate Pension in this State.

I trust that this will be sufficient to enable you to, secure a pension in Georgia.

With best wishes, I am

Yours very truly,

Baxter Durham, State Auditor,

STATE OF GEORGIA, FULTON COUNTY.

TO WHOM IT MAY CONCERN:

This is to certify that I have known Mrs. Mary A. King for forty-five years, and that she has never married since the death of her husband, Frank W. King, a deceased Confederate Veteran.

Mrs. Fred Q Lavis

Sworn to and subscribed before me, this 22nd day of July, 1937

C.C. Ordinary

B/N

Baxter Durham, State Auditor,

MARRIAGE LICENSE

Issued this 18th day of

FEE, \$.3.00

To any Ordained Minister of any Religious Denomina	tion or to any Justice of the Peace for New Hanover County:
Oll r. F. W. King	having applied to me for a license for the
marriage of Mr. Frank W. King	o' Wilmington, NC
aged 36 years, color white	the son of A.J. and Mary Ann King
living in	Wilmington, NC
and Mrs. Mary Bordeaux	of Wilmington, NC
aged 19 1/2 years, color white	
Blossom	
living in	New Hanover County, N.C.,
of North Carolina, entitled "An Act Concerning Marriages, Mthe 12th day of February, 1872, and there being polegal imy You are hereby authorized, within with the County of New Hanover. You are required within two months after you shell have	rdance with Section 6 of an Act of the General Assembly of the State arriage Settlements and the Contracts of Married Women." ratified

January 1884

J.E. Sampson

Register of Deeds for New Hanover County.

Name Frank W. King, white • WHITE PERSONS

Frank W.King

CERTIFICATE

To be filled up and signed by the Minister or Officer celebrating the marriage, and also to be signed by one or more witnesses present at the marriage, who will add to their names their place of residence.

I. W.I. Hull Minister the M.E Church S united in matrimony 3 -

and M rs. Mary Bordeaux

February 1884 1884 , at the house 21st. the parties licensed, on the W.I.Hull Wilmington

according to law. Wm. I.Hull WITNESSES PRESENT:

Wilmington, NC Kate Williams Residence Besidence Name

Residence Name STATE OF NORTH CAROLINA, NEW HANOVER COUNTY.

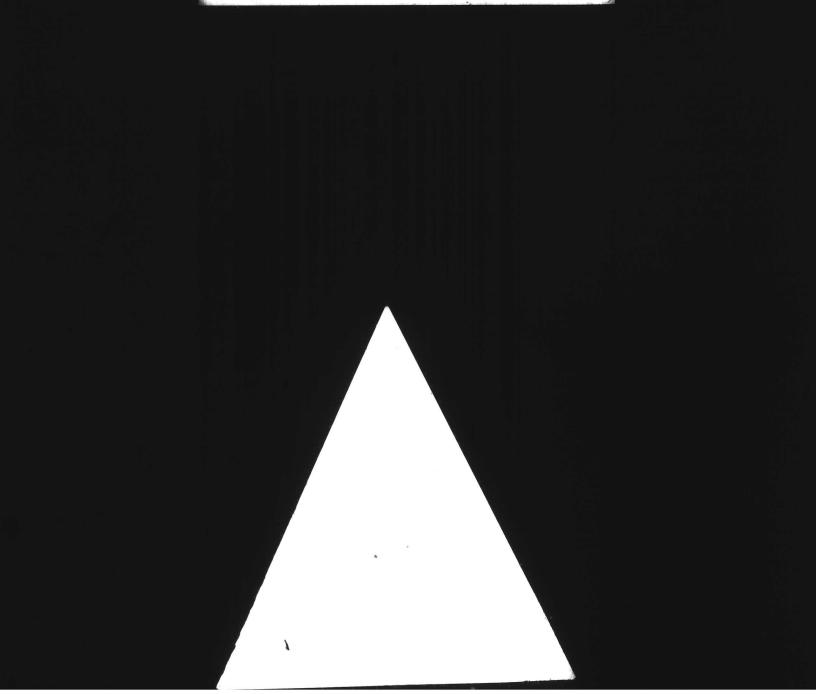
I, WEB. Rhodesm Register of Deeds in and 150 the State and County aforesaid, mdo hereby certify that the foregoing is a true copy of marriage license as issued to Frank W.King, and Mrs. Mary Bordeaux, as per copy on file in this office.

Witness my hand and Official Seal, this the 2 day of July, 1937.

13.

Register of Deeds.

BY <u>Ala me Gulveh</u> Deputy Clerk.



STATE OF GEORGI (SEAL) Sworn under my hand and official seal of office this Widow's Pension the 4th Nov she represents herself to be and she is a Under Act 1910—as Amended by Act of 1919. by Core signing the Name Mary King
Widow of J. King utions are navered the Orientry shall near applicat said be stimus and person that you will now among make to each of the questions shall fill be but risk. So help opt close. I would see the many be statistically blank species are insufficient. But the state of the control of the person to be a made before the Orientry of the residence of the person to be as are entitled to full faith foregoing affidavits and that Regiment 19th 18mm Approved ____ marriage, Ordinary of said County, Aco 10 by some person, you said County of said County J. W. LINDSEY, 3 Commissioner of Pensions. Byrd Printing Co., State Printers, Atlanta.

	Ordinary's Certificate	
	STATE OF GEORGIA,	
	COUNTY.	
	14. 14. 12. 01/11.	said County, do certify
	that I know 1000 100 100 100 100 100 100 100 100 1	icant for pension. She
	and was on the 4th November 1908; that I also been	t effizen of said County
	Alex	nts of said County and
	were duly sworn by the before signing the foregoing affidavits and that they ber	il are truthful, trust-
	worthy, and the statements are entitled to full faith and credit.	1
	Sworn under my hand and official seal of office this J. J. hay of	1919
	(SEAL)	Ordinary,
	Tille	County
	NOTES, 1. Before any questions are answered the Ordinary shall awar applicant and the witness	ers in the following words:
	NOTES: I. Before any questions are answered the Ordinary shall event applicant and the witner applicant and the witner of the ordinary shall give will be the truth. So help you find. 2. Additional affoliation may be attached if blank spaces are insufficient. 3. Unly widows who marred prior to January Jat., 1881, are entitled. 4. The ordinary with the mode before the Oddinary of the residence of the person to start the ordinary shall be of the ordinary shall be of the ordinary.	saked you and the evidence
	 Only widows who married prior to January 1st, 1881, are entitled. All affidavits must be made before the Ordinary of the residence of the person to such Ordinary. 	be sworn and certified by
	 Attach certified copies of marriage license if obtainable. If not, prove marriage, by reputation. 	some person, or by general
	, "	
	1st	
	1818.	si II
	when can be seen to see see see see see see see see see se	J. W. LINDSEY, Commissioner of Pensis State Princip, Albarh
	2 2 2	J. W. LINDSET Inissioner of Pen Penter Atlanta
	P P B	W. Lil. issuioner. Princies.
7	3 0 1 3 8 7 7 3	Commission State
	Widow of A Segment & Segme	\$ w
	Z Pi i C S	Printing
\	W Name Annual Manager Ac Dampany Segment Company Compa	F. 2
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	- 30-	
	· · · · · · · · · · · · · · · · · · ·	on the same
	(many)	
	(Marah Lass san san san san san san san san san	

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

Questions for Applicant

ST	ATF OF GEORGIA,	
	Fulton COUNTY	
	, , , , , , , , , , , , , , , , , , , ,	
	Personally before me comes Mrs. Mary J. King of said State and County,	
	d, after being duly sworn, says that she desires to apply for a pension allowed under the Act	
	1910, as amended by Act of 1919, and submit testimony to make out the same, true answers makes to	
	following questions to-wit:	
	l. What is your name, and where do you reside! Mrs Mary. J. Kirg Ormawood Park 2. How long and since when have you been a sontinuing residint of the State of Georgia!	
-	All my life	
	3. When, where and to whom were you married 1 Qct. 22, 1876. Whitfield Co., Ga.	
	to J. Y. King	
	s. Have you married since the death of first and soldier husband!AQ	
	When, where and in what Company and Regiment did your husband enlist as a soldier in Con-	
fee	erate Army or Georgia Militia (State the arms and class of Service.) May 1, 1861, Jonestoro,	
-	Washington Co., Tenn., Co. "B", 19th Tenn. Inf.	
	i. When and where did the commands of your husband surrender or discharge from the army?	
	North Carolina 1865	
	Was your husband personally present at the time of the surrender or discharge of this command † Yes. Yes.	
	. If he was not present state clearly where he was ! NEYER left ormand until after	
8	3. Where was his command when he left? surrender	
	For what cause did he leave his command ?	
1	b. By whose authority did he leave his command f	
(For how long was he granted leave of absence !	
•	. What was his physical condition when he left his command?	
f	. What effort did he make to return to his command ?	
	In what way was he prevented from going back to Command	
1	. 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?	
	7.3. 37 3000 0 4 3	
3	When and where did your first husband diet. July 15, 1880. Gadaden, Ala, while them	
	Were you residing together when he diedf	
	If not, how long had you resided apart?	
	n. Are you now a widow t	
	Have you or your husband heretofore been paid a pension by the State!	
	so, when and for what cause were you or your husband placed on the roll?	
	Never applied	
	worn to and subscribed before me this the	
	21 day of October 19.19)	
the	lun R Wallut Ordinary	
of	Ful to m. County.	
(SEAL)		

Commence.

STATE OF GEORGIA. COULTY OF WHITFIELD.

Personally before the undersigned authority now comes JOHN TARVER, who upon oath says:

That he knows Mrs. Mary J. King and knew her deceased husband, J. V. King; that he knows of his own personal knowledge that the raid Mrs. Mary J. King and J. V. King lived together continuously for over three years before the death of said J. V. Ving, who died in 1830; that the said Frs. Mary J King has not remarried since the death of her husband and is now his lawful widow.

Sworn to an subscribed before r.e this 23 dayof October, 1919.

749/10000C Ordipary, Whitfield Co., Ga.

in the Confederate Army.	
Sworn to and subscribed before me	Mars Meary 9 Kins
this October 21, 1919.	Mars Mary / Miss
· ·	21

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? Lever applied 21 day of October 19 19 arthur R Marlet Ordinary

j. When and where did your first husband diet. July 15, 1880. Gadaden. Ala. while them k. Were you residing together when he died? XRE I If not, how long had you resided apart Never resided apart m. Are you now a widow t

STATE OF GEORGIA. COUNTY OF FULTON.

Sworn to and subscribed before me this the

of Ful to m

(SEAL)

Personally before the undersigned authority now comes Mrs. Mary J. King, who upon oath says:

That she is the widow of J. V. King, who was a member of Co. "B", 19th Tenn. Inf. under Capt. Zed Willet; that he served for four years as a Confederate sold or from May 1. 1861, to the surrender of his command in North Carolina, April 1865; that she has made every effort to locate some member of his company and regiment and has been unable to do so and now knows of no living member of said company and regimentand is, therefore, unable to make proof of the service of her hust and

C C ORDINARY FULTON CO., GA.

STATE OF GEORGIA.

COUNTY OF WHITFIELD.

Personally before the undersigned authority now comes JOHR. TARVER, who upon oath says:

That he knows Mrs. Mary J. King and knew her deceased husband, J. V. King: that he knows of his own personal knowledge that the said Mrs. Mary J. King and J. V. King lived together continuously for over three years before the death of said J. V. King, who died in 1830; that the said are. Mary J King has not remarried since the death of her husband and is now his lawful widow.

Sworn to an subscribed before r.e this 23 dayof October, 1919.

Ordinary, Whitfield Co., Ga.

STATE OF GEORGIA. COUNTY OF FULTON.

Personally before the undersigned authority now

comes Mrs. Mary J. King, who upon oath says:

That she is the widow of J. V. King, who was a member of Co. "B", 19th Tenn. Inf. under Capt. Zed Willet; that he served for four years as a Confederate soldier from May 1, 1861, to the surrender of his command in North Carolina, April 1865: that she has made every effort to locate some member of his company and regiment and has been unable to do so and now knows of no living member of said company and regimentand is. therefore, unable to make proof of the service of her hustand in the Confederate Army .

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

Chthun R Marbut

Mary Minny James

GEORGIA, Whitfield County:

Co ann Judge, Justice of the Peace or Minister of the Coopel:

You are hereby authorized to join in the HOLY STATE OF MATRIMONY

and Miss Mary J. Parks according to law; and for so doing this shall be your sufficient Li ense.

Given under my official signature this 21st day of October

ORDINARY.

CERTIFICATE TO BE RETURNED TO THE ORDINARY

2 Bereby Certify, That on the

day of October

W. J. Underwood

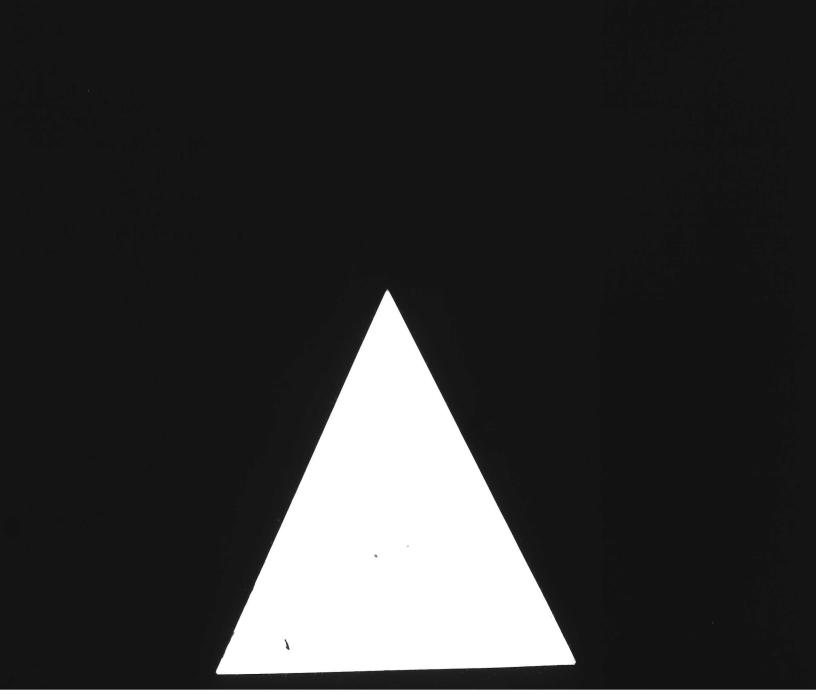
1876

J. V. King Mary J. Parks were by me duly joined in matrimony.

J. A. R. Hanks

M.G.

CERTIFICATE TO BE RETURNED TO THE ORDINARY. I hereby Certify, That on the 22nd day of October 1876 J. V. King and Mary J. Parks were by me duly joined in matrimony. J. A. R. Hanks M.G. No 823 MARSHALL & BRUCE CO. NASHVILLE STATE OF GEORGIA. Whitfield COUNTY. ORDINARY'S OFFICE-ss. H. J. Wood . Ordinary and ex-officio Clerk of the Court of Ordinary of said County, do hereby certify that I have compared the foregoing copy of Marriage license and marriage of J.V. King and Miss Mary J. Parks as recorded book A PAGE 60 with the original record thereof, now remaining in this office, and the same is a correct transcript therefrom, and of the whole of such original record. In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the 18th day of Oot. 1919 Ordinary and ex-officio C C O.



No. 518 Application for Allowance Right arm disables Applicant Reference County Fuelon Date of Warrant fally 9/88 Entered on Richard . -Miley of 1888

STATE OF GEORGIA,	
Fullow	County.

1. M. L. S. Celhard Ordinary of said county, do certify that I am well acquainted with Perhaps 9. King the applicant in the loregoing affector, and aim well satisfied that the statements made by him in his said attidated are true, and I know he is the individual he represents himself to be, and that he resides in the county. I are certify that the foregoing symposis are persons of respectability, and that their statements are accepted of indirection and belief.

Therefore experts any process of attention as exeguitely a constant of the foregoing of the decrease of the attention as exeguitely a constant of the attention of granting of the constant of the attention of th

POWER OF HIORNEY

STATE OF GEORGIA.

County 1

Know all men by these presents, That I

county, it said State, do hereby appoint

me and it my name to receive and secrept for scharever amount of money I may be entitled to from the State of Georgia by reason of the unitary secreted as aforesaid in the auditary service of the Confederate States or of time State, as stated in the torogoing affidavit. Hereby authorizing my said attentity to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of means which may be coming to me by the reason aforesaid.

In witness wher M I have become set my hand and seal, this

L. S.

my true and lawful attorney in facts for

Executed in the presence of us

STATE OF GEORGIA,

Mpson
County S

Personally came John B Brown, Joshua Hameletand J. 6, Milliams

citizens of Mrran

who, being duly sworn, say that they are acquointed with R J King

disease) in the military service, as stated by bins in the foregoing athibavity that said wounds or disease) permanently disables applicant, as stated by bins, that said applicant is should be true.

of this State, and resides in Feellow

ments in his allidavit are trae

Sworn to and subscribed before inc. the 28 - day of Veccenter 188 LS Ning CSC John & Brown, goth the Hambel y 6 Walliams

College, and we are well adopted that all the day

STATE OF GEORGIA.

PERSONALLY comes before me W. L. doarchun "Ordmars of and scares, "Colling and K. G. Living", both known to me as reputable physicians of said County, who, being severally sworn, say on outh that they bear

are fully examined R. f. thing - and after such examination by the the applicant has been injured as follows: Corresplete and his constant of regold it there for it I last of resolution from the last of resolution and the constant of the second of the second

Sworn to and subscribed before me, this, C. C. Lieure 1116 9" day of January, 1881 K. C. Sivine In S.

NOTE. The physician-will state fully the extent of the wound and the disability resulting therefrom

Cidinary's Office, Thomaston, Ba, bue 28- 1887 1 6 Milliams Ordinary of Upson County · Cserng ico do hearty certify that I & King before whom the accompanying afficiants of hy King and & B Brown, Joshna Hambet and 16. Williams was signed is belieft of the Superior Court of Laice County. lsiven under my hand treal of office & Williams Ordinary Moron learnity 2a

Price Nally appears R Ring of Jullon county.

State of Georgia, who, being dub sworn, says on oath that he is a bonn fill citizen and resident of said State, and has been such since the 2/2 day of Oct 1883; that he enlisted in the military service of the Confederate States for of the State of during the war between the States, and served as a Drincati in Company I, of the Regiment of States, and served as a Princati in Company I, of the Regiment of States, and served as a Princati in Company I, of the Whist engaged in such military service, at the battle of 6 he amaging in the State of on the 20 day of light 1863, he was wounded as follows: In The Ulbour of the Dright across bursting The Joint to pluces refundating it uncless to perform Magnitude Labor.

STATE OF GLORGIA,

STATE OF GEORGIA.

Deputing 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 Born to an action of the Sworn to and subscribed before me, this the Born to an action of the disability of the disability.

COMMISSIONED OFFICER'S AFFIDAVIT.

PERSONALLY came before me

State of Georgia, who, being duly sworn, says that he was:

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 (assess) ermanently disease) are the said.

affidavit. Deponent further states that said is a bona fide citizen of this State, and resides in county.

Some to and subscribed before me, this day of 188

foregoing affidavit, changed to suit the facts, should be made by a commissioned officer of the Company or Mathematical of such an officer ignot obtainable, the following affidavy of three responsible citizens should be furnished.

Moff Hollowing

Noff Hollowing

Noff Hollowing

Noff Hollowing

Noff Hollowing

County Heek Holly

County H

STATE OF GEORGIA,

PERSONALLY appears follows: It will of Fillow 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 lay glass with day of OCT 2/57.

1852; that he enlisted in the military service of the Confederate States (or of the State of a) during the war between the States, and in Company II, of the th. Regiment of State of the State

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

Richard I King

he 6 day of February 1889)

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,

PERSONALLY comes before me county. It is and an in the children, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined which chart have carefully examined which chart have and after such examination say that the applicant has been injured as follows: Plant as the following that the applicant has been injured as follows: Plant as the following that the applicant has been injured as follows:

Sworn to and subscribed before me, this day of French 1889 Weal & Refer H. D. M. D. Cannan, W. M. S. Childrey M. D. Cannan, W. M. Childrey M. D. Cannan, W. C. Childrey M. D. Cannan, C. Ca

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

STATE OF GEORGIA, The County of said county of said county of county that I am well acquainted with Rechance J. Dieng, 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 day of Talana 1889. Ordinary Ordinary County.	,
POWER OF ATTORNEY	
STATE OF GEORGIA,	
Countre	
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 ser-	
vice of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby	
authorizing my said attorney to receipt in my name for any Warrant that may be issued by	
the Governor, or for any sum of money which may be coming to me for the reason aforesaid.	
In witness whereof I have hereunto set my hand and seal, this	
day of	1
(L. S.)	
Executed in the presence of us:	-
) ·	

DIRECTION:

County, Georgia.

P.O.

Send money to me as follows, by

NOTES.

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 face
showing the extent of the disability. It 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.
 The law makes no allowance for an arm or leg, unless the arm or leg has been rendered substantially and essentially useless.

dered 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. It 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 ampitfated.

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.

of the applicant. The certificate of any other will not be received in any case.

9r.L. Cochum Ordinary Frella County	
in the same of the	
SOCIAL MANAGEMENT OF THE MANAG	
MPUSITION NO JUST IN THE MENTION NO JUST IN THE MENTION OF THE MEN	

ordinary of said county.

do certify that I am well acquainted with Purkan I was 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.

whom the foregoing affidavits were made and power of attorney was signed, is a

before

of said county, and the said affidavits and

STATE OF GEORGIA, Fullin

I further certify that

STATE OF GEORGIA, Author conniy.
Fullon County.
I, M.L. Callerson Ordinary of said County,
do certify that I am well acquainted with Rehand J. Then 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 6 day of Felouce, 1891.
Ordinary freeling County.
Ordinary freeling County.
,

Application for Allowance

For Applicants Heretofore Allowed Pensions.

Tot Applicants Heretorote Allowed Tensions.
STATE OF GEORGIA.
Hullon County.
PERSONALLY appears Richard Ming of Forein 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 Trick day of
that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a Private in Company A, of the Regiment
of Serma Volunteers Sist 's Brigade; that whilst engaged
in such military service, at the battle of Chicker many on in the State
of Seo on the 20 day of September 1863, he was
wounded as follows: from short wound of cycle altow
rendering It wish arm esselfally care
he hatering the hight when teschally dead
millautally wally
, ,
· · · · · · · · · · · · · · · · · · ·
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 derectofore been allowed a pension of
of Sworn to and subscribed before me, this the
1/1/1/1/1/1/1/1/19
4 day of Felman 1890
m. L le allina
Nork State fully nature of wound or character of disease which causes the disability, at explain particularly the extent of the disability
POWER OF ATTORNEY.
STATE OF GEORGIA
}
County.
KHOW 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.
aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of 189
[L. S.]
Recuted in the presence of us:
4
DIRECTION.
Send money to me as follows, by
to P.O.
County, Georgia.
annyl and

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	1
Hallon County.	
	of King of Fullon
County State of Georgia who being duly	sworn, says or oath that he is a bona fide citizen and
	ein continuously ever since the Burth
	that he enlisted in the military service of the Con-
federate States (or of the State of	in Company A, of 46th Regiment
States, and served as a	in Company of , of 46th Regiment
of Segmen Volunteers	's Brigade: that whilst engaged
in such military service at the battle of	6 Lecha manga in the State
of 2 x +3 on the 2	day of Sept 186% he was
wounded as follows .: That When	ight right allow rendenn
tois rester aren	Whatate and
eruntially un	h -
	and the same of th
***	111 111 11 11 11 11 11 11 11 11 11 11 1
1	
Deponent desires to participate in	the benefits of the Act, approved October 24, 1887,
	es application for the allowance to which he is entitled ave heretofore been allowed a pension of
teft, d	ollars, for 1890
Swarn to and subscribed before me th	is the O
Sworn to and substituted before me, the	is, the Richard Justing
- uay m	1091.)
orthe outhor	. Crelinas
Nors - State fully nature of wound or character of	disease which causes the disability, and explain particularly the extent of
an unantification of the control of	
POWER (OF ATTORNEY.
STATE OF GEORGIA,	
	5
County.	
Know all Men by these Prese	
of	County, State of Georgia, do hereby appoint
The state of the s	11 (1
of	my true and lawful attorney in fact, for
to from the State of Georgia by reason of	t for whatever amount of money I may be entitled the injury received as aforesaid in the military service), as stated in the foregoing affidavit; hereby authoriz-
of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authoriz-
nor, or for any sum of money which may	e for any Warrant that may be issued by the Gover-
	have hereunto set my hand and seal, this
day of	1891.
	[L. S.]
Executed in the presence of us:	1
Dicease in the present of	
DE:	rection.
Send money to me as follows, by	n 0
Acceptance with the second control of the se	toP. O.
CANCEL SECTIONS STATE OF THE SECTION OF THE ASSESSMENT ASSESSMENT	County, Georgia.

said atfic	it in the foreg davit are true al he repesen een under my	, and that ts himself t	he is disable be, and tha	d, to the at he resident he resident	extent les in thi	he claims is county. day of u	and I	know he		
To of	DIERS PENSION.	FOR THE YEAR EXPLINE OF TORRE SCIPOL	Kick of Recig	Disability De. Mine	Amount \$ 6 C	Entered on record	W. H. HARRISON. Secretary of Receive Department	Sphle earl	bec W. Harrisco, Rate Penter, Atlants, Ga	

POW	ER OF	ATTO	RNE	Υ.			
STATE OF GEORGI	Α,)						
Co	unty.						
Know all Men by these	Presents, T	hat I					
of				0		by app	point
of me and in my name, to receive a from the State of Georgia by rea the Confederate States (or of this my said attorney to receipt in my for any sum of money which may	nd receipt for v son of the injur State), as state name for any	my whatever amo y received as ed in the fore Warrant tha	true and ount of me a foresaid going aff t may be	lawful at oney I n l in the idavit; h ssued by	torney nay be military ereby	y servi	ce of
IN WITNESS WHER					and	seal,	this
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т знуть я						1	i. s]
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Send money to me as follow	ws, by L						
	to		100 100 100 100			1	. O.
* · · · · · · · · · · · · · · · · · · ·	. County, (Georgia.					

Application for Allowance

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For Applicants Heretofore Allowed Pendons.

the second secon
For Applicants Heretofore Allowed Pensions.
PERSONALLY appears
on oath that he is a bona fide citizen and resident of Georgia, and has been such continuously since the
in the military service of the Confederate States (or of the State of during the war between the States, and served as a fine Company of the Regiment of States, and served as a Volunteers Brigade: that whilst engaged in such military service at the battle of States, and served as a fine Company of the Co
in the State of day of
ay whit ithere is a purine was Date
Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowater to which he is entitled for the year ending October 26, 1892. Thave heretofore been allowed a pension of
Sworn to and subscribed before me this the Research of the Sworn to and subscribed before me this the Research of the Swarp of the Swar
or: L. to och son grimary.
Nors.—State rally nature of wound or character of disease, which causes the disability, and concern protocology, the effect of the disability.
POWER OF ATTORNEY.
County.
Know al! Men by these Presents, That I.
of
County, in said State, do hereby appoint
of 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 atoresaid in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said attoriety to receipe 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.
LV WITNESS WHEREOF, I have hereunto set my hand and seal this day of
[i 9.]
Executed in the presence of us:
j
DIRECTION.
Send money to me as follows, by to P. O.
_County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, (
Fullow County.
PERSONALLY appears Richard King of Julian County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
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 21th 1832; that he enlisted in the military service of the Con-
federate States (or of the State of 960 1950) during the war between the
States, and served as a Private in Company 12, of 16 th Regiment
of Thoughts Volunteers 's Brigade that whilet engaged in
such military service at the battle of Chicken and in the State
of Jennessee on the 20' day of September 1862, he was
wounded as follows: Shot through the right ellow by a
umnie talli
Annual contract of the contrac
Deponent desires to pratitionate in the benefits of the Act approved October and 1999
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, 1803. I have heretofore been allowed a pension of
Sworn to and subscribed before me, this, the Ruchasse This King
150 My / Richard Ling
day of Mouseh 1893.) Thurk
mit le alpma Orlinery.
Nota-State fully nature of wound or character of disease which causes the disability, and esplain particularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA,)
Fallon County.
N G L LED
Ordinary of said County,
do certify that I am well acquainted with Richard Ming the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his
said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the in-
dividual he represents himself to be, and that he resides in this County.
I further certify that
before whom the foregoing affidavits were made and power of attorney was signed, is a
of said County, and the said affidavits and
signitures thereto are genuine.
M
Wit walking.
Ordinary Fulling County.
be her to Vincine,

POWER OF ATTORNEY.

Know all Men by these Presents. That I, of County, State of Georgia, do hereby appoint— of mand 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 Attornes to receipt in my name for any Warrant had 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. DIRECTIONS. Send money to me as follows, by to County, Georgia. DIRECTIONS. Send money to me as follows, by to County, Georgia.	County, State of Georgia, de hereby appoint— of					. }	EORGIA.	ATE OF	STA
County, State of Georgia, do hereby appoint— of	County, State of Georgia, de hereby appoint. of 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 receive 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. A BORDONS. Said money to me as follows, by DIRECTIONS. Said money to me as follows, by To Gounty, Georgia. DIRECTIONS. Said money to me as follows, by	-							ν.
County, State of Georgia, do hereby appoint of the County State of Georgia, do hereby appoint of 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 Attornox 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. DIRECTIONS. Suid money to me as follows, by County, Georgia. DIRECTIONS. Suid money to me as follows, by County, Georgia.	County, State of Georgia, do hereby appeint. of 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 afore-said 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 afore-said. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of DIRECTIONS. Send money to me as follows, by County, Georgia. DIRECTIONS. Send money to me as follows, by County, Georgia.					Inat I,	ese Presents,	now all Men	Ki
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 Attornes 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 DIRECTIONS. Send money to me as follows, by To County, Georgia. DIRECTIONS. Send money to me as follows, by To County, Georgia.	my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia 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 DIRECTIONS. Send money to me as follows, by To County, Georgia. DIRECTIONS. Send money to me as follows, by				01	.int	do haraby	State of t	Control
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 affidiant; 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. DIRECTIONS. Send money to me as follows, by County, Georgia. DIRECTIONS. Send money to me as follows, by County, Georgia.	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 afore-said in the military service of the Confederate States (or of this State), as stated in the foregoing affidavit; hereby authorizing my said Attornes 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 afore-said. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this. DIRECTIONS. Said money to me as follows, by County, Georgia.	attorney in fact for	my true and lawful at			unt-	, no nereny app	y, state of G	
Executed in the presence of us DIRECTIONS. Send money to me as follows, by County, Georgia, To County, Georgia, Send money to me as follows, by To County, Georgia, To Cou	IN WITNESS WHEREOF, I have hereunto set my hand and seal, this day of 1894. Executed in the presence of us DIRECTIONS. Send money to me as follows, by County, Georgia. DIRECTIONS. Send money to me as follows, by County, Georgia.	entitled to from the of the Confederate ng my said Attor-	t of money I may be e t the military service o it; hereby authorizing	said in affidav	s afore going ny be i	received as the foreg ant that ma	on of an injury), 'as' stated in he for any Warra	of Georgia b (or of this receipt in m	me and State of States ney to
Free flows Already Enrolled.) IN.	For those Already Enrolled.) I SEP A. Richard J.King Richard J.King Richard J.King Richard J.King Richard J.King W. H. HARRISON. Northern Executive Importment. Wagnay and Division in the Country Co	1	d and seal, this.	y hand					
Free Those Aired of Encolled.) Richard J.King Richard J.King Richard J.King W. H. HARRISON. WARRANT RANDELTO WARRA	For those Already Enrolled.) ISB T. Moss Already Enrolled.) Richard J.King Richard J.King Patton WARRANT AND DISTON WARRANT AND DISTON WARRANT TAND D					1894			day of
For Those Aiready Enrolled. No.	High Stable arm one received a stable of a second of a	[1., s.]							
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POWE	R OF ATTORNEY.	
STATE OF GEORGIA,)	
County	, }	
Know all Men by these P		
	of	
County, State of Georgia, do hereby app	point	
of	_my true and lawful atto	erney in fact, for
State of Georgia by reason of an injury States (or of this State) as stated in the f in my name for any Warrrant that may be coming to me for the reason aforesaid.	eipt for whatever amount of money I may be entit received as aforesaid in the military service of foregoing affidavit; hereby authorizing my said At be issued by the Governor, or for any sum of m l. ave hereunto set my hand and seal, this	the Confederate torney to receipt
day of	1895.	
Executed in presence of us)	[1 K.]
Send money to me as follows, by	DIRECTIONS.	-
	to_	P. O.
	County, Georgia.	
ER'S PENSION.	Tulton 1.301e i 202 3 # 1895. WARD JOHNSON, Nordany Executive Department.	HERNY MANDED TO

For Applicants Heretofore Allowed Pensions.

STATE	OF	GEORGIA,	
Sulton		County.	

PERSONALLY appears Richard J.King F117 + 07 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 32 that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a in Company A , of 46th Regiment of Gan - ; i = 's Brigade; that whilst engaged in such military service at the battle of Chankanauga of Tannassaa on the 20th September 186 ? he was day of wounded as follows: Shot throught the right elbow he a minnie ball

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 Pifty dollars, for the year 189-3

Sworn to and subscribed before me, this, the Richard Mail Change of Harch 1894.

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

STATE OF GEORGIA, Pult on County.

day of March

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

Given under my official signature and seal, this

Affix (your | seal | here.

1894.

m. L. lo achown

Ordinary Fulton

12th

For Applicants Heretofore Allowed Pensions.

Fulton

STATE OF GEORGIA,

Fulton County. S

Dersonally appears Richard J. King

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 birth 18 32; 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 orivata in Company A , of 4th Regiment ?=orgi: Volunteers. 's Brigade; that whilst engaged in "nicken use such military service at the battle of in the State on the 20th day of 186 he was wounded as follows: Shot through the right elpon ov a marnie ball

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26th, 1895. I have heretofore been allowed a pension of Fifty dollars, for the year 180 ½

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

M.L. Louch un Oblinian

Norse-State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent

STATE OF GEORGIA.

Fulton County.

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

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



W.L. Calhour

Ordinary___Fulton

County.

POWER OF A	ATTORNEY.	POWER OF ATTORNEY.			
STATE OF GEORGIA.		STATE OF GEORGIA,			
County.		Co	unty. Ĵ		
Ihe	reby authorize	I,	hereby authorize		
of.			of		
to receive and receipt for the pension paid	hereon and request that he remit same to	to receive and receipt for the	pension paid hereon and request that he rem		
	b y_	9	by		
at .		at			
IN WITNESS WHEREOF, I have here	unto set my hand and seal, this	IN WITNESS WHERE	OF, I have hereunto set my hand and seal, this		
day of1896	3.	day of	1897.		
	[L. S.]				
Executed in presence of us		Executed in presence	e of		
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Feel Char. Controlled. No. 28 H LDIER'S PENSION 1896.			. X :		
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	S. C. WARB				
	lity nut, the nut, th	For Those Aires No. C INVA INVA ILDIER'S			
S0I	Disability Amount,	₹ S	Name A County Disabili		
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he remit same to

[L. S.]

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA,

Richard J. King of of

Country, 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

County.

pulton

personally appears

day of		sted in the military ser	vice of the Con-
federate States (or of the State	e of Georgia		war between the
States, and served as a	private	in Company A, of	th Regiment
of leorgia Volunte	eers.	_'s Brigade; tha	t whilst engaged
in such military service in th		, on the	
of Pectamber 186°. That through the right	, he was wounded, in	jured or diseased as fo	llows:
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4			
Deponent desires to part	icipate in the benefits	of the Act, approved O	ctober 24th, 1887,
and the acts amendatory ther			
entitled for the year ending	g October 26th, 189	6. I have heretofore	as a resident of
	ty been allowed a pens		ty
dollars, for the year 189 .	ty been unoned a pen-		/
Sworn to and subscribed	before me this the	10 0 2	40 D-
		Quaherre	et. Ku
26 day of Febr			
NOTE-State fully the nature of wound of the disability, resulting from the wound	viva, Ord	7-	
Norz-State fully the nature of woun-	d or character of disease which	cause the disability, and explain	particularly the extent
of the disability, resulting from the wound	or disease.		
	DOIA \		
STATE OF GEO	RGIA, Į		
rulton	County.		
y.I.calhoun		0.41	- C!1 C
*)		Richard J.King	y of said County,
do certify that I am well acqua	ainted with		the
applicant in the foregoing aff			
in his said affidavit are true,		individual he represe	ents himself to be
and that he resides in this Co			267
Given	under my official sign		-0
day of_	4 600	1896.	
[~~]	0 .0		
Affix your peni	m.L.	bouch	· ceri
here.			
	Ordinary	Fulton	County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Sulton County.
personally appears lichard Ming of Rultin
County, State of Georgia, who being duty 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 Con-
federate States (or of the State of Berifica) during the war between the
States, and served as a Accorated in Company A, of 46 th Regiment
of Seryen Volunteers, 's Brigade; that whilst engaged
of Siryan Volunteers, 's Brigade; that whilst engaged in such military service in the State of Siryan on the 20 and day
of 186 , he was wounded, injured or diseased as follows:
Shot through the right albor-
a multillee water,
· ·
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 epding October 26th, 1897. I have heretofore under said law as a
resident of Tactore county been allowed an invalid pension of
Dollars, for the year 189
Sworn to and subscribed before me, this, the
day of/ 1897. POST OFFICE
7:25:4- 24
Note-State fully the nature of wound or character of disease which causes the disability, and explain particularly the extent
of the disability, re-unting from the wound or disease.
STATE OF GEORGIA,
Lutton County.
1, It / Hulse Ordinary of said County
do certify that I am well acquainted with Richard William the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 1897.
· ·

County.

LOWEI	OF ALTORNEY	•
STATE OF GEORGIA;	l	
County.	}	
I,.	hereby authorize	
	of	
to receive and receipt for the pens	ion paid hereon and request	that he remit same to
	by.	
at.		
IN WITNESS WHEREOF,	I have hereunto set my hand as	nd seal, this
day of	1898.	/
		[L. S.]
Executed in presence of)	
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	1598	TO THE STATE OF TH
For Those Already Enrolled, No. 72 72 + INVALID LIDIER'S PENSIC 1898.	4113	OHNSON, Commissions of Prason Appen To
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NOT ALL IN ALL IR'S PE	33	Common State And Common State And Common State And Common State Common
A S S W	14 5 14.	RD WANT
No. S.	W. 0	RICHARD JOHNSON Commission of WARRANT BASIED TO WARRANT T
	it,	WAR
- 10	Name County Disability Amount, \$	
	Z Ž Ā Ā	h [1]

POWER OF ATTORNEY.

STATE OF		
	County.	
1,.	hereby authorize	
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to receive and	receipt for the pension paid hereon and request that	he remit same to
	by_	
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IN WITN	RESS WHEREOF, I have hereunto set my hand and sea	l, this
day of	1890,	
		[L. S.]
Execu	ited in presence of	
	The state of the s	

SOLDIER'S PENSION. (For Those Aiready Enrolled.) Thing Richard INVALID 1899. No. 1861 Name R.C. County

RICHARD JOHNSON,

~ Q_С \$, типош V

Disability

WARRANT HANDED TO

10

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, Dersonally appears willed, Thing of Fulkon 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 32; that he enlisted in the military service of the Con-· Georgia) during the war between the federate States (or of the State of States, and served as a Private in Company of 16th Regiment , 's Brigade; that whilst engaged of Veryea Volunteers, in such military service in the State of Learque , on the 20th day he was wounded, injured or diseased as follows: 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 county been allowed an invalid pension of Sworn to and subscribed before me, this, the

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulkon County.
Dersonally appears Hieled &. Thing of Tuckon
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of18 24, that he enlisted in the military service of the Con-
day of
in Company ab., of Ach Regiment in Company ab., of Ach Regiment of Letter Volunteers, in such military service in the State of Letter Company ab., on the Act day
of Volunteers, 's Brigade; that whilst engaged
in such military service in the State of day of Aug. 186 , he was wounded, injured or diseased as follows:
of Mark to the was wounded, injured or diseased as follows:
Shot through night show by
minic ball
Deponent makes application for the pension to which he is entitled for the year end-
ing October 26th, 1899. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Dollars, for the year 189 8
Sworn to and subscribed before me, this, the day of 1899. Post OFFICE
day of 1899. POST OFFICE
man
Nove State fully the nature of wound or character of disease which causes the disability, and earlein martinularly the
Nove-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 sround or disease.
STATE OF GEORGIA,
Fulkon County.
I. T. It. Valory Ordinary of said County,
I. Ordinary of said County, do certify that I am well acquainted with Richard him of the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this

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	day of				_1900,						[L. S.]	
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10	CODE SECTION :	3	A	S	Ō	63		m	JOHN W. LINDSEY	FARRANT HANDED TO	Ji.	K
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							and County		7		21007	,
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POWER OF ATTORNEY

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

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

__hereby authorize_

County.

STATE OF GEORGIA,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

STATE OF GEORGIA,

	IECO WHENEOU	bý		
	TODANATW SCAL	, I have hereunto s	et my hand and se	eal this
STATE OF	eronder.	+		
Execu	ted in presence of			
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For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
Telkow County.	
personally appearbiched & Many of Julton	
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 32 that he enlisted in the military service of the Confederate States (or of the State of George) during the war be-	
Regiment of Volunteers, 's Brigade; that whilst engaged in such military service in the State of Go, on the	
day of Le A . 186 , he was wounded, injured or diseased as follows:	
day of the was wounded, injured or diseased as follows:	
Shat the Wilkeller	
by nime bell	
mune velle	
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4	
Deponent makes application for the pension to which he is entitled for the year	
ending October 26th, 1900. I have heretofore under said law as a resident of	
County been allowed an invalid pension of	
Dollars, for the year 189 9.	
Sworn to and subscribed before me, this, the Dahan & Thin	5
day of march 1900. POST OFFICE	^
/ mm-	
· o 8 10 mily	
NOTE Ninte 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,	
Falkon County	
7 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	
I, Mr. Jd. Halvay Ordinary of said County, do certify that I am well acquainted with Richards . The the	
do certify that I am well acquainted with Richar Lie The the	
applicant in the foregoing affidavit, and am well satisfied that the statements made by him	
in his said affidavit are true, and I know he is the individual he represents himself to be	
and that he resides in this County.	
Given under my official signature and seal, this	
day of 2000,	
your () seel (
" Ithrough	
Ordinary County.	

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Zultan County.
Personally appears Rellard / Ning of Julton
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 of1837; that he enlisted in the military service of the Con-
federate States (or of the Space of) during the war between the
States, and served as a Chrunt in Company a, of 46th Regiment
of Yw Volunteers, 's Brigade; that whilst engaged
in such military service in the State of La , on the 20 day
of, he was wounded, injured or diseased as follows:
That through right elbow
h mit had
vy mund vall
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No. of the state o
Sworn to and subscribed before me, this the successful form of the year 1900. Sworn to and subscribed before me, this the successful form of the year 1901. Postoffice Standard of the yound or character of disease which causes the disability, and explain participation.
ularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA, County. Johnstill Milliam Ordinary of said County, do certify that I am well acquinted with Milliam fluxy the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
n his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of January 1900 Wilkins or
ordinary Zulm County.
TOWN OF OIL PROPERTY

POWER OF ATTORNEY.

STATI	E OF (GEORGIA,	j				
		C	ounty.	**.M /			
I,				_hereby	authorize		
				of			
to recei	ve and	receipt for the	pension paid	hereon au	d request t	hat he re	emit same to
				by.			
at			(m) (f (k)) (m) (m)				
	WITNI	ESS WHEREC		eunto set n	ıy hand and	seal this	1
day of		-	1902.				
							[L. S.]
Exe	cuted 11	presence of					
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POWER OF ATTORNEY.

STATE OF			}				
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to receive and	receipt for the	e pensi	on paid he	ereon and	request th	at he res	nit same
			_by				
at			leader when				
IN WITN	ESS WHERE	OF, I	have hereu	nto set my	hand and	seal this	
day of_	_	1903					
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Executed	in presence of						. [2.
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FOR THOSE ALREADY ENROL	9 3	*	of	1 3		LINDSEY	HANDED TO
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No.			2	2	3	јони w.	WAR.
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FATE OF GEOR**GIA.** \$\int \text{\text{Counity}}

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. County.
Perlan
Personally appears of Ling of Little.
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of18,32, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a friendle in Company a, of 46 th Regiment
of Younteers, 's Brigade; that whilst/engaged in such military service in the State of You , on the 20 day
of Stht 186_, he was wounded, injured or diseased as follows:
Shot through right albow
and the same of th
and the same of th
party and a party
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
Rulton. County, been allowed an invalid pension of
Dollars, for the year 1901.
Sworn to and subscribed before me, this the
day of Della Manney
Norse-State fully the nature of the wound or character of disease which causes the disability, and explain participately the actual of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Fulton County. John Alle Kinson
I, Odinary of said County,
do certify that I am well acquainted with / Ky King
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 10N 13 1909 1902.
OP DIVING POLLS
County.
Norn.—Fill all blanks and of Company and Regiment. Norn.—All vouchars and affidavite must bear date after January 1, 1902.
CONFRONT LUCAMEN

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.)
Personally appears RIKing 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 1832; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a frivate in Company Q, of 46 th Regiment
of Lea Volunteers, 's Brigade; that whilst engaged
in such military service in the State of 14a, on the 20 day
of Select 186 he was wounded, injured or diseased as follows:
Shot through right allow
The state of the s
processing the state of the sta
The state of the s
An experimental manager or consequent as in office
Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1903. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Donars, for the year 1809.
Sworn to and subscribed before me, this the
day of 1903. Post office
Join 1. Welkenson
Norn.—State (ully the nature of the wound or character of disease which causes the disability, and explain
•
STATE OF GEORGIA, (
County.
I, J. Ordinary of said County,
do certify that I am well acquainted with Af String
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this
/ 1009
day of Jim M. Wil Kinson
Amx your garl Gdinary County.
Norz.—Fill all blanks and of Company and Regiment. Norz.—All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY.

	the second district district of the second second	POWE
STATE OF GEORGIA	COUNTY. bergby authorise	STATE OF GEORGIA,
	of	
to receive and receipt for	the pension paid hereon, and request that he remit same to	to receive and receipt for the pe
at		
	, I have hereunto set my hand and seal, this	at.
day of	_1904.	In Witness Whereof, I hav
uay oi	_[L. S ^t]	· ·
Executed in presence		day of
100		Executed in the presence
(FOR THOSE ALREADY ENROLLED.) No. O' DISABLED SALINIRR'S PRINGIN		Thing, Aicher & County Cacher & County Cacher & County County County County County No. 180 No. 1905.

POWER OF ATTORNEY

РО	WER OF ATTORN	EY.
STATE OF GEORGIA.	COUNTY.	
I,	*	hereby authorize
	of.	
to receive and receipt for	the pension paid hereon, and re-	quest that he remit same to
www.	by.	
at.		
IN WITNESS WHEREOF	, I have hereunto set my hand a	nd seal, this.
day of	1905.	
	*	_[L. S.]
Executed in the pr	resence of	_
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Name Methaled & Milly County Fulto Co. Of Regiment of the La. Dissibility Myth Orm than the whole Amount, 55% of

12c 1905.

WARRANT HANDED TO

JOHN W. LINDSEY,

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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.
Personally appears & Sing 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 32; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a Chivale in Company a, of 46th Regiment
of 124 Volunteers 's Brigade; that whilst engaged
in such military service in the State of Ma , on the 20 day
of Sleft 186, he was wounded, injured or diseased as follows:
Site throught nght allow
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■ * and a second of a second of
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
Fulton. County, been allowed an invalid pension of
Dollars, for the year 1903.
Sworn to and subscribed before me, this the
day of while of 1944 _ 1904. Thank
John AWIRiuson Post-office
Your 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,
Fultoncounty.
I, John R. Wilkinson. J Gordinary of said County,
do certify that I am well acquainted with I have
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County. Given under my official signature and seal, this JAN 21 1904
day of
(Aug.) (County) (County)
Note.—Fill all blanks and of Company and Regiment.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA.

,
rulton. county.
Personally appears Richard J. Ming of Fulton
County, State of Georgia, who, being duly sworn, says on bath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the 2/
day of Oclober 1832 That he enlisted in the military service of the Con-
federate States (or of the State of Slangua) during the war between the
States, and served as a private Lin Company Co, of 46 th Regiment
of La. Volunteers Encyt 's Brigade; that whilst engaged
in such military service in the State of Slaven , on the 20 day
of
Right arm disabled Chickamange
Medicine (C. t
was a
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 o
County, been allowed an invalid pension o
Dollars, for the year 1904.
Sworn to and subscribed before me, this the
day of Jr & 1905.
Post-office Mante Z Mallar
Nore.—State fully the nature of the wound or character of disease which causes the disability, and explanationarily 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 little and f. Stine
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himsel
to be, and that he resides in this County.
Given under my official signature and seal, this Jr 2 1905
day of1905.
(and)
beel Drdinary County.
County.

Nors. - Hill all blanks and of Company and Regiment.
Nors. - All vouchers and affidavits must bear date after January 1, 1905.

POWER OF ATTORNEY.

STATE OF GEORGIA,	}	Hr
I		hereby authorize
	of	
to receive and receipt for the p		equest that he remit same to
at		
In Witness Whereof, I	have hereunto set my hand	and seal, this
day of1906		/
		[L. S.]
Executed in the presence	51	
	V	
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	1 19 . 3	. 1908
S. OLLE	1.1 E 1. K	78 Fee
FOR THOSE ALREADY ENROLLED No. DISABLED HDIER'S PENSI 1906.	If of the state of	JOHN W. LINDSEY. Commissioner of Previous WARRANT HANDED TO
ISABLE	Fult Fult	Community HAX
OSE ALFEAN No. of DISABI	B 2 WILL	RANT
THOSE NO.	and Sitalis	WAI
103	Name/// County Co. Co.	'annomic and a second s
200	Name Count Co. Disab	

POWER OF ATTORNEY.

Ι,_			UNTY.		, be	ereby author
		The state of the s	_of			
receive at	nd receipt fo					e remit same
In With	ess Where	F, I have he	reunto set my	hand and	seal, this	
ay of		1907.				
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Ex	tecuted in pro	esence of				
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80		-	County Co.	Disability Amount,		
	TN WITH YOU STANDARD ENGINED	IN WITNESS WHEREOUT OF Executed in pro	IN WITNESS WHEREOF, I have he may of 1907. Executed in presence of	receive and receipt for the pension paid hereon by	receive and receipt for the pension paid hereon, and required by IN WITNESS WHEREOF, I have hereunto set my hand and say of 1907. Executed in presence of	receive and receipt for the pension paid hereon, and request that be by IN WITNESS WHEREOF, I have hereunto set my hand and seal, this my of

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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Wulton. County.
Personally appears Riched J. Ling of Pulton.
County, State of Georgia, who, being drily 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
federate States, (or of the State of State of Jean) during the war between the
States, and served as ain Company, of 46 th Regiment
of Volunteers / 's Brigade; that whilst engaged
in such military service in the State of Sale on the Loday
of Alekki 1862, he was wounded, injured or diseased as follows:
of the way wounded, tajured or diseased as follows.
light Cirm disabled, Chichamanga,
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The second secon
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
4.4. County, been allowed an invalid pension of
Dollars, for the year 1905.
Sworn to and subscribed before me, this the
Day of 1906.
O Post Office / Itauta
Just of Market 1
byzState fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
State of Georgia,
Fulton. County.
I Jordinaty of said County
do certify that I am well acquainted with which for sliving
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this JAN 1 1906
Given under my one and signature of the state of the stat
day of
Ami Posta -
eal Ordinary County.
Norn.—Fill all blanks and of Company and Regiment.

FOR	APPLICANTS	HERETOFORE	ALLOWED	PENSIONS
			Ward Company	

State of Georgia,	
Fulton Sounds	
Personally appears lelling of Ming of	, .
County, State of Georgia, who, being duly aworn, says on with that he is a bona	fide citizen
and resident of said State, and has resided therein continuously ever since the	
day of 2/ Celode 1832; that he enlisted in the military service o	
federate States (or of the State of State) during the war be	
States, and served as a in Company \(\mathcal{O} \), of \(\frac{4}{6} \) th	
of Volunteers 's Brigade; that while	st engaged
in such military service in the State of, on the	day
of LC/OF1863 , he was wounded, injured or diseased	s follows:
Right and disubled, Chickan	ianal
Jan water and a garage	1
Annual Control of the Annual Control of the Control	
Sword to and subscribed before me, this the day of 1907. John R. Willinson. County, been allowed an invalid Dollars, for the year 1906. Recther of K. W. John R. Willinson.	pension of
Nors.—State fully the nature of the wound or character of disease which causes the disability particularly the extent of the disability resulting from the wound or disease.	y, and explain
State of Georgia,	
FultonCounty.	
1, July the Williamson De fordinary of se	
do certify that I am well acquainted with Molly for Mills	9
the applicant in the foregoing affidavit, and am well satisfied that the statem	
by him in his said affidavit are true, and I know he is the individual he represe	nts himself
to be, and that he resides in this County.	
Orten tilder my omeiar signature and sear tills	
day of1907.	
Ordinary Fillton	_County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1st, 1937.

No. 99.
STATE OF GEORGIA, EXECUTIVE DEPARTMENT & MINITA, GA HOSTY 6 1889. Mr. Richard J. Ring of the County 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 Night am Deiables He is satisfied to receive the sum of Stiffy you 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 peccipt on this yougher, and return same to Executive Department for warrant GOVERNOR. Dollars, 1889

Mr. Rich of Sking 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 east arm airabled He is entitled to receive the sum of for such disability, the same being se allowance due for the year ending October 24, 18/6 to Executive Department for warrante of GEOR By the Governor,

Allanta, Ba., Freby 4 1090

The Treasurer will pay the same and of the receipt on this voucher, and return same

100 de : 11.

STATE OF GEORGIA. EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN.

King, Richard J.

1891.

COMPTROLLER SENERAL

Audited

Maimed Soldiers.

Voucher No. 136

Paid to Kich fling

They 6

Included in warrant No.

issued to Treasurer.

1891.

WARRANT CLERK

Geo. W. Harrison, State Printer, Atlanta.

Aflecant.

Allanta, Backety 6. 1891. STATE OF GEORGIA, EXECUTIVE DEPARTMENT. Mr. Nichard / King of the County 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 He is entitled to receive the sum of

for such disability, the same being the allowance due for the same ending October 24, 1891.

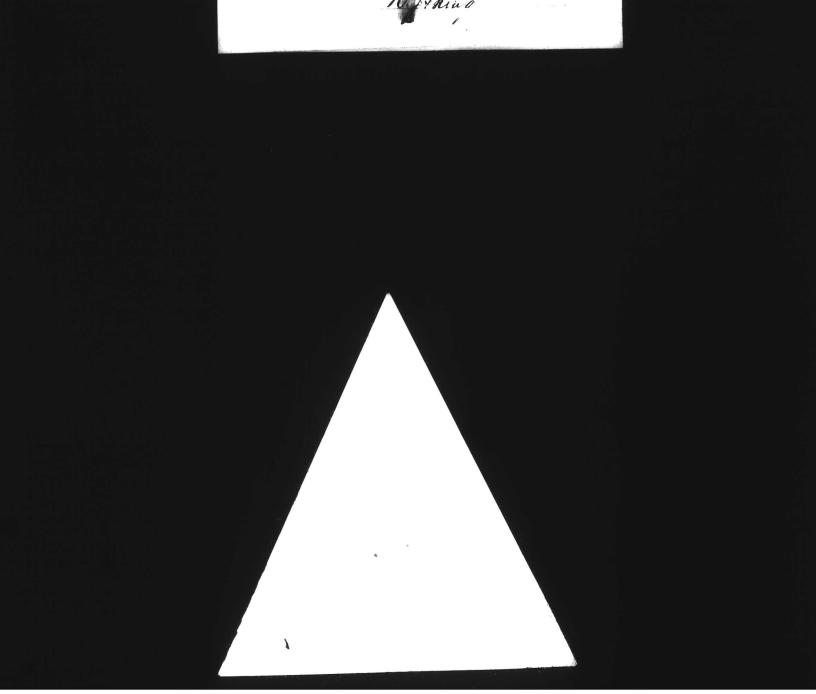
The Treasurer will pay the same and food his receipt of this poucher and return same to Executive Department for warrant.

By the Governor

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

Dollars,

1891.



Washington Recol Widow's Application Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendments of 1920 and 1937.

STATE OF GEORGIA,

Ordinary's Certificate

Ful ton

COUNTY

Thomas H. Jeffries Mrs. Ross Pope King

Ordinary of said County, do certify applicant

County FULTON Name MRS. ROSA POPE KING Widow of .. HEZEKIAH . O . KING

Date of Marriage ... June 10 1890

DEC 27 1937

Director.

225 Rawson St. S.W.

duly the SWOTT by me before signing the for MIZER marriage; that both of them

of said State since January 1st, 1920; that I also know

she represents herself to be, and that

truthful and Given under my hand

, Ordinary. County.

(SEAL OF ORDINARY)

r answered the Ordinary shall swear applic true answers make to each of the questions

INSTRUCTIONS

me if obtainable. If not, prove

AUG 19 1937

s Application of HEZEKIAH O. KING MRS. ROSA FULTON Date of Marriage

Ordinary's Certificate

STATE OF GEORGIA,

Fulton Thomas H.Jeffries Ordinary of said County, do certify Mrs. Rosa Pope King the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know #088 May King the witness who swears to the STATE TRANSMINISTER marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit. Given under my hand and seal of office this. 3011 ..., Ordinary. (SEAL OF ORDINARY)

INSTRUCTIONS:

Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You colombly swear that you'll true answers make to each of the questions asked you and the evidence you shall give will be 2. Additional affairties may be attached if blank spaces are insufficient.
 Only widows who married prior to January 1st, 1920, are entitled.
 All affairties must be made before the Ordinary of the County in which the applicant or witness resides and must be

All almost have to make the more received for the processor of the process

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATI	E OF GEORGIA,
	TULTON COUNTY.
	Personally appears before me, Rosa Pope King of said State and County
and he	reby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the
	tutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after
	duly sworn, true answers to make to the questions propounded, answers as follow, to wit:
	ION I.
1.	What is your name, and where do you reside? (Give Post Office and County). Rosa Pope King. Atlanta, Ga. Pulton County 2 2 5 Possesson &
	How long and since when have you been, continuously, a bona fide resident citizen of the State
	rgia? since 1870
	ate, or year, of your birth September 18, 1848 Age?
	(I)When, (2)where and (3)to whom were you married? Jung 10th, 1890, Atlanta, Gar. Hexekiah O. King
	Have you married since the death of first and soldier husband?
	When and where did your first husband die? Atlanta, Ga
	Were you residing together when he died? YSA
	If not, how long had you resided apart?
	Are you now a widow?
	Have you or your husband heretofore been paid a pension by the State?
	If so, when and for what cause were you or your husband placed on the roll?
	ION II.
	nawer the following questions if your husband was not a pensioner:
duri	wairy, Artillery, Reserves, State Guards, State Militia or State Troops. Ing the war of 1861-1865. Anderson District County, Anderson, S. Company 'L' End S. G. Rifles. Confederate Army. Onl John Yincont
	re of Anderson, S.C. Infantry.
	When and where did the Commands of your husband surrender or discharge from the Service?
3. 1	Was your husband personally present with his Command when it was surrendered or discharged?
	errend eropeske, indopether, The Anni Lighthe Jack
5.	When did he leave the Command? April 9th, 1865
a. i	For what cause did he leave? surrender
b. I	By whose authority did he leave? Confederate Army dispended
c. F	For how long was his leave of absence granted? d. In what way?
e. \	What was his ph sical condition when he left his Command? . fair
f. \	What effort did he make to return to his Command?
g. I	in what way was he prevented from going back to his Command? army disbanded
	Was he captured by the enemy at any time?
	f so, when and where? In what prison was he held and when was he released?
	The state of the s
	,
Swor	n to and subscribed before me, this the
22	day of July 1937.
A	
	1 Kemp Ordinary Applicate
	day of July 1937. Rosa Pofe Ling. Applicant. County.

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

WASHINGTON AUgust 4, 1937.

INREPLYORD.-J.A.Mc.
REFER TO 70.C.
Respectfully returned to

Miss Rosa M. King. 225 Rawson Street, S.W., .tlanta. Georgia.

The name Hezekiah O. King has not been found on the muster rolls on file in this office of any Confederate States army organization from the State of South Carolina.

The records show that one H. O. King, name also borne as Hez O. King, and Hezis C. King, private, and corporal, Company K, 2nd Regiment South Caroline Rifles, Confederate States .rmy, enlisted April 1, 1862, at Adams Run. South Carolina. We was wounded slightly in action at Frezier's Farm, June 30, 1862. and was also wounded in the shoulder, (slightly) at Sharpsburg, Maryland, eptember 17, 1862.

The company muster roll for January and February, 1865, last on file. hows him present.

No later record found.

6. 9. Conley Major General, The .djutant General. 37 Q.a. mc

STATE OF GEORGIA. FULTON COUNTY.

TO WHOM IT MAY CONGERN:

This is to certify that I have known Mrs. Rose Pope Ming, for forty-five years, and that she has never married since the death of her husband Mr. Hezekiah O King, a deceased Confederate Veteran.

Sworn to and subscribed before me, this 22nd day of July, 1937

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLAPTA

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

WHEREAS:

MRS. ROSA POPE KING, WIDOW OF HEZEKIAH O. KING,

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

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of January , 19 38 , and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 19 37 .

State Department of Public

Court of Ordinary
FULTON COUNTY
STATE OF GEORGIA

CERTIFIED COPY OF MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

OF

MR. HEZEKIAH O. KING

MISS ROSA POPE

Recorded in Book C Page 186

THOS. H. JEFFRIES

Ordinary.

Million Farmance Company

Box 401

Anderson, S. C.

January 20th 1927.

Mrs M.E.Geer. Atlants Ga. #703 Penn Ave. N.E.

My Dear Mrs Geer.

Mr Aaron Geer of Belton S.C. has handed to me a letter from you of 7th inst, asking information in regard to the Military record of your father, Comrade Hezekiah.O.King.

Mr Geer asked me to assist him in procuring the data, and I have made strict search of the Roster of Confederate Veterans who enlisted from Anderson District (County) during the War of 1861-1865, and find that H.O.King enlisted in Co 'L' and S.C.Rifles. which Regiment was a part of Jenkins'Brigade. He surrendered at Appomattox Va April 9th 1865.

The 2nd S.C.Rifles was commanded by Col John.Vincent Moore of Anderson S.C. who was killed in 1862.

I feel sure that your mother will have no trouble whatever in securing a Pension from the State of Georgia, and would suggest that she takes the necessary steps promptly to that end.

The Pension Board of Georgia has Offices in the State Capitol and as I have had some correspondence with them in regard to Pension applications in the past, you will find them very fine men to deal with the matter.

If necessary, you may use my name, and if I can be of further assistance to you, do not hesitate to command me.

With kind regards, I am-

Very Sincerely.

Box #401. Anderson S.C.

Adjt Gen S.C.Division. United Confederate Veterans

MARRIAGE LICENSE

State of Georgia--Kulton County

To any Minister of the Compel, Judge of Superior Court, Justice of the Peace, or other Berson authorized to Bolemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony MR. HEZEKIAH O. KING MISS ROSA POPR

and According to the Rites of your Church, Provided there be no lawful cause to obstruct the same. according to the Constitution and Laws of this State; and for so doing this shall be your suffi-

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD Given under my Hand and Seal this 10th day of June , 1890 19

W. L. CALHOUN L. S.

I hereby certify that H. O. KING

ROSA POPE and

were joined together in the HOLY BANS OF MATRIMONY on the 10th day of June, 1890 19 by me.

HINRY MoDONALD, M. G.

State of Georgia, Fulton County. ORDINARY'S OFFICE

ATLANTA, GA., July 88nd, 1957 I. ... E. T. KEP. Clerk Court of Ordinary of said County, hereby certify

that the foregoing is a true copy of the Marriage License and Certificate of Marriage of MR. HEZEKIAH O. KING

B. B.

and . MISS ROBA POPE as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the

Clerk, Court of Ordinary.

end MISS ROBA POPE as the same appears of record in this, office. Given under my official Signature and Seal of the Court of Ordinary, the day and year atorgoald. Confederate

Soldier's Application.

UNDER ACT 1910.

Company Which Was

Approved

A W. LINDSEY.

CHAS, P. BYRD, State Printer, Atlanta.

13/23-1913

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
Fultor County.
The state of the s
of said State and County, hereby applies for the pension provided by Act of 1936, 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:
What is your name and where do you reside? (Give County and Post-office)
That There William In
How long and since when have you been a continuous resident citizen of this State? The its years - 27 years in assaults for
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State
from 1861 to 1865? Eulisted 3 Confederate Calculary
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service Frist 3 Castlery Whule On June 1864
5. How long did you remain in the actual Military Service with said Company and Regiment?
6. When and where was your Company and Regiment surrendered or discharged from the Service?
was a presour; I war at the time of Surruser but
Were you actually present with your Command when it was surrendered or discharged?
11 you were not actually present, state specifically and clearly where you were mount
a. Where was your Command when you left it? Lepturad Bradley County
b. When did you leave the Command?
c. For what cause did you leave? Heaplurest
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?
b. What effort did you make to return?
i. Were you captured during the war? 42
j. If so, when, and where? In what prison, were you held and when were you released?
Jamesson 1868 Near Clevelosed Penn
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 ifems and value.)
I have no property of any description
ey wife ourtes liquity of so in down a last
10 61 Jacob street de contra de
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?
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)
1 manual
None today than they go
What around an monthly income or comings of yourself and offe and the sound in the
12. What annual or monthly income or earnings of yourself and wife and the source derived have
13. Are you drawing a pension of any amount from this State or the United States?
14. Have you eyer 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
191 day of 12 101 2
White Celturage Ordinary
of Tueson County

O LIESTIONS FOR WITNESS AS TO SERVICE

Q DELICIES I DIL WILLIAMS AND TO DELIVIOE.
STATE OF GEORGIA, County.
Thomas & Perpler of said State and Gounty is hereby presented
as a witness in support of the application of Thom H. I Fingl. 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? Themas g. Duples
resides in whitfield Congrety Ga
2. How long and since when have you known Thomas A. Mong and the applicant About frust a year 1861
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this
State and how do you know? He how resides in allanty be
No how resided in Lunga 25 Hours or more
4. When, where and in what Company and Regiment did Thomas It Stray enlist during war from 1861 to 1865? (Give date and place) in Low Jo t 3. Comballante Call
5. How did you obtain your information of this Service?
By being in Some Reg. with him
6. How long within your own personal knowledge did he perform actual military service with
this Company and Regiment? (give date) From 1861 to Close of the war
7. When and where was his Command surrendered or discharged (give date and place)
8. Were you personally present at the Surrender?
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? fast he was in the
11. If not where was he and how came him there? And Wor Continued in
murray County Georgia, april June 1885
12. When did he leave his Command?
when he left it?for what cause did he leave?
By whose authority did he leave and how
ong was he granted leave?
all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)
13. In what way was he prevented from returning to his Command? Coffined
How do you know? I had letter from line ofthe he wash
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner 76 15 16 80, when and where? After 1900 1865
In what prison was he held? At Clindland Janua and when released?
Task & Knew of lime and was a friend of war
Sworn to and subscribed before me, this the
day of 191 2
Mora Ordinary,
of Whitfild County.

STATE OF GEORGIA. nursay County.

as a witness in support of the application of Thomas M Fring for the pension provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded

2. How long and since when have you known of H / Eving the applicant? 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! an attanta ba all his Life 4. When, where and in what Company and Regiment did. J. H. DErry enlist during war from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865? (Give date and place) 27th for file from 1861 to 1865. (Give date and place) 27th for file from 18 By living in Some Compay with whim. 6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) I gon't Rumanles He own Cufature 7. When and where was his Command surrendered or discharged (give date and place).... at 15ingline Dor may 1865.

10. Was the applicant personally present with his Command at surrender? 27.0 was a part 11. If not where was he and how came him there? m. Prisa.

13. In what way was he prevented from returning to his Command? 2 Prissaries

1 & Barren

mussay Comes esa

8. Were you personally present at the Surrender? 9. If not, where were you and how came you there?.....

12. When did he leave his Command?.....

In what prison was he held?.....

By whose authority did he leave......

all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)..... by drink sim in same Compay

14. What effort did he make to return to his Command and how do you know?......

Swern to and subsembed before me, this the sheet ham see

QUESTIONS FOR WITNESS AS TO SERVICE.

of said State and County is hereby presented

when he left it? for what cause did he leave? Captured long was he granted leave? How do you know

I Know shark Sing Maid a grand Soldier

and when released

Gary 10 to

OFFICE OF

COURT OF ORDINARY

J M CAMPBELL ORD. NARY

MURRAY COUNTY

SPRING PLACE CA MOVE 27

The string launty.

It is there ordinary of Said County to the wittens

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J.M. Contibell Ordinary Printing Cd Western & Atlantic Railroad

Legal Department John L. Edmonson, Law and Stock Agent.

Allanta, Ga.

File No.

right ope.

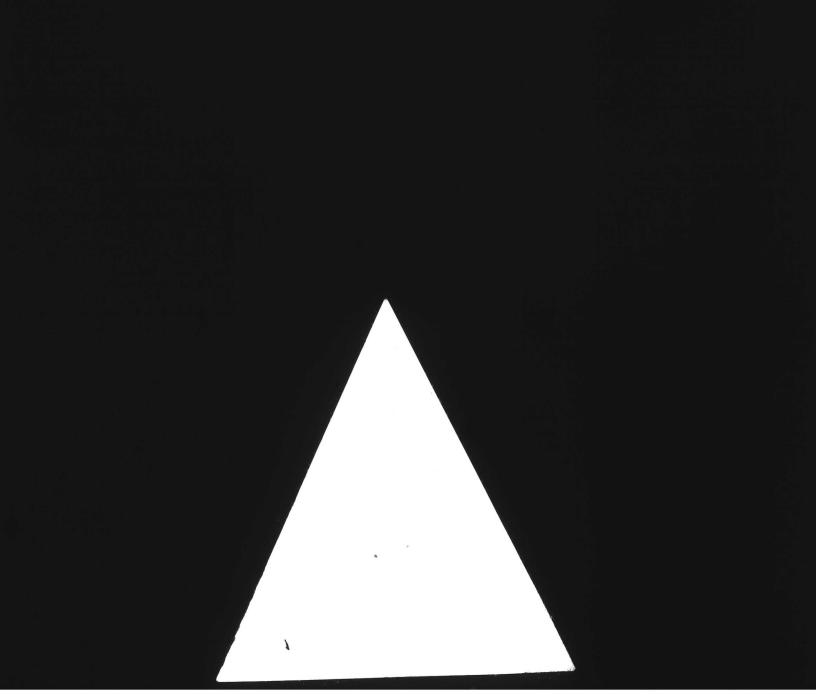
I was not ald enough to import a complement end of any tree way, in over since I am a sect of important and all the control of
I have consident to the state of the state o

I will be look to the pour on this after. It thereis one thing like in this on in which, please let me know, so it is it looked there.

ory truly yours.

LEmmacravon

Is a muray County of said Co do certify their & 15 more of Dupho of Thomas N. / Eing who risides in Inhitfield Co. Swearing to the Dervis of Thomas H. / Eing, is trumple 10 grea his statement are entitled to full faith, and credit whites my hand and officeal Seal This Dee The 17 1913 Im Campbell Ordinary muny Cd



Progression Confederate

Soldier's Application.

UNDER ACT 1910.

Name M. A. Many Straight Company J. Straight C

J. W. LINDSEY
Commissioner of Feed

CHAS. P. BYRD, State Printer, Atlanta,

for nitrees ree

•			1	
Approved 1. W. LINDSEY. Crembulator of Praticular CHAS P. BYED. State Printer, Admin.	Company Lit. de La La Ca. Regiment	UNDER ACT 1910. County ALL Name M. Q. M. M.	Soldier's Application.	Many Red Ender

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,
County.
of said State and County, hereby applies
for the pension provided by Act of \$10, 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.A. King - 87 Broyles Street Allanta Ga
2. How long and since, when have you been a continuous resident citizen of this State?
All song fife 69 grans
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State
from 1861 to 1865? I and intended New 146.2 at Garanthura 4.4. 4. When and where, and 50 what Company and Regiment did you enlist? (Give the arm and class
of Service) enlisted in Company 7 5th ga Kederics
5. How long did you remain in the octual Military Service with said Company and Regiment?
(Give date of discharge) Annanced grass flow 1863 de April & 4 1865
6. When and where was your Company and Regiment surrendered or discharged from the Service?
At grandbara Month laraling
7. Were you actually present with your Command when it was surrendered or discharged?
8. If you were not actually present, state specifically and clearly where you were
I mary there
a. Where was your Command when you left it? Aid sand Leon it
b. When did you leave the Command? Mast at all
c. For what cause did you leave? Avad with the barrand to the surrender
d. By whose authority did you leave? And heart Lines Till Surremoter
e. For how long was your leave granted? In what way? Mad. Als.
e. For new long was your leave granted! In what way
f. Why did you not return to your Command after leave expired? And bourselessed
g. In what way were you prevented?4
h. What effort did you make to return?
i. Were you captured during the war? hand last
j. If so, when, and where? In what prison were you held and when were you released?
nor released from any Friday.
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.)
owned half gentinest in little Cattage Situated at
\$3.9 Wardward Clay) but by adda but it al
10. What property of any kind have you disposed of and for what purpose since 4 Nov.
1908. To whom and for what price?
11. What property of any description of any kind, and of any value now owned and in the use
possession and control of yourself and its cash value? (Make itemized list). At a later was the second of the seco
in the Krayles Street Catters
1
12. What annual or monthly income or earnings of yourself and the source derived have
your Afane we themend at manthly in Come only Small show those
13. Are you drawing a pension of any amount from this State or the United States? Are 14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
not allowed? Lines have so the deorgia reason and the retused and for what cause it was
not anowed.
Sworn to and subscribed before me, this the
16 day of Det a 1915
Thank ordinary
/ /ofCounty.

OUESTIONS FOR WITNESS AS TO SERVICE

QUESTIONS FOR WITHERS AS TO SERVICE.
STATE OF GEORGIA, Gunty.
0 4 8.11
as a witness in support of the application of M. A. Hung 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?
2. How long and since when have you known and the spileans?
2. To the supplemental suppleme
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 A Gan /a series 1875
4. When, where and in what Company and Regiment did M. A. Xing. enlist during
war from 1861 to 1865? (Give date and place): Indicated in Go # 5 Sa Reg 5. How did you obtain your information of this Service? Awas int 4 Reg
and he was in 5 Reg La Reserve
6. How long within your own personal knowledge did he perform actual military service with
this Company and Regiment? (give date) from Nov-1863 auntill 1865
7. When and where was his Command surrendered or discharged (give date and place)
8. Were you personally present at the Surrender?
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? He harries
1i. If not where was he and how came him there?
12. When did he leave his Command? And not feast where was his Command
when he left it? dial not leave for what cause did he leave? did not leave
By whose authority did he leave Aug. Alon leave and how
long was he granted leave?
in The 4 Big and he was in The 1- Reg
13. In what way was he prevented from returning to his Command?
How do you know? I was with with mutill the surrenter
14. What effort did he make to return to his Command and how do you know?
15. Was applicant captured as a prisoner. M.O. If so, when and where? War not
In what prison was he held? And any and when released
Sworn to and subscribed before me, this the
har ordinary
of Justian County.

AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA. County.
Personally before me comes les a stable of the golden who on oath says that they are fresholders residing in said County, and we know M. A. King
the applicant for pension and we know the property that is now in the use, possession and control of himself
and of its each value to wit: (Make List by Items and value.)
processing the state of the sta
1. What property, if any, has been sold or given away by the applicant since Nov. 4, 1908?
(State it fully by items)
2. When and to whom was it sold or given to? 4909, To his Wife
3. What was the price paid or stated to be paid?
4. What relation is the party to applicant? his Wafe
5. What disposition was made of the proceeds of the sale? And the forme by mife
6. Was the disposition of this property made in good faith and full values?
or was it made to obtain a pension of was made made of superior to and superior before me, this the Singleton I day of Cel 101
Than Harry, Ordinary,
of Justan County.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA.
STALE OF GEORGIA.
Gounty.
Gounty. I, Ordinary of said County, certify that I know
Gounty.
Gounty. I. Ordinary of said County, certify that I know the applicant Laboratory of the person he represents himself to be and resides in said County. That I also know the service and the witness swearing to the service and the service a
Gounty. I. Ordinary of said County, certify that I know the applicant laborated for Pension is the person he represents himself to be and resides in said County. That I also know the witness swearing to the services and the same of the services and the services and the same of the
Gounty. I. Ordinary of said County, certify that I know the applicant Laboratory of the person he represents himself to be and resides in said County. That I also know the service and the witness swearing to the service and the service a
County. In Ordinary of said County, certify that I know the applicant. As I county is the person he represents himself to be and resides in said County. That I also know the service and the witness swearing to the service and the whole 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
County. I. Ordinary of said County, certify that I know the applicant I have a county. Ordinary of said County, certify that I know the applicant I have a county. That I also know the person he represents himself to be and resides in the witness swearing to the service and 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 shows that for 1900 \$ 9.90 for 1910 \$ 1/35 -
County. I. Ordinary of said County, certify that I know the applicant I have a county. That I also know the applicant I have a county. That I also know the service and 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 shows that value for tax is in 1908 \$ 440. for 1908 \$ 440. for 1918 \$.25. for
County. I. Ordinary of said County, certify that I know the applicant I have a county. That I also know the applicant I have the applicant I have the person he represents himself to be and resides in the witness swearing to the service and they are all residents of said County and were duly sworn by me before signing the foregoing affidiavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the shows that value for tax is in 1908 \$

NOTES: Before any questions are nawwerd the Ordinary shall event applicant and all witnesses in the following words

"You do celeminy wear that you will true nawray make to such question asked you and the avidance you shall give shall be the whole truth; so bely you God."

Additional sificative may be stacked Hi blank spaces are insufficient.

All sificative must be made before the Ordinary and certified by him.

If applicant has no property at all in his possession, use or control of saif affidavits of freeholders unnecessary. 15. Was applicant captured as a prisoner Mo If so, when and where? war mol In what prison was he held? and when released not eastweed Sworn to and subscribed before me, this the "Ordinary, Instan County.

Jutton Co.
J (For Those Already Farglied.)
INVALID
SOLDIER'S PENSION.
1899.
Name 773, Kin'y County Fullin Disability Distusses
Amount, \$ 37 1899.
RICHARD JOHNSON, Commissioner of Pensions.
WARRANT HANDED TO
Mo Sotu

King, W. B.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

hereby authorize

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

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

[L. S.]

Executed in presence of

STATE	OF GEORGIA,
	County.
I.	hereby authorize
	of
to receive	e and receipt for the pension paid hereon and request that he remit same to
	by
at	
IN V	VITNESS WHEREOF, I have hereunto set my hand and seal, this
day of	1899.
	[L. S.]

Executed in presence of

RICHARD JOHNSON,

POWER OF ATTORNEY.

	County. }
	of
	we and receipt for the pension paid hereon and request that he remit same to
at	
IN	WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of_	1900,
	[L. s.]
*	Executed in presence of

1						11 1 1	1 1	o 1		11 1
I	1243			0		01		180	Pensions.	
	07	l į	ď	PENSION	Ö	319	9	6	LINDSEY,	NDED TO
	300	X	AL	5	Ŏ	13	6-	Las		T BAND
	36	Na	Ž	E .	9	60 12	7	pans	JOHN W	1
						Trans /	Disability_Amount, \$	farrant is	5	3
	10.9 there	0	or an income	8		C N	Disa	Wa		

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For Applicants Herotofore Allerant Pansions

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Juliu County.
personally appears W. B. Kring of Fulton
County. State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the day of 18 40; that he enlisted in the military service of the Con-
federate States (or of the State of States, and served as a month in Company & of 66th Regiment
of The Volunteers, Strong 's Brigade; that whilst engaged
in such military service in the State of the day
of , - 186 , he was wounded, injured or diseased as follows:
becoming our heater so tak he has be-
comt come discard o is now as a risult
thing fromthe cally unable to perform the
ordinar manufal over this I life -
Deponent makes application for the pension to which he is entitled for the year end-
ing October 26th, 1899. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Dollars, for the year 189 8
Sworndo and subscribed before me, this, the 1978 /c'c -
7 day of 1899. POST OFFICE
The Con Day Fulling Co h.
Norx-State fully the nature of wound or character of the which knuses the disability, and explain particularly the extent of the disability resulting from the wound or define.
STATE OF GEORGIA,
County.
1. W-/t-/hulory Ordinary of said County.
do certify that I am well acquainted with 173 King the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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
int lead
Ordinary Tulk County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.
40 4)
Dersonally appears It B. Thing of Fullon
County, State of Georgia, who being duly swort, 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 32/2 18#0; that he enlisted in the military service of
the Confederate States (or of the State of Sa) during the war be-
tween the States, and served as a Furally in Company &, of 66 th Regiment of Volunteers Sufficiency's Brigade; that whilst
Regiment of Volunteers Self rulino 's Brigade; that whilst engaged in such military service in the State of Sel , on the
day of, on the, on the
day of ne was wounded, injured or diseased as follows:
*
Convected Pheumalism
while in service rendering him
unable to perform ordinar munul
Cabin
Deponent makes application for the pension to which he is entitled for the year
ending October 28th, 1900. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Dollars, for the year 189 9.
Sworn to and subscribed before me, this, the MB Find
3/4 day of Carriary 1900. POST OFFICE
men t
Now Class All the state of many the state of
NOTE.—State fully the nature of wound or character or union which causes the disability, and explain particularly the extent of the disability resulting from the wound or diseases.
STATE OF GEORGIA.
Fullon County.
I, My Hulsey Ordinary of said County,
do certify that I am well acquainted with M.B. Kung the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this 3/4-
day of Canuary 1900.
(TYTTherene
Ordinary Fullow County.

	POWER	OF ATTORNEY.							
STATE OF)							
	County	r. j							
I	hereby authorize								
		of							
to receive and	receipt for the pensi	ion paid hereon and request that he	remit same to						
4		by							
at									
IN WITH	NESS WHEREOF, I	have hereunto set my hand and seal t	his						
		N. I.	1						
301 3 1 50500 3000 3000			[L. S.]						
			[[[[[[[[[[[[[[[[[[[[
Execu	ited in presence of								
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_	=								
lled.	2	22 1							
O. III		E S	TO						
CODE SECTION UPO	DĮSABLED IER'S PEN 1901.	LINDSI COMMISSION	WARRANT HANDED TO						
CODE SECTION 1700	E S	745 3 1 1 2 °	HAN MAN						
8 A	SA CO	© 25 50 - N ≥	RRANT Harrison.						
hos No.		2062 20 K	ARR A						
<u>-</u>	9	() ji ji ji	, O-50						
<u>.</u>	10	Name County Disability Amount, \$							
	S	ZÖÄÄ	1 111						

STATE OF G	EORGIA,	}		
	County	.}		
I,		hereby	authorize	
MACHINE .	, · · · · · · · · · · · · · · · · ·	of	AND AND A STATE OF THE STATE OF	
to receive and re	eceipt for the pension	n paid hereon ar	nd request that he rem	it same to
		by_		
at				
IN WITNES	SS WHEREOF, I h	ave hereunto set i	my hand and seal this	
	11902			
1841	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			. [I S.]
Executed in	presence of			

1905 SOLDIER'S PENSION Co. Co Regiment 66th.
Disability Mounicities 1902. JOHN W. LINDSEY, DISABLED WARRANT HANDED TO FOR THOSE ALREADY EN F-600 Amount, \$ 50 110

no late

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. County.
Personally appears WB String of Frankon
Personally appears Of Guiton. 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 25.71
day of Stept 18 42; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a Augusto in Company & offele th Perimone
States, and served as a friently in Company & of Cle th Regiment of you Volunteers, Stefelines '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:
Contracted Shumatism while in the
Drivice
-
The second secon
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1902. I have heretofore, under said law, as a resident of
County, been allowed an invalid pension of
Dollars, for the year 1801
Sworn to and subscribed before me, this the
day of JAN 1912 1902. Post-office
Williamon.
Nove.—State fully the nature of the wound or character of disease which causes the disability, and explain fourierdarily the extent of the disability resulting from the wound or disease.
party and determined in the state of the sta
STATE OF GEORGIA,
Fulton. County.
I. Ordinary of boild County.
do certify that I am well acquainted with Will William a
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 JAV 13 1902 1902.
ARIE ON DOUBLE
Orne Continue Fulton. County

7

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 IN WITNESS WHEREOF, I have hereunte set my hand and seal this	
I,	
of to receive and receipt for the pension paid hereon and request that he remit same to	
to receive and receipt for the pension paid hereon and request that he remit same to .by	
.by	
at_	
IN WITNESS WHEREOF, I have hereunto set my hand and seal this	
day of . 1903.	
[L. S.]	
Executed in presence of	
(i) (ii) (iii) (ii	
ED PENSIO BASS ANDSEY, ANDSEY, ANDSEY, ANDSEY, ANDSEY ANDSEY BED TO B	
BLED S PENS S PENS OB. (Condition of the property of the p	
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SOLDIER'S PENSIO No. A DISABLED SOLDIER'S PENSIO 1903. 1903. Soldier's PENSIO 1904. Soldier's Period Soldier's Period Soldier's Period Soldier's Period Soldier's Period Amount, Soldier Amount, Soldier Soldier's Period Amount, Soldier Amount, Soldier Soldier's Soldier Amount, Soldier Soldier's Sol	0
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I			1.		hereby authoric
o receive and	receipt for the	pensio	on paid hereon, a		at he remit same
t					
IN WITNES			reunto set my hand	and seal, this_	
•	in presence of	1904.			[L-
13.1	21			,	
1					
(FOR THOSE ALREADY EMBOLLED.) No. (O &	DISABLED DIER'S PENSION	1904.	P. B. Hair 9 F WIOD. Regiment Delf	Amount, 8 Holy (21 1904.	JOHN W. LINDSEY. Commissioner of Pensions. WARRANT HANDED TO

nodota

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE O	F GEORGIA,)		
ar co	Count	v.L		
Personally	appears (UND)	ing .	f *	
	Georgia, who being duly s		at he is a bona fide	citizen
and resident of s	aid State, and has resided	therein continuously	ever since the Z	5
day of SE	/e/ 18 40; tha	t he enlisted in the m	ilitary service of tl	he Con-
federate States (or of the State of	Ju) du	ring the war betw	een the
States, and serve	d as a frientle	in Company &	, of 66 th Re	giment
of Ifa	Volunteers, Sty	Isticul 's Brig	gade; that whilst e	ngaged
in such military	or of the State of d as a fine utile, Volunteers, of service in the State of	ya	on the	_day
of	186 he wa	s wounded, injured or	diseased as follow	s:
Contru	etel Phrima	tum in the	source	
	2.1			-
			-	
	and subscribed before me, the	1903. Post-office	Silling	
profession to the exten	telly the nature of the wound on the the disability resulting from to DF GEORGIA,	r character of disease which he wourld or disease.	causes the disability, a	па ехран
I &	County. ,	WASK	Ordinary of said	County,
the applicant in him in his said :	the foregoing affidavit, an affidavit are true, and I kn	d am well satisfied th	at the statements	made by
be and that he r	esides in this County.			4
	Given under my officia	l signature and seal,	this	
AME	day of	Jun 1. C.	Sievinson	<u></u>
here		Ordinary_	100 C	County.
72 507 508 50	NorsFill all blanks and of Co	mann and Desiment		

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

THE THE PARTY OF T
STATE OF GEORGIA,
Fulton. County.
D. D.
Personally appears XV (3. 2222) 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 25
day of Defet 1840, that he enlisted in the military service of the Con-
federate States (or of the State of Man) during the war between the
States, and served as a Wiring in Company Co, of both Regiment
of Lu Volunteers Steffence's Brigade; that whilst engaged
in such military service in the State of Mac, on the day
Cautracled They was wounded, injured or diseased as follows:
- hu service
The second secon
A CONTRACTOR OF THE STATE OF TH
*
Company of the State of the Sta
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
Fulton County, been allowed an invalid pension of
Dollars, for the year 1998,
Sworn to and subscribed before me, this the
day of JAN 21 1904 1904. Ments
Post-office Post-office
NozeState 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
STATE OF GEORGIA, County
T. O. O.
I, John OR Willinson O P Pordinary of said County,
do certify that I am well acquainted with A Whing
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my omciai signature and seal, this
day of 1994
(In / William
bere. Ordinary Willton. County.
NornFill all blanks and of Company and Regiment.

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, t	his.
day of	1905.	1 2
Executed in the p	rosence of	_[t s.]
(FOR THOSE ALREADY ENROLLED.) FOR THOSE ALREADY ENROLLED.) DISABLED SOLDIER'S PENSION	Name 21. 2. M. C. 1. County 2. 2. 11071. Co	WARRANT HANDED TO C PM

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,)			
Tuston con	Ming			
4 le Quatri	Sung.	they	Ta .	'n
to receive and receipt for the per	nsion paid hereon, and r	request that he	remit same to	
	by			
at			/	
In WITNESS WHEREOF, I ha	we hereunto set my hand	and seal, this_	18 0	
day of 1906.	11 Dhi	11.		
	of Jo X	Ming	[L. S.]	~:
Executed in the presence of		1		
Luke Bradley	ast.			
	,			
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* **				
1021	<i>i</i>	6 1/ II	. 11.1	
	" My	1906	13 1	
COR THOSE ALREADY ENDLE -64.0. 43 DISABLED DISABLED 1906.	2/ 1/2 3	P. P.	531	1
SEE COME	ton.	OHN W. LINDSEY.	SED T	7
3 5 7 7	Hom Regime	L'EN	TAN S	
CONTRIBUTION OF ALREAD DISABI	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	N KI	TANA	
	(E.	2 1 g	WARRANT	
	B. C. M.	it.	11	
{ E	County Co. Co. Disability	Amount	Į.	
	Na Co Co Dis	Y.	() I	

11.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. county.)
Fulton. county.) Personally appears 24. 3. Sting of Fulton
County, State of Georgia, who, being duly sworm, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the all
day of he's life 18 hat he enlisted in the military service of the Con-
federate States (or of the State of , Sico Lafter) during the war between the
federate States (or of the State of State of Jin Company to of the Regiment of Volunteers Stephens 's Brigade; that whilst engaged
in such military service in the State of, on the day
of
William .
Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of County, been allowed an invalid pension of Dollars, for the year 1904.
Sworm to and subscribed before me, this the Ming May of JAN 2 1905 1905. Post-office Little arch Process
Norz -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, do certify that I am well acquainted with A. S. Hirld the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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
Affir Name Some Ordinary Fillion County.
North.—Fill all blanks and of Company and Regiment.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
}
Fulton. County.
Personally appears H. B. King of Fulto
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citiz
and resident of said State, and has resided therein continuously ever since the
day of 1840; that be enlisted in the military service of the Co
federate States (or of the State of Laty a dyring the war between t
States, and served as ain Company, ofth Regime
of Volunteers 's Brigade; that whilst engag
in such military service in the State of, on the d
of 186. , he was wounded, injured or diseased as follow
Disease
THE DESIGNATION OF THE STATE OF
ending October 26th, 1906. I have heretofore, under said law, as a resident Fulton. County, been allowed an invalid pension
Tistif Dollars, for the year 1995.
111
Sworn to and subscribed before me, this the
Oly of JAN 1 1906 1906.
John Willeman
OFTE-State fully the nature of the wound or character of disease which causes the disability, and explorationarily the extent of the disability resulting from the wound or disease.
State of Georgia,
Falton, County.
I, John Will Miller of Said Coun
do certify that I am well acquainted with . S. Sling
the applicant in the foregoing affidavit, and am well satisfied that the statements ma
by him in his said affidavit are true, and I know he is the individual he represents hims
to be, and that he resides in this County.
Given under my official signature and seal, this 144 1906
day of 1906.
I Affix
ordinary Friton County.

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

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

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	STATE C	F GEOR	GIA,		Y				
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		111	3-12	COON	14.)				
	1, 4	111	7-120		-	7		, hereby a	uthor
	ug	far	us	_ 0	al	lau	la	SI	
	to receive	and recei	pt for the	pension	paid hereo	n, and re	quest th	at be remit	same
					by		•	14	
	at_		1		-,				
	In Wi	TNESS WE	EREOF, I b	ave hereu	nto set my	y hand as	id seal, th	is //	
	day of	Louis		_1907.		1	16		
					do	BX	1Eni	1	_[L.
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7	LC CODE SECTION 1290. (FOR THOSE ALREADY EMPOLLED	1			dt	0	7 .	£	đ
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7	CODE SECTION 1250	, =		1	lt011	30	d S	ANI ANI	7 1
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	Fi)		200	Nаше Ø	County	Disability Amount,	11		
			-	, 2	5 5	1	3.31	.0.	8.5
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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS State of Georgia,

Personally appears of Fulton
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 18; that he enlisted in the military service of the Com
federate States (or of the State of Maryla) during the war between the
States, and served as ain Company, of Old th Regiment
of Volunteers 's Brigade, that while
s brigade, that whilst engaged
in such military service in the State of, on the day
of186 , he was wounded, injured or diseased as follows:
and the same of th
cisease
Management of the second of th
)
Sworn to and subscribed before me, this the day of JAN 2- 1907.
John R. Wilkinson. Postoffice
Note.—State fully the nature of the wound or character of disease which causes the disability, and explain posticularly the extent of the disability resulting from the wound or disease.
State of Georgia,
Fulton. County.
1, Jalen R. Williamson James dinary of said County,
do certify that I am well acquainted with A. D. Ming
the applicant in the foregoing affidavit, and am well satisfied that the fatements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal this JAN 2-
day of
John R. Wilkinson
Affin Four County County County
conty.

the applicant in the foregoing affidavit, and am well satisfied that the Matements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this_____ John R. Wilkinson day of____ BONES UEOMINING BETILTON. _County. Norm.—Fill all blanks and of Company and Regiment.
Norm.—All vouchers and affidavits must bear date after January 1st, 1937.

do certify that I am well acquainted with the first services

Kinsey, M.D. (mis)

Widow's Pension

UNDER ACT 1910.

County Tultan

Name M. J. Kinsey.

J. W. LINDSEY, Commissioner of Punsions

Commissioner of Pensions.

9/30/10 Chat: P. Byrd, State Printer

Widow's Pension UNDER ACT 1910.

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

STATE OF GEORGIA,	
County.	
Personally before me comes. A. A. J. Tractical said State and County, and after being duly sworn, on oath says that she desires to apply for a possion allowed under the Act	
of	
1. What is your name, and where do you reside? It is a first of the state of the st	1
2. How long and since when have you been a continuing resident in the State of Georgia?	_ '
LACOLA	
3. When, where and to whom were you married? Johns Himmy 1869. 1 4. When, where and in what Company and Regiment did your husband enlist asia soldier in Con-	4
federate Army or Georgia Militia? (State the arms and class of Service.) According to the contract of the cont	u
may 1864, al- Columbianier Sa co # 11th Sa Cal	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?	
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?	
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?	
eased?	
j. When and where did your husband die? Ware you residing together when he died? If not, how long had you resided apart?	
9. What property of any description did you own, hold or control for your use and its cash value,	
Nov. 4, 1908. (State same by items.) Land \$500	
10. What property of any kind have you sold or given away since Nov. 4, 1908? What wages ived	
for it and what did you do with the proceeds thereof? (Give items and eash value.)	
part of the part of the second	
The state of the s	
11. What property of any description of any value have you now?	
Give list and cash value? Land \$ 500.	•
12. What are your annual earnings or income and their value? 225.	
13. Have you heretofore been paid a pension by the State?	
If so, when and for what cause were you struck from the Roll?	
Sworn to and subscribed before this the Ton, m J & Kuise	
the cells of the second of the	
Odinary.	
vi	
Questions for the Witnesses as to Service of Husband and Marriage.	
STATE OF GEORGIA,	

1. What is your name and where do you reside? I.M. Brothe last State
2. How long and since when have you known War M. T. Thorong
3. How long and since when has she continuously resided in this State? (Give date.)
ill har life = 1846
4. When and to whom was she married? How do you know? The has John Trinsey.
5. How long and since when did you know Truster her
busband? Hoyeas.
6. When where and in what Company and Regiment did enlist?
Mry 1864 U- Washinell & Ca TH 11 Sa Con.
7.0
7. Were you a member of the same Company? W. Mossa. 8. How long within your personal knowledge did he perform actual military service with his Com-
pany and Regiment? // Must,
9. When, and where did his Command surreguler, and was discharged?
near Summerall St
10. Were you personally present when it was surrendered?
were you . Wy was folk heart and how came you there?
in his of duly.
11. Was the husband of applicant personally present at surrender?
where was he?
cause did he leave Command? (Give date.) By whose
authority did he leave his Command? and how
long was he granted leave?
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
owe knowledge or how? Sworn to and subscribed before me this the
19th How of left 1910
I toursen Ordinary of M. Brooks
Out Bahraham County.
0
AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA,
Fullow County.
Personally before me comes J. G. Brooks who on oath says that they
are freeholders of said County and that they know Mosa. The J. History
of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by
Schedule (A) as follows
Personal property 8 58 00
Notes and accounts the
Total
Schedule (B). We know the property sold or given away since Nov. 4th 1908, its cash value to be as follows:
Regional property
Money, Notes and accounts
Schedule (C).
We also know what property she has now in her possession, use and control to wit:
Acres of land worth \$ 500
Horses Ind Miles
Office property. \$
Total Value of all property and effects.
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
day of day of day
Musellus Marillim Bordinary.
of County.

ORDINARY'S CERTIFICATE

- (OEAL.)

 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."

 You shall give will be the truth. So help you God."

 All affidavits must be made before the Ordinary.

 All affidavits must be made before the Ordinary.

 Only widows who married prior to first January 1870, are entitled.

 Attach certified copies of marriage liceose if obtainable. If not, prove marriage, by some person, or by general reputation.

Schedule (C). We also know what property she has now in her possession, use and control to wit:..... Reput 100 Acres of land worth \$ 500 00 Horses Brei-Miles 8 Ofher-property...... inhulac and earnings 8 24:40 Sworn and subscribed before me this the J. Brand S. Marketter and State of the Stat ...County.

Money, Notes and accounts......

Kinsey, P.P.

Fulton G.

OK Son 1912

+ Confederate

Soldier's Application.

UNDER ACT 1910.

County Mullur

Name

Regiment M. Barley

Approved

J. W. LINDSEY.

1922 THERED ROSTER OFFICE

MENTERED ROSTER OFFICE

J. W. LINDSEY,

Regimenty III Belle	County All Wing	Soldier's Applicati	→ Confederate	ON Jon 1912	Kinsuy, R.P.
Est	essey	ation.	(D)	10)

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Ouestions for Applicants to Answer

and the second s	Series of Strangers
STATE OF GEORGIA,	
71 01	
OP II	0.3
for the pension provided by Act of 1910, to Confe	of said State and County, hereby applies derate Soldiers, and submits his sworn statement, with an duly sworn true anagers to make to the questions of the county and Post-office).
2. How long and since when have you been	a continuous resident citizen of this State?
I have lind in seen	in all may life.
3. Did you enlist in the Army of the Conf.	ederate States or of the Organized Militia of this State
from 1861 to 1865? 9 enlisted in	the Confedicto State
4. When and where, and in what Company	and Regiment did you enlist? (Give the arm and class
of Service) an 9 W Baters Regin	co le with him untell Pagro
5. How long did you remain in the actual	Military Service with said Company and Regiment?
(Give date of discharge)	to us Payale 12 day of may 1860
at Sime der La	Regiment surrendered or discharged from the Service?
	mmand when it was surrendered or discharged?
8. If you were not actually present, state sp	ecifically and clearly where you were
5 was Prejust near	
a. Where was your Command when you le	of it? is away Trum all the line
b. When did you leave the Command?	thin is was fallel
c. For what cause did you leave?	
d. By whose authority did you leave?	.6.6.1
e. For how long was your leave granted?	In what way? Untill brokings
By The us Governor	nd after leave expired?
	1//
h. What effort did you make to return?	(11
i. Were you captured during the war?	es Surenderd
j. If so, when, and where? In what prison	were you held and when were you released? al
Kingston Go	
9. What property of every description was	s owned, in the use, possession and control of yourself
and wife, and its cash value on the 4. Nov. 1908? (h	lake list by items and value.) Shaw mo
Property of my Sel	a neather has my wife
10. What property of any kind h	21. 21. 21. 12. 14. 14. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15
	our wife disposed of and for what purpose since 4 Nov.,
this and for what price	mo wife we have grothing
11. What property of any description of an	y kind and of any value now owned and in the use,
possession and control of yourself and wife and its c	ash value? (Make itemized list).
12. What annual or monthly income or earn	ings of yourself and wife and the source derived have
our mon at all andy	By works what I can
	from this State or the United States
14 Home man amon applied to the County D	A TOTAL OF A STATE OF THE STATE

hadling to the less

County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA, County, Thus H. Baller
as a witness in support of the application of the a
by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded,
What is your name and where do you reside?
2. How long and since when have you known R. I. Thinkey the applicant?
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, I Auditary Let Ha.
All his life DON
4. When, where and in what Company and Ragiment did fast the state of
5. How did you obtain your information of this Service Il Stand as dungern of JA Dokers Reg & Ble " B with line)
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date).
7. When and where yas his Command surrendered or discharged (give date and place) Many
S. Were you personally present at the Surrender?
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender?
11. If not where was he and have came him there? He was heard here for the
12. When did be leave his Command? Or North Where was his Command when he left it? Harsoline Gr. for what cause did he leave? Grannand
When he left it? I that the state of the leave what cause did he leave? I the state of the leave? I the state of the leave what cause did he leave? I the state of the leave what cause did he leave? I the state of the leave? I
long was he granted leave? How do you know
all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)
13. In what way was he prevented from returning to his Command?
How do you know?
14. What effort did he make to return to his Command and hoy do you know? Next IS A Consy had burnered.
15. Was applicant captured as a prisoner
In what prison was he held?and when released?
2 Byrorn to and subscribed before me, this that Marker Barker
GW Hinter of Ordinary,
of County,

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.
Personally before me comes. A. J.
the applicant for pension and we know the property that is now in the use, possession and control of himsel. and wife and of its cash value to wif: (Make List by items and value.)
Morroshold Goods, Falue \$ 3500
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.)
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?
Amellin Washing of Ang 1914. Sordinary. of Sullin County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,	
County.	
the applicant Alexandry for Pension is the person he represents himself to	rtify that I know
said County. That I also know	
service and J. G. Pornalls who are	
they are all residents of said County and were duly sworn by me before signing the foreg they are all truthful and trustworthy and their statements are entitled to full faith, and	
	and wife
value for tax is in 1908 8	
To have Circle with cordinary,	191 /
of tultan	County.

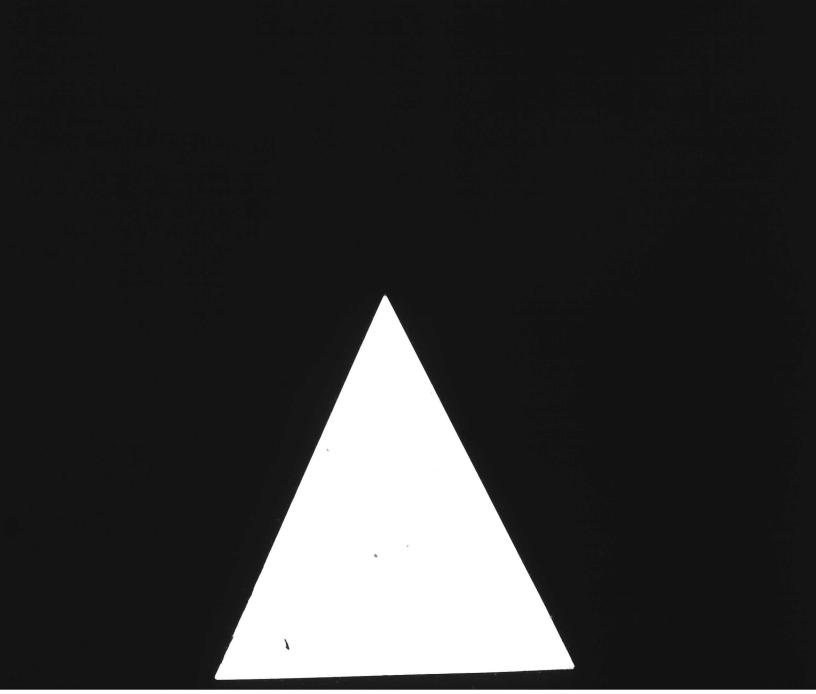
NOTES! Before any questions are answered the Ordinary shall swear applicant and all stinesces in the following words
"You dis selembly weigh that you will tries assers; inside to each question asked you and the evidence you
shall give abel he the whole truth; so help you God!"
2. Additional additions are described if blank speech are insufficient,

All affidavits must be made before the Delinary and certified by him.
 If applicant has no property at all in his possession, use or control of self and wife, affidavite of free unnecessary.

answers as follows:	the applicant for pension and we know the property that is now in the use, possession and control of himself
8/270	and wife and of its cash value to wif: (Make List by items and value.)
What is your name and where do you reside?	1) Insuhold Goods, Value \$35.00
2. How long and sipee when have you known Last, through the applicant?	
2. How long and since when have you known the applicant?	
Duce 1864	
3. Where does he now reside, and since when has he been a bona-fide continuing resident in this	1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov
State and how do you know? In Author for Ha.	1908? (State it fully by items.)
All his lite	
NO W.	
4. When, where and in what Company and Regiment did	2. When and to whom was it sold or given to?
war from 1861 to 1865? (Give date and place) 1. 154, Continuous for to 1861 to 1865?	3. What was the price paid or stated to be paid?
5. How did you obtain your information of this Service !!	4. What relation is the party to applicant?
Singer of the Boker they (60, 6 with him)	5. What disposition was made of the proceeds of the sale?
6. How long within your own personal knowledge did he perform actual military service with	
this Company and Regiment? (give date) bight muchs	6. Was the disposition of this property made in good faith and full values?
7. When and where was his Command surrendered or discharged (give date-and place). Many	or was it made to obtain a pension?
194/865 Ringelin Bartino Co Go	Sworn to and subscribed before me, this the
1 : 1	29-1000 01/2 200 1911.
8. Were you personally present at the Surrender?	Amellia Madeizy & Ordinary
9. If not, where were you and how came you there?	Ordinary,
I was mind	of County.
10. Was the applicant personally present with his Command at surrender?	The second secon
11. If not where was he and how came him there?	
He was home see Powle	ORDINARY'S CERTIFICATE.
12. When did he leave his Command?	CONTAINED OF OF OPPOSIT
when he left it? Hugolin To tor what cause did he leave? Linnage	STATE OF GEORGIA,
Question By whose authority did he leave Was foully and how	County.
	Ordinary of said County, certify that I know
long was he granted leave?	RPIC Author
all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)	the applicant. The person is the person he represents himself to be and resides in
was present and paralle	said County. That I also know
13. In what way was he prevented from returning to his Command?	service and J. G. Darasto who are freeholders, that
How do you know?	they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and
14 What effort did he make to return to his Command and how do you know?	they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the
new - Us to anny had Dunenter	Tax Results of Tallian shows that I have and wife
	value for tax is in 1908 8 Manual for 1909 8 Manual for 1910 8 Manual
15. Was applicant captured as a prisoner	
15. Was applicant captured as a prisoner.	Shard and arrow wheel and official hal of office this 27 nd day of the land
15. Was applicant captured as a prisoner. — Later—If so, when and where?	Story Ander my hand and official leal of office this 22 w day of 191 /
	for fundamental and official seal of office this 22 w day of 191 /
	County.
In what prison was he held?and when released?	County.
In what prison was he held?and when released?	Some Christiany, of tultary County.
Sworn to and subscribed before me, this that the day of the last o	County.
Sworn to and subscribed before me, this that the day of the light of t	NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do retently reservations are answered the Ordinary shall swear applicant and all witnesses in the following words "You do retently reservation to be provided." 2. All affiditive half her the whole cruits so help you don't
Sworn to and subscribed before me, this that the day of the last o	NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do retently reservations are answered the Ordinary shall swear applicant and all witnesses in the following words "You do retently reservation to be provided." 2. All affiditive half her the whole cruits so help you don't

****LIGHT PRINT AND. OR BAD COPY **** Lingson, Ga . May 15 - 1665. This is to costify that were to Alice by has this day been duly pareled by virtue of the terms of the surronder of Brig. Gen Wilford, C. I. od., and the Confederate Forces of Southern Georgia, to Brig. Gent I of adab. Il I i at Charen, Ga. May 1. 1st; not be take up arms against du que comment es the deast boutes, until duly exchanged fram Cheeret Perdetilation leafet whole Georgie - Carton County I. Gw Hundrick Ordinggo paid Caruly, to hurdry Certify That This XI Darley Da Iran of trustworthy Cheracle Whose statements are worthy of Cent who Miller toot the artours I which he Dwore to be toothis Ing hand and deal !. I Swiffindrick Ordings Bartin Coulding

Johns Ing hand and deal !. The not a remodely forms on size of technic set is to install a consect their such ones. the Hand Make a long as her less the man of a conse on a lang of the last control to less the form of Janguage part of a start of the first of the form of Janguage part of the start of the first of th



STATE OF GEORGIA, County.

WARRANT HANDED TO

RICHARD JOHNSON,

Geo. W Harrison, State Printer, Atlanta.

Kinsey, Stephen INDIGENT PENSION Gultan &

Name

County

Ground

STATE OF GEOR	· Cour	ity. }			
I,		of		hereby auth	norize
to receive and receipt for the p	ension allowed		he remit same to		
	at		by		
Witness my hand and s	ent this	day of		.1895,	
Executed in presence of	1)		,	
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		- /			
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\$ 12 E-1/20	3 M	2	4.14 RD JOI	AREANT BANDED TO	on, State !
16 F. 19.	0, 1)	RICHARD JOHNSON,	A ST	W Barris
1 3 2 3		D 7	4	3	de
17	ğ	County	A September 1	in a second	B1/21 S.J.A.

QUESTIONS FOR APPLICANT.
STATE OF GEORGIA,
County.
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 aworn true answers to make to the following questions, deposes and answers as follows:
1. What is your name and where do you reside? (give State, County and post office)
3. When and where were you born? It is not located to the state?
4. Did you volunteer in the Confederate Army or in the Georgie Militia & Confederate Army or in the Co
4. Did you wolunteer in the Confederate Army or in the Georgia Militia? Levy fire Militare. 5. When and where did you called? Land to Control of State of S
8. In what company and regiment did you enlist? Confear, & 16 1/10 Regiment
7. How long did you remain in that company and regiment? Itself the Classer Land
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? Theicher this ohen you to have produce
, ,
9. For how long a period did you discharge regular military duty? (Le 10) 7 Marga ha
10. When, where and under what circumstances were you discharged from service?
Surrender in south Sail Va
11. What is your present occupation?
12. How much can you carn per annum by your own exertions or labor?
13. What has been your occupation since 1865.
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? Cit Chinich cit (Notice 12 Ti; Cis Const first
15. What is your present physical condition and how long have you been in such condition? Tany for 6 (c) I also to ble to the I reasonable later for the
for three years all suffered with the whather
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"?
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? To leavy and
Sould at stand heat would farm blind and have to
years in back that legs
18. What property, effects or income do you possess? ☐ It to ex-
19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any
did you make of same? That Chairm to 1/d 1/e, of same
you it up for 1661. march 1895
20. In what County did you reside during those years and what property did you then return for taxation? So Harrier County 1999 For Pattern 1899 Rock For to 171 day Land
21. How were you supported during the years 1893 and 1894? Trease sent of land
,
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? The hereals of dellars I Couls but to retter with the

24. Are you married and have you a family? If so, is your wife living and how many children have you? Are you married and more you a manny is so, myour wise trong and now many consume nave you:

(ive age and sex of children and their means of support? I be a dead 2 2000

Acid Roading age 31 years orker larning age

Acid Roading age 32 years or her larning age 31 years or her larning age 32 years

Acid Roading age 32 years or her larning age 32 years or her larning age 32 years

Acid Roading age 32 years or her larning age 34 years or her l

23. What was your employment during 1893 and 1894? What pay did you receive in each year 2

) Line

25. Are you receiving a pension under any law of this State, if so what amount and for what disability?	
Sworn to and subscribed before me this the	ST
Mr. L. Golhom Ordinary	
of Fullow County.	
	of sa
QUESTIONS FOR WITNESS.	
STATE OF GEORGIA,	such
Fullying County	
as a witness in support of the application of Alexander State and County, baving been presented for pension	v_{**}
under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the	1.
following questions, deposes and answers as follows: 1. What is your name and where do you reside: 4. # feelle.	bis
True itec. Ce, Sec.	,3
2. Are you acquainted with how long have you known him?	anv
3. Where does he reside and how home has he been a resident of this State? (1 Carrier Ver	bein
1. Do you know of his having served in the Confederate army or the Georgia militia? How do you	
from the filling plas in sortice with	the
5. When, where and in what company and regiment did be entire? July 1864 Warren Co Da. Co D wil Regue west Ga Milyten 6. Were you a member of the same company and regiment? Some Reguered	
tion long and he perform regular military duty, and what do you know of his service as a Confed-	
erste soldier, and the time and circumstances of his discharge from the service? I i a fully 1944 to Level of a littode a good Soldier time	
Dent timore about his discharge has siek at home at	ST
8. What property, effects or income has the applicant? (Give your means of knowledge.)	2
he game up to his Creations	al
5. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition,	the r
he your cape ist of 1895 - Have rent from form who ist ?	line
10 What is the applicant's grapation and physical condition? I come to the straight of the ble Heller Heller california for the straight of the ble Heller Heller california for she was deared.	are c
	the
11. Is the applicant unable to support himself by labor of any sort, if so, why? It account of age of herewalisms and debelity	. before
12. How was he supported during the years 1893 and 1894? By reach from	retu
13. What portion of his support for these two years was derived from his own labor or income?	of p
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 over 74 Leves ple bry	
under the Act of December 15th, 1884? He is over 74 Sung plu Vary fee ble. and Suffers from Wheemalian Not able to be about good portion of The line	
15. What interest have you in the recovery of a pension by this applicant?	
Sworn to and subscribed before me, this	
the 2 day of Friel 1895.)	trae s
n.L. bulhom	

AFFIDAVIT OF PHYSICIANS.
/
STATE OF GEORGIA,
Factorio County.
Personally came before me le R Giles 1160. and
T. L. Philips 110., both known to me as reputable physicians
of said county, who being severally sworn, say on oath that they have examined carefully
B Races . applicant for pension under the Act of 1894, and after
such personal examination, say that his precise physical condition is as follows:
Enforces from Leveral debelity - action
in The hear + pulse fuelle Has Trad Vertgo for
1. or 12 Leans Surfer from Rhounds
back and lines tot asie to be at your
for the and the first asie to be and for the form of the time of the form of t
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
1 - Constant II
Swore to and subscribed before me, this the 22 day of April 1895.) On R. Asalhams On R. Asalhams
the 22" day of April 1895. 1 The Cliffon /1/2
m & Balann
Os dung
*/
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
Fullow County.
1, W.L. Worthson Ordinary in and for said County, hereby certify that
the applicant S. D. H. eller resides in said County, and was a bonn
the said visiting, and was a noise
fide resident of this State on the first day of January, 1894, and that the witnesses, viz: h. R.
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

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 Fullon County show that applicant returned for taxation in his name in 1893, of property, and in 1894,

Witness my band and seal of office, this 22 day of Full 1895.

Ordinary of Fullon Ordinary County.

NOTE.

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

	POWER OF	FATTOR	NEY.	
STATE OF	GEORGIA,			
	County.			
Ι.		hereby auth	orize	
	0			. 9
to receive and	receipt for the pension p	aid hereon and	request that he r	emit same to
		by		
at				
	ESS WHEREOF, I have		hand and seal, the	IS 2
day of		1807.		[L. S.]
				[16. 2-]
Execut	ed in presence of)		
		Ī		
		1		
(For Those Aiready Enrolled.)	Soldier's Pension.	County Tilling	RICHARD JOHNSON,	WARRANT RASTORD TO WARRANT RASTORD TO WO W. MARRANT RATES, TANKED. TO BELLE
F	ď		1	4

State of Georgia,)		
Coun	ւքը. }		
I.	hereby auth	iorize	
	of		
to receive and receipt for the per	ision paid hereon ar	ad request that he	remit same to
	by		
at			
IN WITNESS WHEREOF	t, I have hereunte se	t my hand and seal,	this
day of	1808,		
			[L. S.]
Executed in presence of	\ x		
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(For Those Already Enrolled.) NO. 38 7 INDIGENT INDIGENT 1898.	3.15	WAKKANT ISSUED	or Try
	318	WAKKANT ISSURD	WARRANT HANDED TO MARIE OF TATE PRINTER, A C. C.
1387 IDIGEN R'S PE	1. 4 %	1 0 °	A CONTER
	1364	IKA IRD	SANT.
The No.	12.32	CH/	WARI
	M	RI	130
20	Name (238
		. 11	111

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA, Ful fon County. personally appears S. Kinsey of Kul Fore County, State of Georgia, who being duly sworn, says on oath that he is a dana had gitizen and resident of said County and State, and has resided in said State continously ever since 1820; 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 La Milita) during the war between the States, and served for the term of Incontha in Company , of the Regiment of Starting that his physical condition is as follows: that his property consists of the following items Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th, 1891, 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 Lice Fore county been allowed a pension for the year 1896 Sworn to and subscribed before me, this, the first subscribed before me, this first subscribed before me, the first subscribed before me, this first subscribed before me, this first subscribed before STATE OF GEORGIA, Bullow County. Ordinary of said County, do certify that I am well acquainted with B, Stenkey applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be Given under my official signature and seal, this day of Carreers 1897.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fullan County.
Personally appears I linear of Fullow
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since theday of 1820; that he is 75 years old and
by occupation a Farmer ; that he enlisted in the military service of the Confed-
erate States (or of the State of Scorgia) during the war between the States,
and served for the term of 9 772 wor in Company & of / th Regiment of
Secretary ; that his physical condition is as
& Rollymation. vertigo- general
Muilite-
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 10th,
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 Guelle 222
county been allowed a pension for the year 189 7
Sworn to and subscribed before me, this, the
Sworn to and subscribed before me, this, the
Ordinary.
State of Georgia,
Fullow County.
I, HT Dursil Ordinary of said County,
do certify that I am well acquainted with The the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of
Ami
your ead bere.
Ordinary Free County.
Nork.—The blank spaces must be filled.

Nets-The blanks spaces must be filled.

by Witness my hand and seal this Executed in presence of	STAT	re of ge	ORGIA,	County.				
Witness my hand and seal this day of Executed in presence of		I,					, her	eby authorize
Witness my hand and seal this day of								na na Marena de Propinsi de la composición del composición de la c
Witness my hand and seal this day of Executed in presence of	о гес	eive and rec	eipt for th	e pension	allowed, a	nd request t	hat he r	emit same to
Witness my hand and seal this day of						at		
Executed in presence of	У							1899. 7
NO,					day	y o1		1699.
		Executed in	presence of		{			(L. S.)
					,			
IN I	(For Those Already Enrolled.)	Warren 1900	INDIGENT DIER'S PENSION,	1899.	0	WARRANT ISSUED	RICHARD JOHNSON, transition of Pensions.	WARBANT HANDED TO REMOVED

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

hereby authorize to receive and receipt for the pension allowed and request that he remit same to Witness my hand and seal, this 1901. [t., s.]

Executed in presence of

SOLDIER'S PENSION INDIGENT 1901.

WARRANT ISSUED

JOHN W. LINDSEY,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, FULTON County.
Personally appears S. C. M. 264 of FULTON County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the day of 1820; that he is 79 years old and by occupation a Communication in the military service of the Confederate States (or of the State of 1820) during the war between the States, and sgrved for the term of 920000 in Company of 1840 in
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
to control for the year 1000. I have heretolice as a resident of
Sworn to and subscribed before me, this, the
Sworn to and subscribed before me, this, the
1890. Starter Ordinary.
State of Councie
State of Georgia,
FULTONCounty.
I, W H. HULSEY. Ordinary of said County,
do certify that I am well acquainted with 5. The the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this 1804
day of
{ mix mail her.
Ordinary FULTON County.
Norπ —The blank spaces utus be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, Fection County of Fretton County, personally appears Stephen Kinny of Fretton County,
personally appears Stephen Curry of Feeting Courses
County, State of Georgia, who being duly sworn, says on oath that he is a bona nde citizen
and resident of said County and State, and has resided in said State continuously ever
since the 3/ day of DEC 1870; that he is 80 years old and
by occupation a that he collected in the military and fine Co.
federate States (or of the State of
States, and served for the term of the state of the Company of the War between the States, and served for the term of the states and served for the states and served fo
of General condition is as
Grand disability
that his property consists of the following items
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1901. I have heretofore as a resident of Auction ((arrent country been allowed a pension for the year 1900
Sworp to and subscribed before me, this the Stiplem's Kinony
John R. 119 Cl Rice von Ordinary.
STATE OF GEORGIA, County. I. John R Wilking on Ordinary of said County. do certify that I am well acquinted with Stythm Drivery the
do certify that I am well acquired with Stylund Sincery the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents houself to be
and that he resides in this County.
Given under my official signature and seal, this
day of Jan 1901, 1901 Karena County. Note - The blank spaces note to filled
Note - the bank spaces and the men

STATE OF GEORGIA,

			, C	ounty.							
Ι,	-				he	ereby	authoriz	e			
to receiv	e and	receipt	for the	pension		and	request	that	he	remit	same to
by				A 44.5	-	6				1	വാ
W	itness	my hanc	and se	al, this		ay or					[L. S.]
Exe	cuted	in presen	ce of								
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OLLED.			1019		X JF	9		1905	Penalona.		
E		E	E	Ai	3 3.	3	JED		INDSEY, Commissioner of Pension	D TO	U F HATTOON, State Printer, Atlanta.
CODE SECTION 124.	33	INDIGENT	S PEN		On.	Regiment	WARRANT ISSUED	X	JOHN W. LINDSEY	WARRANT HANDED TO	ate Print
AR SE	13	DIG	38	6	Fulton	Re	ARRAN	1	N.	RRANT	Marrison, S
THOSE	No.	E		-	4.	7 2	×		јон	WA]	Geo. W. F
F08			70		Name	200	\$				
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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA	A , /
Fulton. Co	ounty.
Personally appears 11/8	insay of HILLON.
County, State of Georgia, who being	duly sworn, sws on oath that he is a bona fide citizen
and resident of said County and S	tate, and has resided in said State continuously ever
since theday of	1820; that he is 8/ years old and
by occupation a Karinin	that he enlisted in the military service of the Con-
federate States (or of the State of	Georgea) during the war between the
	Mustkin Company Joi / th Regiment
of geargee	; that his physical condition is as
follows:	l Schiller
Chuiral	a chilly
The state of the s	
that his property consists of the foll	owing items
PO 0.000	
of the value of	Dollars, that by reason of his physical
that he receives no pension but the or	o support himself by his own exertion or labor, and
	in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereo	of, and makes application for the pension to which he
is entitled for the year 1902. I have	e heretofore as a resident of
county been allowed a pension for the	
Sworn to and subscribed before n	ne, this the
14 day of fine	1902.
0.12/11/14	vnsow. Ordinary.
SPACE OF GRORGIA	move
Full County.	}
I John R. Wilkinson.	
do certify that I am well acquainted	J. J. Charley of Said Charly,
	t, and am well satisfied that the datements made by
him in his said affidavit are true, and	I know he is the individual he represents himself to
be and that he resides in this County.	s spread minsen to
Given under my o	official signature and seal, this
day of free	unary 1908
Amx your peal }	PASTIKINION.
here	John Marin
Nove.—The blank apage	os must be filled. d nor be attested before January 1st, 1902.
HOTE A MICAVIT about	nor be attested before January 1st, 1902.

Given under my official signature and seal, this 14 day of farmay 1908 County. Note.—The blank spaces must be filled. Note.—Affidavit should not be attested before January 1st, 1902.

Georgia, Hann County.

I the undersigned do certify that Stefohers Tinny now of the

Fretin

is the same person who as Indyend

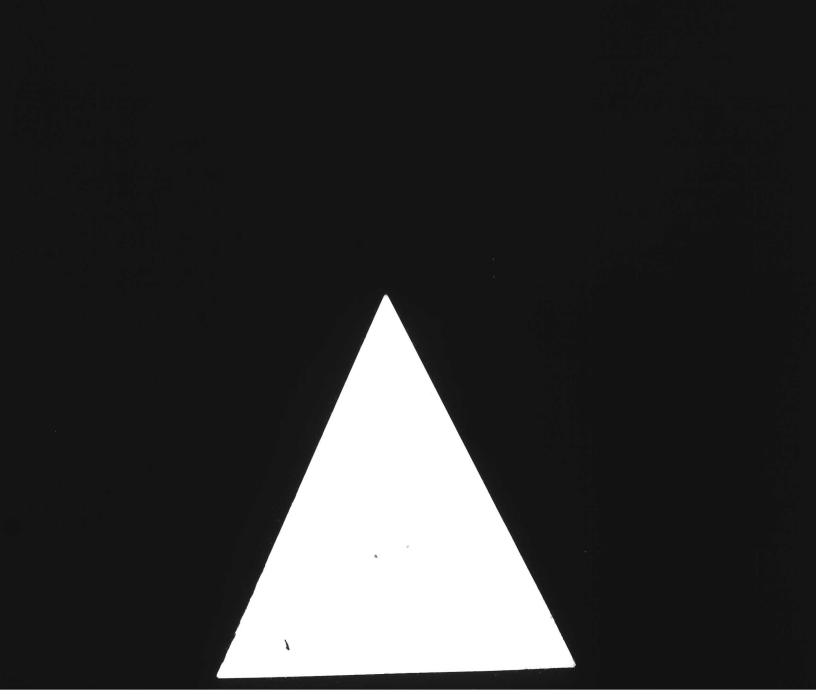
pensioner was on the pension rolls of this county, and drew a pension of 60 dollars

for 1900, and the bearer is same man.

Given under my hand and official seal of office this Jan 11 17 1901

Pmstig [L.S.]

SEAL.



Widow's Application Under Act of 1910-As Amended by Act of 1919, and Constitutional Amendment of 1920. County Falton Name Mrs Louls Hambin Furky Widow of John Marion First Date of Marriage Degust 4 18.73 Company H No. Carolie Approved Roden Laurence Pousion le ommissiones

Ordinary's Certificate

she is the person she represents herself to be, and that she has

Ordinary of said County, do certify the applicant for pension; that continuously, a bona fide resi-

County and wer duly sw dent citizen of said State since January 1st, 1920; that

(SEAL OF ORDINARY) Given under my hand and official seal of office this

ful and trustworthy and

statement are entitled to full faith and cred

ror nustand; that both of them are now resident of said below sgaing the foregoing affidavity, and that there we truth-

in the following you and the evi-

County.

the back of the application carefully. e the bulky form of Marriage Certificate

4-24-316

JOHN W. CLARK,

Commissioner of Pensions.

Widow's Application JOHN W. CLARK, sioner of Pen nder Act of 1910—As Ame 1919, and Constitutional of 1920.

Ordinary's Cartificate

/ Ordinary's Certificate
STATE OF GEORGIA,
Tullon GOUNTY.
1 Cros Ht & affice Ordinary of said County, do certif
that I know Hos garely Hamlin lirby the applicant for pension; that
she is the person she represents herself to be, and that she has been, continuously, a bona fide resi
dent citizen of said State since January 1st, 1920; that I also know
the witness who swears to the service of husband; that both of them are now resident of sai
County and well duly sworn by my before signing the foregoing affidavity, and that there is truth
ful and trustworthy and their statements are entitled to full faith and credit.
Given under my hand and official seal of office this day of Coffee 1921
(SEAL OF ORDINARY) MILE OF ORDINARY, Ordinary.
The state of the s

INSTRUCTIONS:

INSTRUCTIONS:

1. Before any questions are enswerechth. Ordinary shall sever asplicant and the witness in the following worths: "You do solumnly sever that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you Govern the properties of the pr

403 Linden avg n.E.

APPLICATION FOR PENSION BY A WIDOW

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,
Fulton account
COUNTY.
Personally appears before me, Mrs. Louds Hamlintury of said State and County
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and
the Constitutional Amendment of 1920, and submits testimony to support the same, and after being
duly sworn true answers to make to the questions propounded, answers as follows, to wit:
1. What is your name, and where do you reside? (Give Post Office and County)
Loula Hamlin Straty - 403 Linden avenue H. & Wlante, George
2. How long and since when have you been, continuously, a bona fide resident citizen of the
State of Georgia? Jon 19 3care - From March 1912
to Upril 1931
3. When, where and to whom were you married? Quant 4, 1872
Gelenville County - S.C John Marion tirty
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 Con-
federate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel
and Captain) Enlested July, 1862 - in Caldwell County, no car-
try Company # - 58 Regiment Col John B. Eliver - Capt & M.J.
5. When and where did the commands of your husband surrender or discharge from the Serv-
ice? Greensboro, N. C- May 2-1865
6. Was your husband personally present with his command when it was surrendered or dis-
charged? No
-7. If he was not present, state specifically and clearly where he was? In prison - Alton, J
8. When did he leave the Command?
a. For what cause did he leave?
b. By whose authority did he leave?
e. For how long was his leave of absence granted? In what way?
e. What was his physical condition when he left his command? Health for ?
A. 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? In what prison was he held and when was he released?
Battley Resacca (Georgia) alton, Illinois - May 22, 165
j. When and where did your first husband die? In attevilled. S.C May 1-1911
k. Were you residing together when he died?
If not, how long have you resided apart?
m. Are you now a widow? 12 Car
9. Have you or your husband heretofore been paid a pension by the State?
If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me, this the
day of Jene 1923 Mrs was Hawtin Kerby
Whise R Marbutordinary Applicant
Fillon Tom
(SEAL OF ORDINARY)

	Questions for Witness as to Service of Husband and Marriage
S	TATE OF GEORGIA, South Carolina
	asteville county.
	Mix Comic Namlin of said State and County is hereby presented
a	s a witness in support of the application of Mrs. Louds Houlin First for the pension
	rovided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of
	920, in and State, who, after being sworn true answers to make to the questions propounded, an-
	wer as follows, to-wit:
	1. What is your name and where do you reside?
***	appeolle #C
	2. How long and since when have you known the double Start applicant
	3. Where does she now reside, and since when has she been, continuously, a bona fide, resident
ci	itizen of this State? Non Resider in attante thorque - June Harch 1912 -
	4. When and to whom was she married laugh 1872 How do you know the redding
	6. How long and since when did you know the hard her her
h	6. When and where did will have Manager Light
ti	he husband of applicant, diet Mary 7-1911 (the terrible , 3.C.
d	7. Were the applicant and her humband living together as husband and wife at the date of his eath?
a	DALIT FACTORIA
	8. If not, bow long did they live apart before his death?
W	Vere they divorced?
	9. When, where and in what Company and Regiment did John Marion Ruty enlist?
(Give date and place) July 16-1862 in Caldwell County or. C.
Enlistes (1)	10 How did you obtain your information of this service? From That Department in That her glay
	11. How long within your personal knowledge did he perform actual military service with this
Reland C	company and Regiment? (Give dates.) Thouse le du from Nark to De. He was
7	12. When and where was his Command surrendered or discharged? (Give date and place)
Thems	
25	13. Were you personally present with this Command when it was surrendered? Lo
M	(not, where were youand how came you there?
***	14. Was the husband of applicant conversally assent with his Command at its service of the
14	14. Was the husband of applicant personally present with his Command at its surrender?
	When, where and for what cause did he leave his Command? (Give date.) Caleture
	the state of the s
	nd how long was he granted leave?
	low do you know all that you have stated to be true? (If of your own knowledge, state clearly and
	pecifically) Orom Than Department, in That hunglo, De
	15. For what cause, if you know of your own knowledge, was he prevented from returning to his
c	ommand? In friston
	16. What effort did he make to return to his Command and how do you know this
,	17. Was he captured as a prisoner? Hex. If so, when and where? May 15, 1864-27 Reserved
Ir	n what prison was he held? Alton, Illinois and when released? May 22, 1865
	Sworn to and subscribed before me, this the (min) Bolling and in
	15 they of april 1931 (Witness)
4	elian B. Corwordkary.
<i>)</i> 4	abbuille - county.
1	(SEAL OF ORDINARY)
/	So. Car.
1	

-

Sworn spand subscribed before me, this the 15 day of 2011 1981 So. Oar. Application for Pension Due Deceased Pensioner (UNDER ACT 1904) (To pay expenses of last illness and funeral) Date of Death July 16 Approved and ordered paid APPROVED OF PAYMENT

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APPROVED PAID TO ORDINARY ON THIS CLAIM: not on in

John Marion Firty died at abbeville. S.C.,

THE ADJUTANT GENERAL'S OFFICE

REPER TO ORD

WASHINGTON July 26, 1930.

Respectfully returned to

Hon. R. Burton Hicks, Office of Probate Court, and Children's Court, Spartanburg, South Carolina.

The records show that John M. Kirly, also borns as Marion Kirby, not found as John Marion Kirby, private, Company M. Schi Regiment North Carolina 16thatry, Confederate States Army, enlisted July 16, 1868, in Caldwell County, Muster roll for May 1, to August 51, 1864, last roll on file, shows him absent, missing on the retreat from Dalton May 15, 1864, Supposed to be prisoner of the Tracords show that he was captured at Resacca, Georgia, May 15, 1864, and was released at Military Prison, alton 1111nois, May 28, 1865, on Annesty Cathlakso shown as released May 22, 1865). Place of residence at enlistment shown as Colmell County, North Carolina, and at release wished transportation to Hickory Station, North Carolina, and at release wished transportation to Hickory Station, North Carolina

th Original Seneral.

The Adjutant General.

By O. L.

Please return to Mrs. 30 Kirty. 109 West Henry South Spartautury of

109 West Henry Street, Spartanourg, S. C., Nov. 21,1938.

r. L. Thos. Gillen. Director Jo federate Division. State Deb't. Public Welfare. Burt Bu'ldi s. Atla ts. Ba.

Dear Ir. Gillen:

Enclosed is a statele t from clerk of Courte office to the effect that I amedie help of my brother, Walter Darion Wirney, who died August 13, 1935.

This per your request of Tovember 1d. 193d.

ry Truly yours.

(188) Florence Kirby.

E .. 01.

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, Quelton Personally before me, the Ordinary of sain	d County, comes D. C. Saparata of
was on the Pension Roll of said County at the	e time of death, which occurred in Sulfax.
County, in this State, on the	day of July , 1932,
	d no estate of any value sufficient to pay these funeral
ITEMIZED hereto attached.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Sworn to and subscribed before me, Sour College County (Seal of Ordinary)	Owby Lowndes Co

CERTIFICATE OF ORDINARY

GEORGIA Quelon County.
I. Ordinary of said County, do certify
that I personally know 119 D. Bagnuary , who is a residen
citizen of said County, and that said person is of truthful and trustworthy character, entitled to ful
faith and credit; that I also knew Lula A Nerby while in life and that this was
the same person whose name appears on the Pension Roll of Queston County, and
was paid a Pension of That ty # (\$32.) Dollar
in said County for 19.3., and I now believe said pensioner to be dead; and that the instruction
at the foot of this voucher have been carefully observed in making up this voucher and the bill
which are attached hereto.
Given under my hand and official seal, this

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:

(Seal of Ordinary)

"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may be) of....., who died without owning sufficient property to pay this bill.

3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neathy 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 hills, properly receipted, to the Pension Department.

6th. Ordinary should see that the back of this blank, when folded, is filled out.

Spartanburg, SC Dec 2 1938

Received of Ihos. H. Jeffries, Ordinary of Fulton County, Ga. check for \$50.60 to apply on funeral expenses of Mrs. Lula H. Kirby, a deceased pensioner of Fulton County, I certify that this amount was advanced by me; that I have never been repaid and that this amount is now due and owing to me.

Tim Domakery

Mr. G. H. F. Harper Har Captain of Co Ht ret time of culistiment. He Was promoted to Thajon. Maj Harper dies only a few hard ago. They M. D. C. application Hanks Were Signed by him and a Comrede. A. A. Griffen - (It Sensin N.C.)

JOB. W. AWTEY, PYRA & TYGE.
PRINCE IS A TYGE.
AWTRY & LOWNDES COMPANY
FUNERAL DIRECTORS

AMBULANCE SERVICE
21 Cain Street, N. W.

Mr. Walter M. Kirby

IN ACCOUNT WITH

403Linden avenue N. E Atlanta, Ga.

Date of Death July 16th 1932 8 Funeral expense of Mrs Lula H. Kirby

One Complete Outfit. \$235.50

Personally appeared T.C. Bazemore of Awtry & Lowndes Co. who testifies that the above account is just, true and unpaid.

ATLANTA, GA. 7/18/32

ACDELLUOR

Sworn to and subscribed before me this 18th. day of July, 1932.

C.C. ORDNARY

STATE OF SOUTH CAROLINA

COUNTY OF SPARTANBURG.

Personally appeared before me Mrs. Eva Kirby Kirby, who being duly sworn says that she is one of the heirs of Walter Marymm Kirby, deceased, and that she agrees to turn over all further claims that she may have in his estate to her sister, Miss Florence Kirby; and further states that her brother, W.L. Kirby, has already stated that he renounces any claim that he may have in the said estate to his sister Miss Florence Kirby.

Sworn to before me this 21st day of November, 1938.

Seal)
Notary Public for S. C. and
Clerk, of the Probate Court.

Mrs. En Kil King



Department of the State Auditor Raleigh, N.C. March 10, 1931.

Ers. C. C. Kirby, 109 West Henry Street, Spartanburg, S. C.

My dear Mrs. Kirby:-

I have your letter in regard to pension for your mother, Loula Hamlin Kirby, widow of John Marion Kirby of Co pany H...Sen Regt. N.C.S.T.

The State of North Carolina pays a pension to the widows of ex-Confederate Soldiers, but only to those who are and have been for 12 months next preceding the date of their application bona fide residents of this State.

This State does not require that a Confederate Soldier when entering the service must have enlisted from North Carolina to creder that he or his widow might be eligible for a pension. The fact that he was recognized as an enlisted man in the Confederate Army on a commissioned officer in the Confederate Army entitles him to consideration. It was the impression of this Department that all Southern States reciprocated in this particular-that where a Soldier enlisted in some other State and since the War has made his home in North Carolina, upon satisfactory evidence that the Soldier was a bona fide Confederate Veteran North Carolina recognized him and allowed him a pension. We have a number of pensioners on our list who went into the Confederate Service from other Southern States, and we have a number of North Carolina Soldiers on the pension roll in other Southern States.

As your mother lives in Atlanta she is not eligibles for a pension in North Carolina.

I am returning herewith the letter from the War Department in Washington as requested.

Yours very truly,

Baxter Burham, State Auditor, Chief Clerk Pension Bureau.

A	OL	rtif	ir	ttp

STATE OF GEORGIA, County of

IN RE: Expenses last illness and funeral Mrs. Lula 2 - Kirby

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

- 1. Died inside of the State of Georgia;
- 2. Left no estate of any kind or value, sufficient to pay these expenses.

This the 16 day of lung

(SEAL)

(SEAL)

Thinis

, Ordinar

(Ordinary will please complete and return immediately to A. L. Henson, Director, Veterans George Office, State Capitol, Atlanta, Ga.)

A Certificate

Implicate

STATE OF GEORGIA, County of

IN RE: Expenses last illness and funeral Man Sanda. A Confey of certify that from an examination of the records in my office, and from mersons

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

- 1. Died inside of the State of Georgia;
- 2. Left no estate of any kind or value, sufficient to pay these expenses.

This the My day of Aug

,19

Ordinar

22 40 52 52

(Ordinary will please complete and return immediately to A. L. Henson, D.

Application for Payment of Expenses of Last Illness and Funeral

(Under Act of 1919) (To be disbursed by the Ordinary)

Fulton

GEORGIA

and the same of th
Before me, the Ordinary of said County, comea. (X1es) Florence Firby
of said County, who, after being duly sworn, on oath says
that he knew
erate pensioner, and that said person is the identical person named and described in the attached cer-
tified copy of burial certificate; and that said pensioner LEFT NOWEDSWAND ESTATE of ANY
KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted to the
sum of \$, as shown by sworn statements FULLY and COMPLETELY ITEM-
IZED, hereto attached.
Sworn to and subscribed before me, this the 4 day of date 1986. Miss Former Terry
Jafering Colory Polary
CEPTIFICATE OF THE OPDINARY

AWARY & LOWNDES CO.

FUNERAL DIRECTORS.

АЛЬДЫПА. GA... November/10/1938/

Confederate Division, State Department, Public Welfare,

Room 406, State Capitol,
Attention Mr. C.L. Pearlstiene,

Atlanta, Ga.

Dear Birt----

Mrs. Lula Kirby died July/15/1952/ Funeral account

was \$255.50, for which Mr. Walter M. Kirby gave a 90 day note, we discounted it at the bank, and we seem

90 day note, we discounted it at the be

So we presume either Mr. Kirby; or some-one paid it before maturity date.

Trusting this will give you the information you

Very Cordially,

JWA-H.

desire, we are

RECEIV -

J.M. quiting

FRANK B LOWNDES.

GEORGIA



November 23, 1938.

Hon. L. T. Pat Gillen, State Capitol, Atlanta, Ga.

Dear Sir:

In re: Funeral claim Mrs. Mrs. Lula H. Kirby.

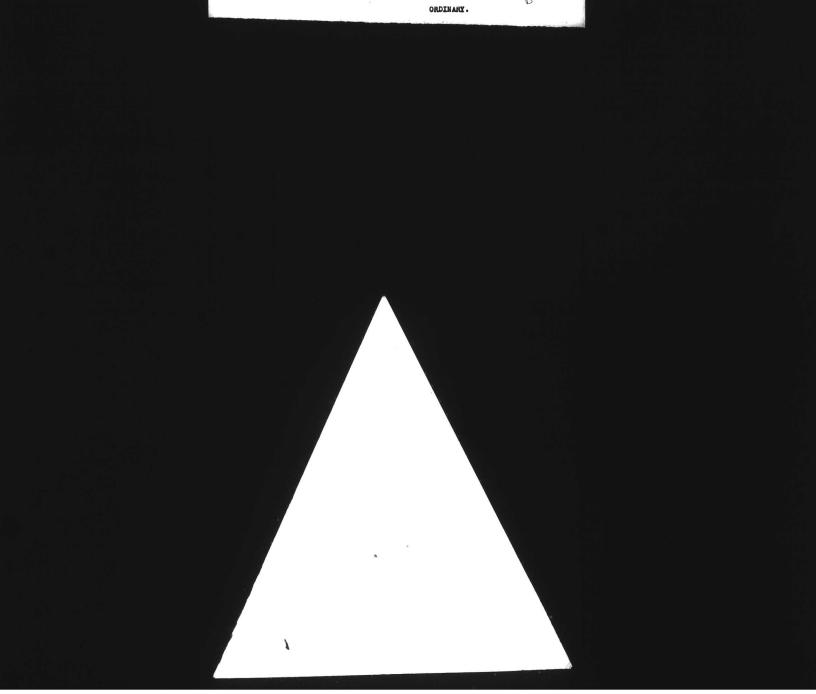
Kirby Kirby, agreeing to the transfer of payment of this claim to Miss Florence Kirby, and ask that you attach this transfer to the original claim, with the other information regarding the payment made to Awtry & Lowndes by W. M. Kirby, and the subsequent death of W. M. Kirby.

In view of this record, I am of opinion that payment to Miss Florence Kirby would be in order.

Very truly yours,

This Bleffuis

ORDINARY.



No.

INDIGENT PENSION,

1900.

Name F Reichter

County Fullow

Approved 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

OF GEORGIA,

Power of Attorney.

STATE OF GEORGIA,

1,		of		hereby authorize
receive and receipt for the pension all			same to	
	t		by	
Witness my hand and seal, this		day of		1900.
P	0.000			[L. 8.]
Executed in presence of				
				*
				/
a 7 T T T T T T T T T T T T T T T T T T	mente mar construction of			
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make the second of the second	-industrial District	10年の日本マー・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	THE TOWN THE	A ANGEL CONTRACTOR
	Al.	9		M 1
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	*	11	Pen.	
2 6	14	12 2	SE	E
NT PENS	4 4	4	OHN W. LINDSEY Commissioner &	WARRANT HANDED
	73	3	LI	
2 1	kn	7	₩.	
田田 日	1	M	2	AR BR
	N	The same is	B	B

Questions for Applicant.

3171	Fullan Sounty
Z	Equity)
to avail b	of said State and County, desiring
sworn tru	nimself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly no answers to make to the following questions, deposes and answers as follows:
1. Wh	sat is your name and where do you reside? (give State, Coupty and post office) I Kirchen,
No. 9, 1	Lippen street allant, tulton County, Grongin
2. Ho	w long and since when have you been a resident of this State? Work Sight gran.
since	april 121852
3. Wh	en and where were you born " September 12 4/830 mm Francy
	en and where and in what company and regiment did you enlist or serve? Office 1861
Comi	ston, to Company H 3d Son Regiment- Served in Virginia
	The state of the s
5. Ho	w long did you remain in such company and regiment? Ever Enlistment to sur-
- rend	as appointer
6, Wh	en and where was your company and regiment surrendered and discharged? Character
-tox	Va. al- Leis surrender
j	
7. We	re you present with your company and regiment when it was surrendered?
8. If r	not present, state specifically and clearly where you were, when you left your command, for what
cause and	by whose authority? see #7 abm
9. Ho	w much can you earn (gross) per annum by your syn exertions or labor? Wolfing
10. Wh	at has been your occupation since 1865? hormaker
	on which of the following grounds do you base your application for pension, viz: first, "age and
	second, "infirmity and poverty," or third, "blindness and poverty"? serfermit and knowle
12. If u	upon the first ground, state how long you have been in such condition that you could not earn
your supp	port? 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 ? The ave-
70950	so Fill and broke bows of by at right fort august 11 4 1900 am
Morro	- oruteher unable to get or if I had to perform, any
work	at all
13, Wh	at property, real or personal, or income, do you possess, and its gross value? Itum no
prop	rety and no income whaterer
	at property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and
what disp	position, if any, by sale or gift, have you made of same? Had no probate in any
of year	a mentioned but made a living and some asked alma of any
out in	what County did you reside during those years, and what property did you then return for taxation?
15. In v	what County did you reside during those years, and what property did you then return for taxation?
	land in attanta Continuously smal 1865
16. Ho	w were you supported during the years 1898 and 1899? By my on work.
17. Hov	w much did your support cost for each of those years, and what portion did you contribute thereto
	own labor or income? My expense ward small, I same it all
18. Wh	at was your employment during 1898 and 1899? What pay did you receive in each year?
M	wormaking a Mpaining theft no books
	we you a family ! If so, who composes such family ? Give their means of support ? Have they
a homeste	end? Um a batchelor. alone without array one to help
me,	
20. Are	you receiving any pension? If so, what amount and for what disability? (a) two.
21. Hav	ve you ever made an application for pension before? Wy
22. Hov	w many applications have you ever made and under what class? Next make any
	a t
Sv	rorn to and subscribed before me this the
17	day of 22 1900.
//	
:4: 41	The many
30	of County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,
Julton COUNTY)
9
D. B. Lang ton of said State and County, having been presented
as a witness in support of the application of T. Nevelier 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? Atlanta. Sa
1. What is your name and where do you reside? Attauta. Sa
2. Are you acquainted with A to , the applicant; if so,
how long have you known him? Shirty - nine years.
3. Where does he reside, and how long and since when has he been a resident of the State? Atlanta. Sa. Shorty nine grass. or longer
When where and in what company and regiment did be enlist, and how do you know?
They - 1861 Committee Co St 3 da Regt. I was marker of the Were you a member of the same company and regiment Not of Co but of Regular.
. Were you a member of the same company and regiment? Not of Co- but of Regular)
6. How leng did be perform regular military duty? May = 1861, to Surrender of Guele
7. When and where was his command surrendered? Appointion CH Ya
8. Were you present when it surrendered? No
9. Was applicant present? 44.4.
10. If he was not pre-ent, where was he?
When did he leave his command at Juriouser For what cause?
By what authority he left? - How do you know all of this?
I was Explain of Co'h of same Command of Known he diemendered at Apparenting from reliable members of Command
11. What property, effects or income has the applicant? (Give your means of knowledge) Notice. I have thrown him have 1961, he states the fact y I have three things to be
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? I don't think he had any but what
he made by manual later -
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?
11. What is the applicant's occupation and physical condition? Shormaker
a cripple from having his beg twice broken brides
15. Is the applicant unable to support himself by labor of any sort, if so, why? I thenk do
being a shoe maker" the only business he is a concinted with "
he can not in this condition work at his trade
16. How was he supported during the years 1898 and 1899? by his own labor
17. What portion of his support for these two years was derived from his own labor or income?
all with the exception of the last & months
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension
under Section 1254, Code? Broken lubs and old age
19. What interest have you in the recovery of a pension by this applicant?
Sworn to and subscribed before me, this D. B. Langular
the 17 day of Zera 1900. Witness.
Trother Ordinary.

AFFIDAVIT OF PHYSICIANS.

1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You be used to seek to seek of the questions asked of you, and the avidence you shall give will the whole truth, so help you God," Additional diffactive may be attached it thanks speace are insufficient.

5. In every case the Ordinary must certify to the character of the winess, and as to the execution of the proof as above set.

~
QUESTIONS FOR WITNESS.
STATE OF GEORGIA,
Muston COUNTY.) ———————————————————————————————————
as a witness in support of the application of
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? A. S. M. Lesy.
2. Are you acquainted with the History County Secure
how long have you known him? I have known him eng An a 1858
3. Where does he reside, and how long and since when has he been a resident of this State?
When, where and in white-purpay and regiment did be officed, and how do you know? We exclusted in Ulfred 1866 at Covereston Co Co 3 od I Ja R
5. Were you a member of the same company and regiments. I was
6. How long did he perform regular military duty? Hor four guting of land
7. When and where was his command surrendered? At afformation 6.16 Virginia in april 1865
8. Were you present when it surrendered?
9. Was applicant present? Ree was present
10. If he was not present, where was he?

Jes. M. Roya

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 and 1899, and what

13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?

45. Is the applicant unable to support himself by labor of any sort, if so, why?

16. How was he supported during the years 1898 and 1899 ?____ 17. What portion of his support for these two years was derived from his own labor or income? 18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension

14. What is the applicant's occupation and physical condition?

19. What interest have you in the recovery of a pension by this applicant?_____

(10. If he was not present, where was he?

When did he leave his command? By what authority he left?

disposition, if any, did he make of same?_

under Section 1254, Code ?____

Sworn to and subscribed before me, this)

and ender the guestions from the for full faith that his abotemants are entitled to full faith and and and and the Bally then well soon - only of her to be for the bally

Kircher Prani

COUNTY Pulton

WHEN AND WHERE BORN? Sept 18, 1850 - Corner

ENLISTED WHEN AND MERE? April, 1861 - Covington, Coorgia

RAIK

COMPANY AND REGIMENT? So E and So Rogto

NAME OF CAPTAIN AND COLONEL?

WOUNDED?

CAPTURED, WHEN AND WHERE?

RELEASED.

WHEN AND WHERE SURRENDERED?

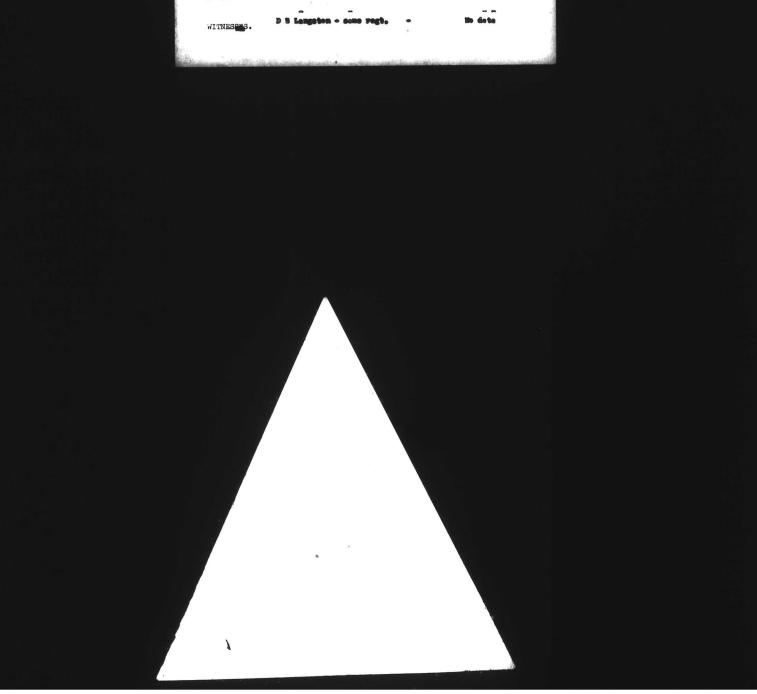
IF NOT PRESENT AT SURRENDER, WHERE WERE YOU?

DIED, WHEN AND WHERE?

BURIED.

D B Lengston - some reg

Ho det



ACT DEC. 16, 1901.

No.

WIDOW'S PENSION,

1902

Mr. Mary Jane Kirais Warrant issued

and handed to

J. W. LINDSEY, Commissioner of Pensions,

POWER OF ATTORNEY.

STATE OF GEORGIA,

	STATE	OF GEO	RGIA,	1					
			COUNT	y.∫					
	Ι							bereb	authorise
						of			
to r	eceive and	receipt for the	pension al	llowed	and request th	at he remit same	to		
	Witness n	y hand and sea	l this		day of			190	
	Exec	uted in presenc	e of						
						ch in			[SEAL]

So Co		WIDOW'S PENSION,	Jose Kneiss willow with their	190		LINDSEY, Commissioner of Pensions,	on, Hate Printer
State of 1911	Š.	WIDOW'S	1900 Illany for Soung of All	Varrant issued	od sammer pa	J. W. LINDSE	9/15-490 S

WIDOW'S AFFIDAVIT.

" " " " " " " " " " " " " " " " " " " "
STATE OF GEORGIA, Personally came Mrs. Mentha fine Hire
A well
COUNTY OF who says on oath she is the
widow of Catro on Nathanil Kinery to whom, in the County
Gronned State of Ga , she was married on the
TO CAN BE THE PROPERTY OF THE
26 h day of DEC 186/, that she remained his wife up to the 2/h
day of Jug, 1902, at which time he died, and that she has not since marries
At the time of his death he was a resident of Alterna Jutter County, in said State
Georgia, and was on the But i gent pension roll of the State of Georgia, having been allowed
a pension of 8 60 per annum on account of being a soldier in Company
gth Regiment, artilley Volunteers or State La
What affliction have you and bow does it effect you? Ald age, general debuly
A STATE OF THE PARTY OF THE PAR
What have you been doing to earn a support since 1st of January, 1900? Nothing
What property or effects had you on let January 1900? NOW
What property or effects had you ou 1st January, 1906? Rone
* 7
What have you acquired since, and what income have you now? Home
What disposition have you made of any property since 1st January, 1900, and at what price and for what purpos
none nothing
Deponent further says that she is now a resident of Munita Pallon County and h
Depondent sortiact eagle sand and is now a restricted of the particular of the parti
continuously resided in the State of Georgia since the Ull day of Mi defe 18
She applies for the pension provided by Act of the General Assembly, approved December 18, 190k.
Sworn to and subscribed before me this // the day of Stepel 1902
. ,
700 10 10 11.
Marcha Jane her Busin
Martin Jane her Kirsin
Marcha Jano her Kiscu. John Will Will Franco

Note.—All blank spaces must be filled before signing

AFFIDAVIT FOR THREE WITNESSES. STATE OF GEORGIA. | Personally came Steplen Reagan COUNTY OF Fullow __known to me to be reputable and truthful person who says on onth that from his own personal knowledge Mrs. Many James Kinoung who made the foregoing affiliavit is the widow of P. N. Har car; who died in Fully County and State of _____ 21 day of Ausq . 1901 , and that she has not since married, that she became his wife on the 3/ day of dlear, 1861, and to remained up to the time of his death and that she has resided in this State continuously since the With what affection does she suffer? all age and own they What property or income had she on 1st January, 1900? What has she in her possession and control now " Zone How negotic supported in 1900 and 1901 by humbourds pension of pers children. I have no personal interest in the pension asked for Swind subscribed before methis day of Fifth Wilking County, Georgia. PHYSICIANS' AFFIDAVIT STATE OF GEORGIA. m Sarcher md and ISY-Car mo physicians, who say on eath that they personally know Mrs Kurand mentioned in the foregoing affidavit, that she is permanently afflicted with (state disease and how it prevents her earning a support). Eld age and physically unably Is make a supple

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

State of Georgia, hereby certify that I am acquainted with Mrs. Many Jame Ruceus
the applicant for a pension in this dase, and know from my new knowledge, or from positive proof presented to me
by reputable witnesses) that she resides in this County, and that she has resided in the State of Georgia continuously
since the date. I also certify that the witnesses, to wit:

State since that date. I also certify that the witnesses, to wit:

Duepton

whose testimony she
presents to sustain her claim, are known to me to be truthind votoesses, entitled to tall faith and credit as such,
and that the full text of the affidavit was read to and understood by them before same was signed. I am fully
satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses to read or hear
read the proofs they sign.

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

NOTES.

The pension is only payable to those widows whose husbands were on Pension Roll at the time of death. The marriage must have existed at the time husband was a soldier, and the widow must have remained unmarried since the death of such husband.

Proofs by one witness and two physicians will be accepted when it is shown that the same can not be furnished, but all cases the best proof accessible will be required and it is incumbent on the applicant to make out a clear case covering the above points.

Affidavits must be made in presence of the Ordinary

I,	, hereby authori
	of
o receive and	receipt for the pension paid hereon, and request that he remit same
In Witn	ness Whereof, I have hereunto set my hand and seal, this
ay of_	1903.
	[L. 8
Executed	d in the presence of
ı	
	My nuty, nuty, neent ment
	SION, 1903. 1903. County, Regiment 7, 1, 1903
60 4	PENSION, Dec. 31. 1903. To County, Regiment LINDSEY, Commencer of Persons, T ISSUED 3. 2. 1903 T SEUED 3. 3. 1903
9 03.	ICENT S PENSION, ading Dec 31, 1903. PAID TO OF County, Commenced Persons, Commenced Persons, ANT ISSUED 1903 1943 1903
ă.	SSS SS

eng my amy

POWER OF ATTORNEY.

STATE OF GEORGIA,	County.		· .
Ĭ			hereby authorize
	of		
to receive and receipt for the	pension paid hereon.	and request that	he remit same to
	at		
IN WITNESS WHEREOF, I I	ave hereunto set my h	and and seal, this	
day of	1904.		
Executed in presence of			[L. S.]

1904.

TO THOSE HERETOFORE PAID.

INDIGENT

WIDOW'S PENSION

FOR YEAR ENDING DECEMBER 31, 1904

PAD TO

THUS STATE

THE STATE

WARRANT ISSUED

(14 4)

AND HANDED TO

A CALL

Mon. Shar France Atlanta

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, (PERSONALLY COMES MRS.
County of Suffice) Men. M. J. Kineur
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 cellies like. That she is the Widow of
who was a soldier in Company
I of the Peoples Relillery Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of
1862 , and served in the Army up to 2/11/16 1864. That he died
on the 2/21 day of stergered 1962,
Drown exposure which he endured during
such con since he came home from
such con vence he came home from
the duny.
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 186/.
I have been allowed an Indigent pension as a resident of
County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the
year ending December 31, 1908.
Sworn to and subscribed before me,
this 22 day of feee way 1008
Ordinary Post-Office //C Colo St
Sur of Carrier
State of Georgia,
County. Ordinary of said County, certify that I am well
acquainted with Mrs. M. f. Kice, 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 27 `
day of Coloter 1846.
Given under my official signature and seal, this the 22 day of Scannery 1908.
Official
Seal. Ordinary of Freeller County.
NOTE.—All blanks must be filled.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Fulton.

who, being sworn, says on oath that she is a bona fide resident of said County of
State of Georgia, and that she has RESIDED in said State
continuously ever since Bulk . That she is the Widow of
Al of the Replice and Regiment of Lac
Al of the Pupiles any Regiment of fa
Volunteers, that he enlisted in said regiment on or about the month of
1862 and served in the Army up to Off 31 1865. That he died
on the 2/el day of Dinguel #02
Imm exposure interarry
- from which be contracted?
angle
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 6/
I have been allowed an Indigent pension as a resident of
County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the
year ending Decomber 31, 1904.
Sworn to and subscribed before me,
Post Office.
Ordinary.
State of Georgia,
acquainted with Mrs. M. J. Grdinary of said County, certify that I am well
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 West 18 43
Given under my official signature and seal, this the
(OBOILE)
reinary of County
NOTE.—All bianks must be filled. Vouchers and Affidavits must bear date after January 1st. 1904.

	ramount to control of any con-		ſ			
Ι,					, hereby	authoriz
o receive and re	ceipt for the					nit same
In Witness	Whereof I		to set my hand			
ay of	s w nereoj, 1	1905.	to set my nam	u anu sea	1, 11118	
ay or.	1	1000.				[L. 8
Executed i	n presence o	f				
		ode:				
S		Þ	*			
2	. 2	in	inty,	sion e.	(905.	
5	ION,	1905.	County, ACLC cgiment.	, Pensions.	1905,	
	NSION,	31, 1906. Viceus	County, Cirecus ERegiment.	1	ep () 1905.	
i c	ENSION,	ice. 31, 1905.	County, County,	1	SSUED 1905.	and the second
03 .	OENSION,	g Dec. 31, 1905.	County, Mireland M. Regiment.	1	NT ISSUED 1905.	ANDED TO
34	IGENT.	nding Dec. 31, 1905.	County, County, County, County, County, County,	W. LINDSEY,	RRANT ISSUED	D HANDED TO
1905.	DIGENT W'S PENSION,	er ending Dec. 31, 1905.	County, County, County,	W. LINDSEY,	WARRANT ISSUED	AND HANDED TO
1905.	NEDIGIENT OW'S PENSION,	For year ending Dec. 31, 1905. W. MANY J. HULLLA	Fulton. County, Widow of C. J. Mirelle. So. D. 9th Let Regiment.	1	WARRANT ISSUED	AND HANDED TO

411

Fond No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	PERSONALLY COMES MRS.	
County of Fulton.	Juary & Direces	
who, being sworn says on	oath, that she is a bona fide resident of said County of	
Fulton stat	te of Georgia, and that she has RESIDED in said State	
continuously ever since	That she is the Widow of	
P. Cr. Keiner		
D. of the 9th	Regiment of Storner	
Volunteers, that he enlisted in said regiment or	1-	
186, and served in the Army up to	186 That he died on	
the day of	1903	
Microsoft State Control of the Contr	The second second	
Indigent.		
Mengan	sensioner)	
. 0	1000 Both (m)	
	# SF	
Deponent swears that she was the wife of said of	leceased soldier, during his service in the Army as a	
	is death aforesaid, and that she became his wife in	
the year 186/	and the decime has write in	
I have been allowed an Indigent pension	ns a resident of Fulton	
	now apply for the pension provided by law for the	
year ending December 31, 1905	provided by new for the	20
Sworn to and subscribed before me,	/ Key/	
	May Strains	
11/ ////	Alla ta Circle	
respondent in the Control of the Con	Postoffice Allalia (Elo ff)	
	01/2 200 11	
State of Georgia,	I. Wilow	
F111400 Cqunty.	Ordinary of said County, certify that I am well	
acquainted with Mrs. Mary J. S.C.	ulle, who made the above affidavit and	
am satisfied that the facts therein stated are tru	e, and I know she is the individual she represents	
herself to be, and that she has continuously resid	ded in this State since the	
day of		
Given under my official signature and sea	1, this the day of 1.4 2 1905.	
(Official)	C. P. Die Therson	
Seal.	Ordinary of Fulton County.	
NOTE.—All blanks must be filled. Vouchers and Affidavits mus		

			*
STATE OF GEORGIA,	l .		
Julion	COUNTY.		
Mary Mary		lou Comule	authorize
J.D. Burdett		/_ /	
to receive and receipt for the per	nsion paid hereon, and	request that he remi	t same to
πω	at	ad and white 16	IN
In Wilness Whereof, I have	nereunto set my nand a	nd seal, this	
day of fau.	1906. m	no Offer 1	
att.	V/100.1	Mary JAN	rus
Executed in present	of of	Mular	
· WHILEICE	et ff.		
1	11:		

To Those Heretofore Eld. 1908.	INDICERNT FOR YEAR PENSION, For year ending Dec. 31, 1906. The Part To	Willow of Heller County, Wildow of Heller Regiment. 50.9. The Mel. Regiment. JOHN W. LINDSBY, Commissions of Praisons.	WARRAY ISSUED 1908, I AND MADE TO 1908, I SHE CHILL
---------------------------------	--	--	---

POWER OF ATTORNEY.

,	NTY.			
Ι,			, hereby a	uthoriz
	of			
to receive and receipt for the pension p	aid hereon, and	*		same t
	-		is	
In Witness Whereof, I have heren	nto set my han	d and sear, th		
-		a and seal, th		
In Witness Whereof, I have hered		and seal, th		[r. s

To Those Heretoface Paid. To Those Heretoface Paid. 1807. No. 180 INDIGERAT For year ending Dec. 31, 1907. Mas Hulton. Ounty, Widow of. Hulton. Co. C. 9" Mile Lead Co. C. 9" Mile Lead Onnationary of Panions. JOHN W. LINDSEY, Commercial County. Onnationary of Panions. WARRANT ISSUED	AND HANDED TO	7
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STATE

POS TREICENE WILDOST ABREIOPÓREIASACHEN POR

Date of the state
FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

American to the common of the second of the
STATE OF GEORGIA, PERSONALLY COMES Mrs.
, ———
who, being sworn says on eath, that she is a bons frief-fesident of said County of
10.4.4
continuously ever since 1845 That she is the Widow of
who was a soldier in Company
Do of the The Regiment of
Volunteers, that he enlisted in said regiment on or about the month of
186.2 and served in the Army up to africe 186 5 That he died on
2.124 / 1111
the day of they
(udegent pensioner)
A
A TOTAL OF THE STATE OF THE STA
The state of the s
A ANDREA STATE AS A STATE OF THE STATE OF TH
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
-141
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 186/
the year 186/ I have been allowed an Indigent pension as a resident of fulfaction
the year 186/ I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the
the year 186/ I have been allowed an Indigent pension as a resident of fulfaction
the year 186/ I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1903.
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1908. Sworn to and subscribed before me this Cay of Aur. 1900.
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1903. Swon to and subscribed before me
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1908. Sworn to and subscribed before me this Cay of Aur. 1900.
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1908. Sworn to and subscribed before me this C say of Saw 1909. Post Office To Consens A
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1903. Sworn to and subscribed before me this County of Law 1900. Post Office The County of State of Georgia, 1. ON Pure County of State of Georgia,
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1903. Sworn to and subscribed before me this C say of Aur 1900. Your Office H. Thompson State of Georgia, County, of said County, certify that I am well
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1903. Swon to and subscribed before me this County of Law 1900. State of Georgia, County of asid County, certify that I am well acquainted with Mrs. Mary County who made the above affidavit, and
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1903. Swon to and subscribed before me this County of State of Georgia, State of Georgia, County
I have been allowed an Indigent pension as a resident of County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1908. Sworn to and subscribed before me this Cally of Act 1900. Post Office To Cally of a well acquainted with Mrs. Many County of a aid County, certify that I am well acquainted with Mrs. Many County of a mode 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 Cally of a side of the county of a side of the county of the coun
I have been allowed an Indigent pension as a resident of

NOTE.—All blanks must be filled.

Vouchers and Affidavits must bear date infer January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

(). (
STATE OF GEORGIA,	10	Personally comes Mrs.
County of Fulton.	-\ nu	211 to Mireus
	th that she is s	bona fide resident of said County of
73 41		
		that she has RESIDED in said State
continuously ever singe alffee	ife	
P. N. Sure	is	who was a soldier in Company
Le of the 9th	Regime	ent of Sa
Volounteers, that he enlisted in said regiment or		
1863_, and served in the Army up to		1865! That he died on
2.41		
theday of	igers.	10.11.5)
1 , 7		1
Indigent Jin	ecure	1
		,
soldier, and that she has never married since the year $18 \frac{d}{L}$ I have been allowed an Indigent pension	as a resident of_	Fulton.
County, under Act 1900, for the year 1908, and	l now apply for	the pension provided by law for the
year ending December 31, 1907.		
Sworn to and subscribed before me		
this day of JAN 2,- 1907. John R. Wilkinson, Ordinary.	Mors	Many Cilliacus
CI OR WILL		664 2-11-185
form St. Waterson, Ordinary.	Post Office_	as / Mangal ac
S (C)	1	John R. Williamon
State of Georgia,	-	said County, certify that I am well
Fulton. County		
acquainted with Mrs Hary & Ale	reus	, who made the above affidavit, and
am satisfied that the facts the ein stated are tr	ue, and I know s	she is the individual she represents
herself to be, and that she has continuously rec	ided in this Stat	e since the
day of18		
Given under my official signature and se	al, this the	day ofJAN 21907.
Circa and my omount organisario and se		
) Official)		for Dr. Williams.
Seal	rdinary of	Fulton County.
NOTE.—All blanks must be filled.	خاندا اند	

STATE OF GEORGIA, FULTON COUNTY.

Ordinary's Office, Atlanta January of said County,

certify that DIA Secret whose genuine

official signature appears to the annexed paper, was at the time of

said signify an acting fretice of the Beace, in and

for said County, duly sworn and commissioned, and that his com
mission was dated the 15th day of December 1904

and will expire on the 14th day of December 1904,

and that all his official acts as such are entitled to full faith and

credit.

Civen under my official signature and scal of office, the day and year above written.

John Niviernier

Levigia Gwinnett Denning Personally Came before me 16 do. Roberton who after being duly Sever ne Lays That he is Rusmally a a quainty with Mrs Martha J Kir eus That he has Known her over 40 years and That Shewas Laid to be Marriado 10 Ratty Eireus in 1861 I did not be them Maried but lived seems by wher They was Said To be Married and Knows That They They lived togather and was reconstruction in Society as man and wife Mot Roberson Leger in to and dubs criben Jugere me Sept-10 1902 John Phelol Ordinery Leorgia Gwinnets County Versonally Came before me I John & Pheblo Ordinary in and for Laid County do hereby Certify that Mile Roberson is a resident - of Lais County that he is a frien of Lovel Chreaty and That his word is entitled To full faith and Eredit-Twen under my hairy and deal of Office Sept-10 1902 John & Meble Orllmay of Kwimes

resident of Lais County That he is a knew of Love Church To full faith and Eredit-Seven under my hairs and Lead of Office Sept-10 1902 John & Webl Ordinary of Swinds

STATE OF GEORGIA. COUNTY.

Approved

RICHARD JOHNSON,

INDIGENT PENSION

1898.

County ! ! ! ! Coul

WARRANT HANDED TO

STATE OF GEORGIA,	6	
COUNTY.		
L. **		hereby authorize
	of	- According
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	<u>}</u>	.[L.S.]
		/

INDIGENT PENSION

1898.

County - A County American American

RICHARD JOHNSON,

WARRANT HANDED TO

WARRANT HANDED TO

Questions for Applicant.

ST	ATE OF GEORGIA,	
CXA	il Tory County.	
	F. M. described of said State and County, desiring	
to av	call himself of the Pension Act approved December 15th, 1894, hereby submits his proofs, and after	
being	g duly sworn true answers to make to the following tions, deposes and answers as follows:	
1.	g duly sworn true answers to make to the following tentions, deposes and nuewers as follows: What is your name and where do you reside? (give State, County and post office.) I.W. Curr Curre Change (Horn (Art))	
	How long and since when have you been a resident of this State? 68 326 nm	
2.	A € \$ /	
35.	When and where were you born " 18 3/ List structe lee is	
4.	When and where and in what company and regiment did you enlist or serve?	
	1862 Marsh 15 - Environmentale Francisco	
ō.	How long did you remain in such company and regiment?	
	1	
	* 100	
6.	For how long a period did you discharge regular military daty?	
7.	When, where and under what circumstances were you discharged from service?	
	May, - The 186, -	
	What is your present occupation?	
8.		
9.	How much can you carn (gross) per annum by your own exertions or labor ?	
10.	What has been your occupation since 1865?	
11.	Upon which of the following grounds do you base your application for peasion, viz: first mage and	
	ity," 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 support? If upon the second, give a full and complete history of the infirmity and its extent? If	
	the third, state whether you are totally blind and when and where you lost your sight?	
	bresint such p. 11 cours	
	including blood line real to us	
13.	What property, effects of income do you possess and its gross value?	
14.	What property, effects or income did you possess in 1894, 1895, 1896 and 1897 and what disposition,	
if at	ny, did you make of same?	
	A 1 X 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
15.	In what County did you reside during those years and what property did you then return for taxation?	
16.		
8.50	, , , , , , , , , , , , , , , , , , , ,	*
17.	How much did your support gost for each of those years and what portion did you contribute thereto	
by y	our own labor or income? Grauss Children Children	
18.	What was your employment during 1896 and 1897? 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 ho	mestend? Illy well & the Illy some buy a new news	*
	and but we up	
20.	Are you receiving any pension, if so, what amount and for what disability?	
	121	
	Sworn to and subscribed before me this the Philipping	
	Applicant.	
*	County Gather M. Lu	u
	of County.	

QUESTIONS FOR WITNESS.
STATE OF GEORGIA,
W. LALL County.
In the Little of the County, having been presented
as a witness in support of the application of \$146. Con Que & for pension
under the Act approved December 15th, 1894, and after being duly sworn true answer to make to the
What is your name and where do you reside? Torunge - Marion jarrete
37 Las les frances 24 Collande Fil
how long have you known him? Where does he reside, and how long and since when has he been a resident of this State?
telma for 120x 1. Si
1. When, where and in what company and regiment did he callet, and how do you know? I
5. Were you a member of the same company and regiment? 9 20 22
6. How long did he perform regular military duty, and what do you know of his service as a Confed-
erate soldier, and the time and circumstances of his discharge from the service ? It want 9 men.
7-1:-1
The san ter
What property, effects or income has the applicant? (Give your means of knowledge.)
in the supplied in
A STATE OF THE STA
 What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same?
any, du ne make si same .
9. Has be conveyed away any of his property in the last three years, if so, what was it and to whom?
10. What is the applicant's occupation and physical condition (
seems while Elementing - needle from whe
11. Is the applicant unable to support himself by labor of any sort, if so, why?
Caint on wich cough
remedia to A face provident to the
12. How was he supported during the years 1896 and 1897?
13. What portion of his support for these two years was derived from his own labor or income?
None whatever war next wast to work those year
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? heart will a mid Court
beaute nous ait duk diserre a new had
15. What interest have you in the recovery of a pension by this applicant?
Sworn to and subscribed before me, this the 15 day of 1898. 1898. Witness.
the day of 1898.) him Witness.

APPIDAVIT OF DUVOICIANO

NOTE. 1. Before any questions are answered, the Ordinary shall ever applicant and the winnesses in the following words: "You shall true answer make to each of the questions asked of you, and the swidence you shall give will be the whole truth, so help you God."

God."

2. Additional sfidavits may be attached if blank spaces are insufficient.

8. 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,	County.			STAT
I,	County.	, h	ereby authorize	I
		of .		
to receive and receipt for t	he pension allowed,	and request that he	remit same to	to recei
		at		-
by				by
Witness my hand and s	eal this	day of	1899.	\
Executed in presence of	· ,		(L. S.)	
	,			
				- Marie Control
				f
Z		1899		,
9.00	1/2	T ISSUED 18 JOHNSON, Commissioner of Persons	4	() () () () () () () () () ()
	. 67,	WARRANT ISSUED // 8 RICHARD JOHNSON ('minimeserrer)	WARRANT HANDED TO ALL CK TO A CALL.	China A Land
Those Aiready Enry No. of Total INDIGENT	Ø . 3 NO	SSI . ISS	WARRANT HANDED MAKELON SLAFFORM	10 8 mg
Alrea S.	1899 7.7.7.	WARRANT	NT B	Cone sec. 128
No. O	7	ARR	ARRA LARRA	CALL &
(For Those Aiready Enrolled.) No. of Control of INDIGENT LDIER'S PENSIO	3	₩ RIC	W Geor W	Certain Com.
10	lame o			15 E

POWER OF ATTORNEY

	OF GEOR		unty.		. 0111121	•	
1,							ereby authorize
to receive	and receipt						remit same to
				at			
	ness my hand			day	of		1900,
				-			[L. S.]
E	xecuted in pr	esence of		•			
•			- 1				
					,		
. 1	1	_,	1	2.1	. 0		L 11
)		0		3	190	Pennons	
Enroll	F	SE	·	3	SUED	INDSEY,	CD TO
CODE SEC.1254.	o. /6/ NDIGEN	豆	3	13 3	ARRANT ISSUED	JOHN. W. LINDSEN	WARRANT HANDED TO Phy Phy Poor W. Harrien, State Priner, A class
Se Ali	No.	S	<u>a</u>	1, 5	RRAN	N. W.	KRANT
or Th	× =	DE	=	3	*	HOI.	W. 7
		10		ame			

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, FULTON County.
Personally appears 1/16. The recurse of FULTON
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the - day of - 183/; that he is 6/2 years old and
by occupation a ; that he enlisted in the military service of the Confed-
erate States (or of the State of La) during the war between the States,
and served for the term of 3 Haco in Company , of ? th Regiment of
that his physical condition is as
General Startity
aluliare decele
, ,
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,
1864, and the acts amendatory thereof, and makes application for the pension to which he
1804, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1800. I have haractors as a resident of
county been allowed a pension for the year 189 9
Sworn to and subscribed before me, this, the
day of San Ordinary.
2 11 2/2 ce to 2 Ordinary.
State of Georgia,
FULTON County.
I, W. H. HULSEY, Ordinary of said County,
do certify that I am well acquainted with The Continuous of said County,
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of 6 - 1899.
(+d+)
(Star) - 11 17 Treces
Ordinary FULTON County.
Norg The blank spaces must be filled. Norg Affidavit should not be attested before January 1st. 1899.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
FULTON County,).	
Dersonally appears PM Kinguss of	
personally appeare Te Leuss of of	ecitizen
and resident of said County and State, and has resided in said State continuou	
since the day of 183/; that he is 68 years	-111
by occupation a; that he enlisted in the military service of the	Confed-
erate States (or of the State of State) during the war between the and served for the term of Fleuro in Company S, of 9 th Regi	
that his physical coudity	on is as
follows:	
Gendal detility	
that his property consists of the following items	
, , , , , , , , , , , , , , , , , , , ,	
The second secon	
of the value of Dollars, that by reason of his	
condition and poverty he is unable to support himself by his own exertion or la	bor, and
that he receives no pension but the one herein applied for.	
Deponent desires to participate in the benefits of the Act, approved Decemb	
1894, and the Acts amendatory thereof, and makes application for the pension to	-
is entitled for the year 1900. I have heretofore as a resident of Fullo	c
county been allowed a pension for the year 1899	
Sworn to and subscribed before me, this, the \ The article c	us
15 day of Jany 1900.) him	
Withhelp Ordinary.	
State of Georgia,	
State of Georgia, County.	
I, Ordinary of said	County,
do certify that I am well acquainted with Ill Jecce	the
applicant in the foregoing affidavit, and am well satisfied that the statements made	by him
in his said affidavit are true, and I know he is the individual he represents himse	If to be
and that he resides in this County.	
Given under my official signature and seal, this /5-	
day of Juny 1900,	
your Construction	
· CIIII	
Ordinary FULTON	County.

Nors.—The blank spaces must be filled.

Nors.—A fildavit should not be attested before January 1st, 1900.

STATE OF GE	ORGIA,				
FX.	_County.				
I,		hereby	authorize		
		of.			
to receive and rec	ceipt for the pension	allowed and	request that	he remit	same to
		_at			
by_					
Witness my	hand and seal, this	day of		_1	1901.
	/				_[L. s.]

Executed in presence of

(For Those Aiready Enrolled.)

No. 468

1801.

SOLDIER'S PENSION.

INDIGENT

Commissioner of Pen WARRANT HANDED TO

JOHN W. LINDSEY,

1901.

WARRANT ISSUED

Har

15 3 G

For Applicants Heretofore Allowed Pensions.

Personally appears PM Acreus of Justita
personally appears PM Nereus of Lilton
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since theday of1857; that he is 69 years old
11
federate States (or of the State of) during the war between the
federate States (or of the State of States, and served for the term of the term of the things of the term of the t
follows:
follows: Dereil de Cility
that his property consists of the following items.
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which
he is entitled for the year 1901. I have heretofore as a resident of
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Sworn to and subscribed before me, this the fly with some day of the state of the s
When P Will My a great Ordinary
STATE OF GEORGIA,
County.)
STATE OF GEORGIA, County. County. Cordinary of said County, do certify that I am well acquainted with Cordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him
do certify that I am well acquainted with
in his said affidavit are true, and I know 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 1901. Affin 1901. Ordinary County.
Ordinary _ \ County.
Note—The blank spaces must be filled. Note—Affidavit should not be attested before January 1st, 1901.

	County.		
I,		_hereby authorize	
		of	
to receive and receipt	for the pension a	llowed and request that	he remit same to
		_at	
by			
Witness my har	nd and seal, this	day of	1902.
	187.4		[L. S.
Executed in prese	nce of		
-	£		

Hall his cons

1902.

JOHN W. LINDSEY,

WARRANT ISSUED

114

Regiment

Geo. W. Harrison, State Printer, Atlanta.

WARRANT HANDED TO

(FOR THOSE ALREADY EMPOLLED.)

No. ANG C.

INDIGENT

SOLDIER'S PENSION

110 and

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF CEORCE	A
STATE OF GEORGIA	, ,
- (MM) C	ounty.).
Personally appears	Micuss of Kellin
County, State of Georgia, who being	duly sworn, says on oath that he is a hong fide citizen
and resident of said County and S	tate, and has resided in said State continuously ever
since theday of	that he is 20 years old and
by occupation a	that he enlisted in the military service of the Con-
federate States (or of the State of	during the war between the
States, and served for the term of of Halln	in Company, of 9 th Regiment that his physical condition is as
follows: Screen	of deteility
that his property consists of the foll	1
that his property consists of the ion	owing items
The second of the second of the second of the second of	
of the value of_	Dollars, that by reason of his physical
that he receives no pension but the or	o support himself by his own exertion or labor, and ne herein applied for.
Deponent desires to participate	in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereo	of, and makes application for the pension to which he
s entitled for the year 1902. I have	e heretofore, and resident of Julian
ounty been allowed a pension for the	
Sworn to and subscribed before m	£ (P11)
a Pillie	1 Moobrinary. Music
STATE OF GEORGIA.	1
Full Of County. John R. Wilkenson	
o certify that I am well acquainted	with Ordinary of said County,
ie applicant in the foregoing affidavit	, and am well satisfied that the statements made by
im in his said affidavit are true, and	, and am well satisfied that the statements made by I know he is the individual he represents himself to
e and that he resides in this County.	,
Given under my o	fficial signature and seal, this
day of	1902
AMX)	17.1.
here	Ordinary Eulton. County.

Ordinary_ Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1902. him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Affix your seal here Ordinary Full
Note.—The blank spaces must be filled.
Note.—Affidavit should not be attested before January 1st, 1902.

and appreciate in the foregoing amount, and am well satisfied that the statements made by

Widow's Pension UNDER ACT 1910

1337 A PK County Futton Name Mrs Martha W Kirk Widow of Wiley & Kirk J. W. LINDSEY.

8/29-1913

lowing questions to-wit: yes Personally present 7. If he was not present state clearly where he was 8. Where was his command when he left? Marshal c. For how long was he granted leave of absence? Mas pulsarial

e. What was his physical condition when he left his Command? Paris had f. What effort did he make to return to his Command? ... was husand k. Were you residing together when he died? value, Nov. 4, 1908? (State same by items.)_____

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

STATE OF GEORGIA.

Personally before me comes mar dag ly 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 enswers makes to the following

1. What is your name, and where do you reside? Martha M. Kirk

2. How long and since when have you been a continuing resident of the State of Georgia?.... Then, where and to whom were you married? Leb 9, 1860. Mout

When, where and in what Company and Regiment did your husband enli Confederate Army or Georgia Militia? (State the arms and class of Service) & amdern with 15 4 2 2 3 3 . Legiment arkansas lufanting When and where did the Commands of your husband surrender or discharge from the army? May

1895; at marchall Texas, Graled 6. Was your husband personally present at the time of the surrender or discharge of this Com-

a. For what cause did he leave his Command?

By whose authority did he leave his Command?

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

Was he captured by the enemy at any time? ______ Ho

If so, when and where captured and where held as a prisoner, and when and for what cause

j. When and where did your husband die? 1901 stete ala,

1. If not, how long had you resided apart? 9. What property of any description did you own, held or control for your use and its cash

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.)

If so, when and for what cause were you struck from the Roll?_____

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA, arkansas
County. L
Personally before me comes. All Medius I & fustions who after being duly sworn true answers to make to the following numbers are property to follow the following numbers are followed to the following numbers are followed.
1. What is your name and where do you reside? I.R. Matter awach's
being duly sworn true answers to make, to the following questions, apswers as follows: 1. What is your name and switze do you reside? R. Matter Gwarlet 2. How long and since when have you known years a policiant?
13. How long and since when has she continuously resided in this State? (Give date.) . 1.6.
When and to whom was she married? Wiley & How so you know?
1 How long and since when did you know Alle 1 19 62, 6 year her
husband
, 6 When and where did wiley A. Kirk,
the husband of Applicant die? In state; of ala,
? Were the applicant and her husband living together as husband and wife at the date of his death?
> If not, how long did they live apart before his death?
Were they divorced?
When, where and in what Company and Regiment gld lockey fe Main's enlist? In Carri our ask 60 3 3 Legisment arka was Infants 10. Were you a member of the same Company? 410
arkanias Infantin
10. Were you a member of the same Company?
11. How long within your personal knowledge did he perform actual military service with his
Company and Regiment? Third Glass Class of twan 12. When and where did his Command surrender, and was discharged? In Man.
1) 45 at martial Sexas Paroled
13. Were you personally present when it was surrendered? Y
were you and how came you there?
AHA
1). Was the husband of applicant personally present at surrender?
where was he? when, where and for what cause did he leave Command? (Give date.) Must reduct By whose
authority did he leave his Command?and how
long was he granted leave? How do you know all this?
long was he granted leave? How do you know all this?
15. For what cause, if you know of your own knowledge, was he prevented from returning to
his Command?
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
It Kusting among - atory Public
of Cualita County.

AFFIDAVII OF IWO FREEHOLDERS.
STATE OF GEORGIA,
STATE OF GEORGIA, Tuebour County
Personally before me comes who on oath says that they
are freeholders of said County and that they know Markhaw. Mush
by Schedule (A) as follows
Personal property Poul \$
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 Account
Schedule (C). We also know what property she has now in her possession, use and control to-wit.
Acres of land_worth\$
Horses and Mules S
Cows and Hogs
Other Property \$
Income and Earnings
Total Value of all property and effects\$
Sworn and subscribed before me this the
John Hilly or ordinary County.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
Tulton County
I, John R. William Ordinary of said County do certify
that, I know warthu W. Kirk the applicant for pension. She
is the person she represents herself to be and she is a bona fide continuing resident citizen of said
County and was on the 4th Nov., 1908
That I also knowthe witness who swears
to the service of husband, and the Sulphafur #7.7. The Sulphafur who are freeholders. That all of them were now residents of said Country 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 \$4
Sworn under my hand and official seal moffice thisday of
april 1913 John Plater
(SEAL.)
tullar 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!"

 All affidavits must be made before the Ordinary passes are insufficient.

 All affidavits must be made before the Ordinary for the ordinary state of the ordinary state ordinary state or inary state or ordinary state ordi

aly commission expires Jan. 15, 1917

knowledge or how? Rulledius on Ordinary. own knowledge or how?.... (SEAL.) J. L. getten Sworn to and subscribed before me this the (SEAL.) ROTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words.

"You do selemnly 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 belay you God." It is not to the property of the proper uly commission expires Jan. 15, 1917

	o Alan	th Mrs.	nesses), ber 23,	owed a
ilcant's Residence.	Ordinary in and for said Co	ereby certify that I am acquainted with Mrs. the applicant for a pension in this case, and	nted to me by reputable with State of Georgia on Decem	at she is the widow of uch has heretofore been all
vertineate of ordinary of the County of Applicant's Residence.	nty of faction	State of Georgia, hereby ce	or from positive proof prese nd that she resided in the	State since that date: The deceased, and as
Derlingue of Un	STATE OF GEORGIA, County of Action Ordinary in and for said Comme of	State of Georgia, hereby certify that I am acquainted with Mrs.	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,	1800 and has not lived out of the State since that date: That she is the widow of Ansura and Assacrated and as such has heretofore been allowed a

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

pension for the year ending February 15th 1892.

Fremery

day of

. . . Ordinary.

.

アンス

KNOW ALL MEN BY THESE PRESENTS, That I, STATE OF GEORGIA,

County.

jo County, in said State, do hereby appoint

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 afficient, bretch authorizing my said Attorney to receipt in my name for any Warrant that may be sisted by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. my true and lawful attorney in fact, for IN WITNESS WHEREOF, I have hereunto set my hand and seal, this Jo

189

Executed in the presence of us:

[L. S.]

DIRECTIONS. Send amount by

to

, and oblige

COUNTY.

for year ending February 15th, 1893.

fulton Co.

Warrant Issued AND HANDED TO

day of

me at

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

the applicant for a pension in this case, and

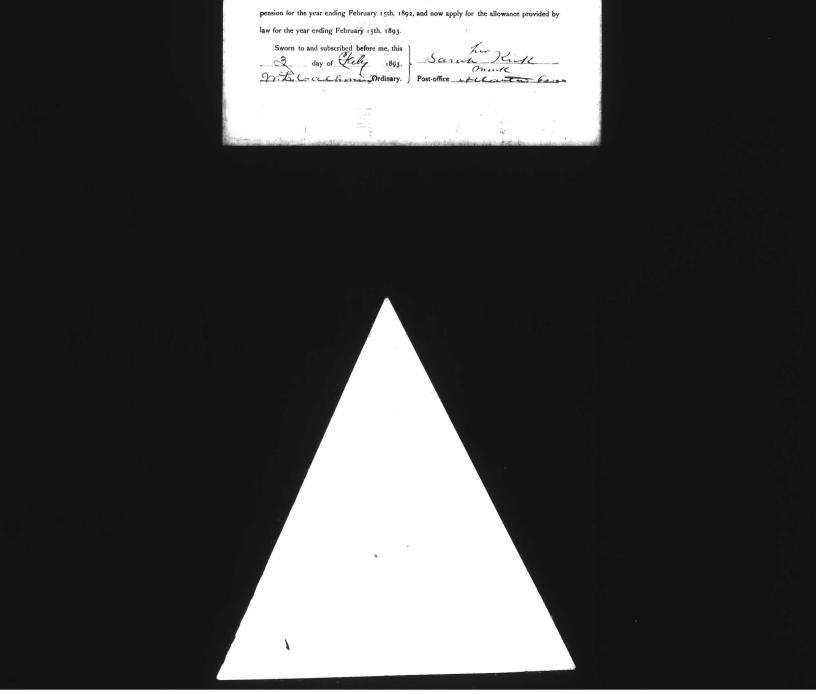
I. Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs.

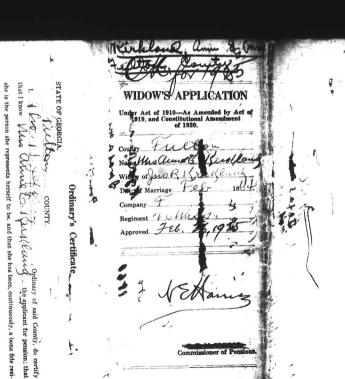
	know, from my own knowledge, (or from positive proof presented to me by reputable witnesses),
	that she resides in this County, and that she resided in the State of Georgia on December 23.
	1890, and has not lived out of the State since that date. That she is the widow of
1.0	deceased, and as such has 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
Sc.	3 day of Frecuery 1893.
	and any of Fraction 1893.
	POWER OF ATTORNEY.
	FOWER OF ATTORNEY.
	STATE OF GEORGIA, County.
	KNOW ALL MEN BY THESE PRESENTS, That I,
	of
	County, in said State, do hereby appoint
	of my true and lawful attorney in fact, for
	me and in my name, to receive and receipt for whatever amount of money I may be entitled to
	from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing affi- davit; hereby authorizing my said Attorney to receipt in my name for any Warrant that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid. IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
	day of189,
	Executed in the presence of us:
	Executed in the presence of us:
	· · · · · · · · · · · · · · · · · · ·
	DIRECTIONS
	DIRECTIONS.
	Send amount byto
	me at and oblige
	A NAME OF THE PARTY OF THE PART
	The state of the s
	No. 1 (1)
	Idows Pension Tony, Anna
	ant of Fa
	PAID TO HANDED TO HA

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Detectionally comes Mrs.
County of Fullin Parak Mine
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 1826 That she is the Widow of
who was a Soldier in Company
continuously ever since 1826 That she is the Widow of who was a Soldier in Company A of the A Regiment of Conference Regiment of Conference
Volunteers, that he enlisted in said Regiment on or about the month of
186 and served in the Army up to 116 That he lost his
186 and served in the Army up to 186 That he lost his life on the 2/8 day of feet 186 (State here
full particulars of the husband's death, when, where and from what cause.)
Hiller at 1st buth of Manage
% .
Deponent swears that she was the wife of said deceased soldier during his service in the army
as a soldier, and that she was never married since his death aforesaid, that she became his wife
in the year 18 44; 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 Februarys 15th, 1892, and now apply for the allowance provided by

law for the year ending February 15th, 1893.





dent citizen of said State since January 1st, 1920; that I also know

the witness who sweets to the service of hubband; that both of thath are now residents of said the witness who sweets to the the service county and were duly sworn by me before bigning the foregoing affidavits, and that they are truthful and trustworthy and their Given under my hand and official seal of office this 24 day of C ments are entitled to full faith and

Instructions:

(SEAL OF ORDINARY)

Ordinary. County

192

Before any questions are answered the Ordinary shall sever applicant and the witness in the following words:

"on the selected by sever bandon rath. So help you God."

Additional afficients may be statisted if their passes are insufficient.

Only victors who married prior to January 1st, 1881 are stilled.

All afficiation and is made Pefore the Ordinary of the County in which the applicant or witness reades and
All afficiation much small Pefore the Ordinary of the County in which the applicant or witness reades and
All afficiation much souther Southern of the County in which the applicant or witness reades and
All afficiation much souther Southern of Ordinary of the County in which the applicant or witness reades and
All afficiation much southern or the County in the County i

ighout the State. simple form is

0 WIDOW'S

Ordinary's Certificate

STATE	OF	GEORGIA.

COUNTY

. Ordinary of said County, do certify that I know Mis arms & Bustland . the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that I also know

the witness who swears to the service of hysband; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this -; day of C (SEAL OF ORDINARY)

Instructions:

- 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:

 "You do notemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God.

 2. Additional affidivity may be statched if blands, 1881, are entitled.

 3. Only widows who married prior to an ordinary of the County in which the applicant or witness resides and All affidivity may be only ordinary.

 4. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

- eral reputation.
 Fill out the back of the application carefully.
 Fill out the back of the application carefully.
 Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

APPLICATION FOR PENSION BY A WIDOW

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

OUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA.

FULTON

COUNTY

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

- 1. What is your name, and where do you reside? (Give Post Office and County) Mrs. Ann E.Kirkland, 66 E. 12th St. Atlanta, Ga.
- 2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? for about fourteen years
- 3. When, where and to whom were you married Feb. 1864, Scott Co., miss. Dr. John R. Kirkland
- a. Have you married since the death of first and soldier husband? No.
- 4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.) Don! taknow
- 5. When and where did the commands of your husband surrender or discharge from the Service? Dont know
- 6. Was your husband personally present with his command when it was surrendered or dis-Dont! know
- 7. If he was not present, state specifically and clearly where he was?
- 8 When did he leave the Command?
- a. For what cause did he leave?
- b. By whose authority did he leave?
- c. For how long was his leave of absence granted?

In what way?

- e. What was his physical condition when he left his command? Ordinary health
- 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? In what prison was he held and when was he released?
- j. When and where did your first husband die? 5th of April, 1901 Meridian, Miss.
- k. Were you residing together when he died? Yes
- 1. If not, how long had you resided apart?
- m. Are you now a widow?
- 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

William R warbut C. C. Ordinary

(SEAL OF ORDINARY)

ms, Amn E. Hirkland

1	Questions for Witness as to Service of Husband and Marriage
	STATE OF CHARGE.
	Hoseiston Haundounty.
	Maticain of said State and County is hereby presented
	as a witness in support of the application of Lique Kirkland 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?
	Houston Harris County Della
	2. How long and since when have you known the Burney applicant
_	all of her life
1	3. Where does she now reside, and since when has she been, continuously, a bona fide, resident
1.	citizen of this State? A atlanta kingia
7.	Do not Knist long She has been a Resident of Georgia
1	4. When and to whom was she married? I the the state of you know? I was at well- 5. How long and since when did you know at History or miss her husband? At our surent flans since I from he
!	5. How long and since when did you know as Hellsby or our miss her
1	husband? at our severy fears sense I frost Knew he
1	6. When and where did
!	the husband of applicant, die? Merrolean Muss
ĺ	7. Were the applicant and her husband living together as husband and wife at the date of his
1	death? Just
1	The COURSE AND ADDRESS OF THE COURSE OF THE
	8. If not, how long did they live apart before his death?
	Were they divorced?
1	9. When, where and in what Company and Regiment did (Give date and place) — Co F. 25 mills at Hills over Miss
<u>.</u>	10. How did you obtain your information of this service? I was a member Same
Co the	11. How long within your personal knowledge did he perform actual military service with this
,	Company and Regiment? (Give dates.)
	12. When and where was his Command surrendered or discharged? (Give date and place)
	\$ 50 not Know
	18. Were you personally present with this Command when it was surrendered?
	if not, where were you new fram, and how came you there? on detached
	sleave -
	14. Was the husband of applicant personally present with his Command at its surrender?
	If not where was he? and how came him there?
	When, where and for what cause did he leave his Command? (Give date.)
	By whose authority did he leave his Command?
	and how long was he granted leave?
i	How do you know all that you have stated to be true? (If of your own knowledge, state clearly
	and specifically).
,	and specifically)
9	15. For what cause, if you know of your own knowledge, was he prevented from returning to his
	Command?
	16. What effort did he make to return to his Command and how do you know this?
	17. Was he captured as a prisoner? The II so, when and where? Word Dornald on In what prison was he held? I show the shaded and when Beased?
	Sworn to and subscribed before me, this the
	14 day of July , 1924 (Witness)
	Chas Notabley. Ordinary
	Motory Public Harris County Dexas
	(SEAL OF ORDINARY)

Questions for Witness as to Service of Husband and Marriage STATE OF GEORGICAL Miss.

A.M. Christian of said State and County is hereby presented as a witness in support of the application of Mrs. A.E. Kirkland 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. Inswers as follows, to-wit: 1. What is your name and where do you reside? A.M. Christian Forest, Scott Caunty, Miss. 2. How long and since when have you knows Mrs. A.E. Kirkland applicant About 65 years, since 1807 or 1808 3. Where does she now reside, and since when has she been continuously, a bona fide, resident sitizen of this State? Atlanta Ga. Since about 1945 or 1810 4. When and to whom was she married? 1864 . How do you know? Personnl 5. How long and since when did you know Dr. John R. Kirkland he was a nile dentification of this state? Atlanta, Ga. Since about 1945 or 1810 6. When and where did Dr. John R. Kirkland he was an in section of the war, during the war and until the here are she was a prison of the war and the husband of applicant, die? 1901 in these city of Meridian, Eiges. 7. Were the applicant and her husband living together as husband and wife at the date of his leath? 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. John A. Kirkland enlist? (Give date and place) 1851 Co. F. 20th. Miss. Adams' Brigals 10. How did you obtain your information of this service? I was with him. 11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates) Prom Beginning to end 1861 to 1860. 12. When and where was his Command surrendered or discharged? (Give date and place) Graenaboro. N.C. June or July 1866. 13. Were you personally present with this Command when it was surrendered? Yes. If not where were you and how came him there? 14. Was the husband of applicant personally present with his Command? I for date. When w	Scott COUN	
provided by the Act of 1910, as amended by the Act of 1912 and the Constitutional Amendment of 1920, in said State, who, after being sworn true answers to make to the questions propounded, unswers as follows, to-wit: 1. What is your name and where do you reside? 4. M. Christin Forest, Soott Caunty, Miss. 2. How long and since when have you known Mrs. 1.2. Kirkland applicant About 65 years, since 1807 or 1808 3. Where does she now reside, and since when has she been continuously, a bona fide, resident itizen of this State? Atlanta, Ga. Since about 1905 or 1910 4. When and to whom was she married? 1864 . How do you know? Person-1 5. How long and since when did you know Dr. John R. Kirkland her husband? Since we were boys, before the war, during the war and until the husband of applicant, die? 1901 in the city of Meridian, Riss. 7. Were the applicant and her husband living together as husband and wife at the date of his leath? 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. John R. Kirkland enlist? (Give date and place) 1861 Co. F., 20th. Miss. Adwms' Srigala 10. How did you obtain your information of this service? I was with him. 11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) Prom Beginning to end 12. When and where was his Command surrendered of discharged? (Give date and place) Graenshoro, N.C. June or July 1865. 13. Were you personally present with this Command when it was surrendered? Yes If not where was he? 14. Was the husband of applicant personally present with his Command at its surrender? Yes. If not where was he? 14. Was the husband of applicant personally present with his Command at its surrender? Yes. If not where was he? 14. Was the husband of applicant personally present with his Command at its surrender? Yes. And how came him there? 14. Was the husband of applicant personally present with his Command at its	A.M. CAPISCIAN	Mrs. A.E. Kirkland
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A. What is your name and where do you reside? A.M. Christian Forest, Soott Caunty, Miss. 2. How long and since when have you known Mrs. 12. Kirkland applicant About 65 years, since 1807 or 1808 3. Where does she now reside, and since when has she been continuously, a bona fide, resident sitizen of this State? Atlanta, Ga. Since about 1909 or 1910 Dr. John R. Kirkland How do you know? Person-1 5. How long and since when did you know Dr. John R. Kirkland How do you know? Person-1 5. How long and since when did you know Dr. John R. Kirkland How do you know? Person-1 6. When and where did Dr. John R. Kirkland How war and until 6. When and where did Dr. John R. Kirkland How war and until 7. Were the applicant, die? 1901 in the city of Heridian, Kies. 7. Were the applicant and her husband living together as husband and wife at the date of his death? 8. If not, how long did they live apart before his death? Were they divorced? No. 9. When, where and in what Company and Regiment did Dr. John R. Kirkland emlist? (Give date and place) 1851 Co. F., 20th. Miss., Adams' Brigals 10. How did you obtain your information of this service? I was with him. 11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) Prom Beginning to end 1861 to 1860. 12. When and where was his Command surrendered or discharged? (Give date and place) Graenaboro. N.C. Juno or July 1866. 13. Were you personally present with this Command when it was surrendered? Yes and how came him there. 14. Was the husband of applicant personally present with his Command at its surrender? Yes. 15. If not where was he? and how came him there? 16. When, where and for what cause did he leave his Command? (Give date.) Mrs. Captural By whose authority did he leave his Command? (Give date.) Mrs. Captural By whose authority did he leave his Command? (Give date.) Mrs. Captural By whose authority did he leave his Command? (Give date.) Mrs. Captural By whose authority did he leave his		
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If not, where were you and how came you there? 14. Was the husband of applicant personally present with his Command at its surrender? Yes. If not where was he? and how came him there? When, where and for what cause did he leave his Command? (Give date.) When captured By whose authority did he leave his Command? I don't remember that he was absent exoort while he was a prisoner) How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically). I was boarding with his family when we milisted and served through the was with his family when we milisted and served through the was with his family when we milisted and		
14. Was the husband of applicant personally present with his Command at its surrender? Yes. If not where was he? When, where and for what cause did he leave his Command? (Give date.) Who captured by whose authority did he leave his Command? I don't remember that he was absent except while he was a prisoner.) How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically). I was boarding with his foulty when we enlisted and secred through the was with nim de out a ball from my leg		
14. Was the husband of applicant personally present with his Command at its surrender? Yes. If not where was he? and how came him there	Tr.	and how came you there?
If not where was he? When, where and for what cause did he leave his Command? (Give date.) was captured By whose authority did he leave his Command? I don't remember that he was absent 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 boarding with his funily when we enlisted and served through the was with nim. He out a ball from my leg		e and a second of the second o
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By whose authority did he leave his Command? I don't remember that he was absent and how long was he granted leave? I don't remember that he was a prisoner! How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically). I was boarding with his femily when we milisted and served through the was with him if out a ball from my leg		
and how long was he granted leave? (except while he was a prisoner) How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically). I was boarding with his family when we enlisted and served through the was with him. He out whell from my leg		
How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically). I was boarding with his family when we enlisted and served through the was with him. He out a ball from my leg		
and specifically). I was boarding with his family when we enlisted and served through the was with him. He out a ball from my leg	How do you know all that you have stated	to be true? (If of your own knowledge, state clearly
served through the was with him. de out a ball from my leg	and specifically). I was boarding w	ith his family when we enlisted and
15. For what cause, if you know of your own knowledge, was he prevented from returning to his		
	15. For what cause, if you know of your	own knowledge, was he prevented from returning to his
Command? Returned us soon as he was released from origin 16. What effort did he make to return to his Command and how do you know this?	Command?	he was released from pris n
Command? Returned 18 800m 18 he was released from prion	If not where was he? When, where and for what cause did he leave By whose authority did he leave his Comm and how long was he granted leave? How do you know all that you have stated and specifically). I was boarding w. served through the was with: 15. For what cause, if you know of your Command?	and how came him there? his Command? (Give date.) wall output red hand? I dou't remember that he was a brisoner; (except while he was a prisoner; to be true? (If of your own knowledge, state clearly the his funity when we emilisted and him. He out + ball from my leg own knowledge, was he prevented from returning to his his he was released from prison
	In what prison was he held? Camb Dou remember the exact date bu	glasmdshell blenger at Vicksburg, don't the was in prison about 7 months.
remember the exact date but he was in prison about 7 months.	26th day of July , 19	(Witness)
In what prison was he held? Camb Doughlashdathed histories. At Yicksburg, don't remember the exact date but he was in prison about 7 months. Sworn to and subscribed before me, this the 26th day of July 192 4 (Witness)		May
In what prison was he held? Camb Douglashdath-Chimage: at Vickeburg, don't remember the exact dete but he was in prison about 7 months. Sworn to and subscribed before me, this the 26th day of July 192 (Witness) Strant Floyd Moseley Odnity Circuit Clerk	of Goott	WXY Olawar -
In what prison was he held? Camb Doughlashdah, history at Yioksburg, don't remember the exact date but he was in prison about 7 months. Sworn to and subscribed before me, this the 26th day of July 192 (Witness) Sirrart Floyd Moseley Oddhir Clark Genty A. Genty	(SEAL OR ORDINARM)	Drawn Close
In what prison was he held? Camb Douglashdath-Ghisaser at Vicksburg, don't remember the exact date but he was in prison about 7 months. Sworm to and subscribed before me, this the 26th day of July 192 4 Strantt Floyd Moseley Odhitty Circuit Clerk Miss. An White-way 192 4	. 0	

Circuit Clerk 3gott (SEAL OF CHARMS Ay WAY)

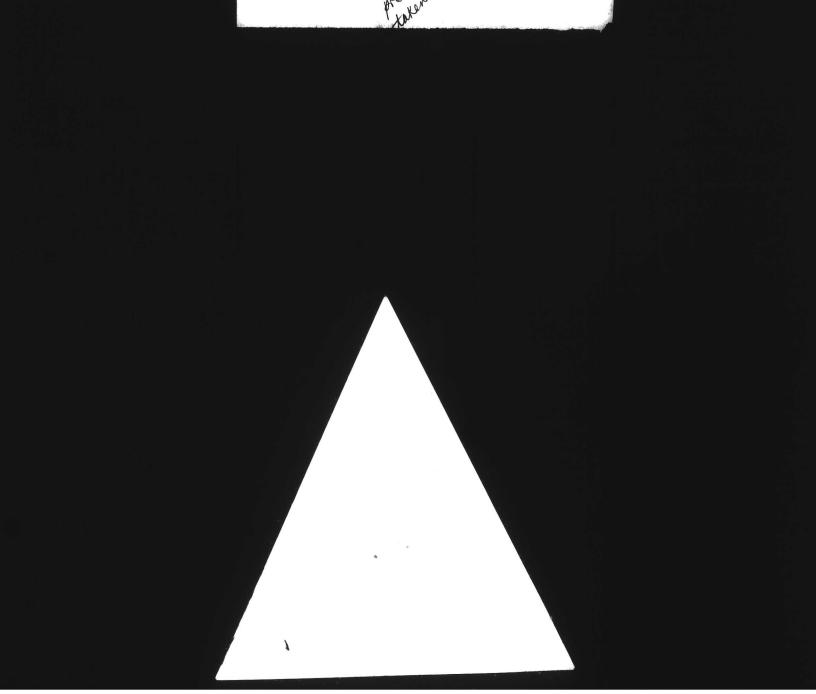
GEORGIA, FULTON COUNTY.

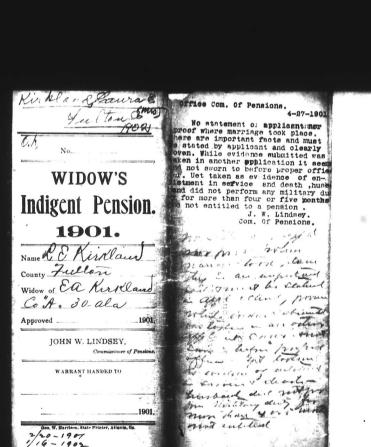
Personally appeared Mrs.J. N. Eley, who makes affidavit that she personally knows Mrs. Amn E. Kirkland she also knew Dr. John R. Kirkland and that she personally knowsthat the said Dr. John R. Kirkland and Mrs. Ann E. Kirkland lived together as husband and wife for more than twenty years, that she has not since his death remarried, and that she is now his dependent widow, she makes further affidavit that Dr. John R. Kirkland died in Meridian, Miss. in the year 1901.

Sworn to and subscribed before me. this July 21st, 1924.

Athur R marbin.

In the marked in 1864.





POWER ATTORNEY

TA	TE	OFIGEORGIA.

	Coun	ty.		
1.	le	creby 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. 8.
	. County.			,
()				/
()				

Questions for Applicant.

STATE OF GBORGIA,

Fullan County.

Min L. or wor to. Wa Klam Lof 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 procfs, and after being duly sworn true answers to make to the passed 1900, hereby submits ner p. following questions, deposes and answers as follows:

1. What is your game and where do you reside? (Give State, County and Post Office)

2. How long and since when have you liene a resident of this State? I for the first that the fir

4. When and where was your husband bernastate his full name, and when were you and he married to define the state of the s

6. How long that your husband serve in said Company and Regiment & Alb 7 1 162

When and where did your husband's Company and Reginent surrender and was discharged on herein

Was your husband present at the time and place when his Company and Regiment surrendered?

9. If not with his command at surrender, stage clearly and specifically where he was, when he left command, for what cause, and by what authority? Of the first first for the first first for the first form of th

10. When and where did your husband die? Alda ... to to your husband die? 1862. He is burried un Alanta.

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?

Senfunce: 390 Lift and Lift Poverty

12. If upon the first ground, state first long you have lifen in such a condition that you cannot earn your support. If upon the execut, give a full and emplete listory of the infirmity and its extent. It upon

your support. If upon the record, give a full and complete listory of the infirmity and its extent. It upon the third, state whether you are totally bind, and when and where you lost your sight.

The third attraction to the state of the graphs of a to a whole of the state of th

14. How much can you earn gross, by your own exertion or labor?

15. What property, real or personal, or income do you have or possess, and its gross value?

Lance Or of Bl. oo evolth of professional.

16. What property, real or personal, did you persess at death of hubband of he left you, and of the year

1889-900, and what disposition, if any, by asle or gift, have you made of the smooth of the year of the stands as of the second
of dive of worth to the printer of the first of the order

19. How much did your support cost for each of those years, and how much did you contribute by your

19. How much did your support cost for each of those year, and how much did you continue by your own labor or income!

20. What was your employment during 1889 and 1800—how much did you receive the each year?

21. Have you a family? At any hard have been been of support. Have they any lands or other property? I have not a family? Give their means of support. Have they any lands or other property? I have not a family? Give their means of support.

23. How many applications have you made for a Pentson, and under what class? I have to track - allering be 19 get pentson in 15 91. 1893. 1900.

Questions for Witnesses.
STATE OF GEORGIA,
Hills, County.
been producted as a witness in support of the Application of Mrs. General Eligible 1 or of Land
been produced as a witness in support of the Application of Mrs. Chart & Turk Land
following questions demones and answers as follows:
1. What is your name and where do you reside?
Marty & a Fallon against with the applicant, Mis forma after Carel.
If so, how long have you known her ' A &.
(Claule Georgea We know long and super when just the boon a resident of this State?
4 When and where was she born? Gors County Kenny
Were you ever acquainted with her by-band*
Where did be reside in 1861 - Payaller all Aller and Clark
a When and where was be born excelled as a allasoma
10. How long have you known him. Hereth Hereth Hamel Corlog in the war between
10. Who and where deletters to Jones land cross in the war between gly she States, and so what Congress and To giment did be endied and how do you know this? Congress and the giment did be endied and how do you know this?
Willa Key. By We corresponding applicants
12. How has a did for perform regular military dury from. Fely 29# 1862
1: When and where was his Company and Regiment surrendered and discharged from service?
14. Were you with the command when it surrendered? \(\lambda\rightarrow\)
the husband of accident present?
16. It is t present, were was in:
16. It is the result, were was in a wind of the lease his Command Styr Comment of Combensed Ray and For what value and the comment of Combensed Ray and the combensed Ray and th
By whose authority he let Copt William Falling
Hy whose authority he let Copf William Salleron . How do you know all the " State fully and clearly ! Only by a preserving affect the
In When got where glid teller a Kindian d die?
19. Where old he reside at his death and how long had he been a resident of Georgia at his death?
they eller all (Waland)
20. Do you of your own knowledge know that applicant is the lawful widow of Eller a New York
Only Thereon by my interiors with heavy + Jointy
22. What properly, effects or income has the applicant, if any, and how do you know this of your own knowledge?
23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it?
24. Has applicant conveyed any property in last two years or given any away, if so what was it and to
whom?
Milat is applicant's physical condition and her chances and ability to earns support?
The working where he was fun our keining

26. Is applicant able to earn a support at labor of any sort,	if not why? 20
/ /	Supermety
27. How was she supported for 1899 and 1900?	y by relation
28. How much did applicant contribute to her support for	
29. Give a full and complete statement of applicant's physic	
sulequestion, lead eye Sight + a	
	2
30. What interest have you in the recovery of this pension	by the applicant? Non
Sworn to and subscribed before me this	
190 Jebns 190 /)	H Drodful win
John Rivier warming	() frequences
2 01	
Tulling County.	Witnesses.
Affidavits of Ph	vsicians
TATE OF GEORGIA,	y oronario.
tullon- county	Bradfiel
I coronally before me comes I - A	
fielans of said county who, being severally sworm say on or	both known to me to be reputable
grafania & Kertland applican	t for a Pension under Act of 1906, and after
In Janua & Resaland applican personal examination say that her physical condition is this stally dead of the life way to	Chance tatersh,
disortish in lift dot , a	ed hisson, & Chance
and the second	
··· t	
we have no interest in said pension if allowed.	
Sworn to and subscrit ed before me this	D/4: 11:9m
1	- Compact
shu R William ()	17 True 8 2005
Fullow County)	The same way
ORDINARY'S CERT	IFICATE
TATE OF GEORGIA.	IFICATE.
•	
Tullon County	
1. John Revelkusson	. Ordinary in and for said county, hereby
ify that the applicant, Mrs. & C Kurkle a	resides in said
nty, and has been a bona fide resident of this State since	day of
A, and that the witnesses, Mr. 186- Pora	ofisia.
entitled to full faith and credit.	ustworthy character, and that their statements
I do further certify that before answering the foregoing questi	ons, the applicant and said witnesses took the
herein prescribed, and the full text of the affidavits was read to	
I further certify that the tax digest of Full	county shows that applicant
rned for taxation in her own name in 1899	dollars worth
property, and in 1900	dollars worth of property.
Witness my hand and official seal, this	day of Fabry 1907
SEAL)	Well arron Ordinary,
-~' (/ 1 .	ullan County.
res-1. Before any questions are answered, the Ordinary shall swe words: "You do salemnly swear that you will true answer	ar applicant and the witnesses in the following
and the evidence you shall give will be the whole truth; S 2. Additional affidavits may be attached, if blank spaces are in	help you God."
properties any questions are an-wored, the Ordinary shall sew words: "Vou do solemnly wear that you will true answer and the evidence you shall give will be the whole truth; S 2 Additional affidavis may be attached, if blank spaces are is all affidavis must be made before Ordinary. 4. Only widow who were the wives of the dead, husbands, we	hile 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 a	

to	receive	Mm and rec	Setton Setton eipt for the	pension pai	d hereon, and t	d request the	at he remit	same to	
2 h	Exec un (1. 1.	the presence						
			Fucus	3					
			~			-, :			
To Those Heretofore Paid.	1903.	No. 1490	WIDOW'S PENSION,	For year ending Dec. 31, 1903. Solution of Pain To Mas. Or And Mand	Fullen County, Widow of Elli (JOHN W. LINDSEY, Commissioners of Pensions.	WARRANT ISSUED 346 AND HANDED TO	Good wasses morning to	1

Riskland, P.E. May

	POWE	R OF A	TTORNI	ΞY.	
STATE OF G		County.			
1.,					hereby authoriz
		of			
to receive and	receipt for the pe	ension paid her	con, and requ	ost that l	io remit same t
		at			
	SS WHEREOF, I have		ny hand and sea	, this	
day of	1:	904.			
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Executed 1	n presence of				
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		S			
. 1		ž. 7/	aty,		1904,
T a		ii. 1	County,	LINDSEY, Commissioner of Pensions Commissioner of Pensions	=
- E	ZS	SER A	A	7.	
5 K	PEN	EMI	. 1	LINDSEY,	1 Y 2
18 0	7 7 7	NG DEC	(M/M)		AND HANDED TO
え	200	DING PAI	12 3	¥ 3	H W
S SE		ENI	60	JOHN	S S
TO THOSE HERETOFORE	ZZ	EAR	201		i
7 2		FOR YEAR ENDING DECEMBER 31, 1994 PAU L. C. Les M. L. L. ""	Widow of		
1 1		E 1	i		. 1

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, PERSONALLY COMES MRS.
County of Fitton & LE Stirilland
who, being sworn, says on eath, that she is a bona fide resident of said County of Fullon State of Georgia, and that she has RESIDED in said State
continuously ever since /55/ That she is the Widow of
Ster Klaud who was a soldier in Company
(1 of the 30 the ala Regiment of Deportry
Volunteers, that he enlisted in and regiment on or about the month of Field
186 2 and served in the Army up to 1862. That he died
on the 11th day of \2 & c 1862
- 2 Infunity tricity
The same of the sa
7.0
And the second s
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 40 1119 25 at La Grange Ja
i have been allowed an Indigent pension as a resident of Fullow
County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the year ending December 31, 1903.
· · · · · · · · · · · · · · · · · · ·
this 25th day of March 1908 1160 2. C. Millelin (
other Wilkinson Ordinary. Post Office
State of Georgia, John Wilkinson
Stutton County. Ordinary of said County; certify that I am well
acquainted with Mrs L & Surlland , 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
Given under my official signature and seal, this the 25th day of March 1908.
Official Communication
Seal. Ordinary of County.
NOTE. All blanks must be filled. Vouchers and allidavith made bear time inter January let, 1903.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, PERBONALLY COMES MRS.
County of Fulton
who, being sworn, says on oath that she is a bona fide resident of said County of
Full on. State of Georgia, and that she has RESIDED in said State
continuously ever since 1884 . That she is the Widow of
a of the 3 lb ali Regiment of Markey
Volunteers, that he enlisted in said regiment on or about the month of Aut
1862, and served in the Army up to Klee 4th 1862. That he died
on the All day of 1/1862
L & P.
· · · · · · · · · · · · · · · · · · ·
man and the second of the seco
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 60 awy 28 di-
I have been allowed an Indigent pension as a resident of Fulton.
County, under Act 1900, for the year 1903, and now apply for the pension provided by law for the
year ending December 31, 1904.
Sworn to and subscribed before me, this day of the start 1904. Mas L. C. Trix Kloundt
De la companya della companya della companya de la companya della
Some AWIKinson Ordinary.) Post Omee.
VI OD MICH
State of Georgia, 1. John R. Wilhinson
County. Ordinary of said County, certify that I am well
acquainted with Mrs. LE Kirkland, 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 of18 & 4
Given under my official signature and seal, this the
PWildingons!
Official Real County
Cordinary of

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

STATE OF GEO	RGIA,	
	COUNTY.	
1,		, hereby authorize
	of	
	eipt for the pension paid hereon, ar	
	Whereof, I have hereunto set my l	
day of	1905.	
		[L. 8.]
Executed in	presence of	

Mu L. P. Meihland

For year ending Dec. 31, 1905.

To The Western Fig. 1905.

1905.

No. 1/9

INDIGENT
WIDOW'S PENSION,

Fulton.
Widow of E. O. Mercheller
Co. M. 20th Clarkegiment.
JOHN W. LINDSEY,
Commissioner of Pressen.

WARRANT ISSUED

/ 20 1905.
AND HANDED TO

PRINTING AND PUBLISHING DO. ATLANTA,

FORM No. 2

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

	STATE OF GEORGIA, County of Fulton.
	who, being sworn says on oath, that she is a bona fide resident of said County of
	Fulton. State of Georgia, and that she has RESIDED in said State
	continuously eyer since Gold July That she is the Widow of who was a soldier in Company Or of the 30th Regiment of Allaman
	Volunteers, that he enlisted in said regiment on or about the month of Feb
	1862, and served in the Army up to Dee 1862. That he died on
	(Lica milh Small page)
	Infirmity and powerty
	Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
	soldier, and that she has never married since his death aforesaid, and that she became his wife in
	the year is 6 c
	I have been allowed an Indigent pension as a resident of Fulton
	County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the
	year ending December 31, 1905
	c/ College
	Sworn to and subscribed before me, this day of 1905, 1905, 1905.
	Post-Office
	0 0 2
	State of Georgia,
	Filton County. Ordinary of said County, cartify that I am well
	acquainted with Mrs L. E. Soirhland, who made the above affidavit and
	am satisfied that the facts therein stated are true, and I know she is the individual she represents
	herself to be, and that she has continuously resided in this State since the
	day of all of list a
	Given under my official signature and seal, this the day of JAN 2 1905
	OV Paris Grand
	Official Seal.
7 10 10	Ordinary of Fulton. County.

NOTE.—All blauks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1905.

STATE OF GEORGIA,	, ,	
	. County.	
I		_, hereby authorize
	of ·	
to receive and receipt for	the pension paid hereon, and request the	at he remit same to
to receive and receipt for		at the relative state to
-	at	
In Witness Whereof,	I have hereunto set my hand and seal, th	15
day of	1906,	/
		[L. S.]
Executed in 1	presence of	
	3	
	60 6	
C.F.	E LE L	1906.
1 in [SION, 1908. County, County, 18 Regiment	19th
Those Heretofore Paid 1906. No. 97 UDIGENT	For year ending Dec. 31, 1908. Liton of C. Min. Liton C. Min. Liton C. Min. Little Regin John W. LINDSEY,	
Tetolore J O 7	OW'S PENS year ending Dec. 31, 1 Language of Mark of Calle, 1 JOHN W. LINDSEY	
9 0 7	E Com Charles	WARRANT ISSUE AND HANDED T SAME AND FRANCING AND PREVIOUS
は、一旦	And	HAN HAN
\$ 5 0 5 E	N. Francisco	ND ND
Se = 5	New Ho	3 4
36	D 1 3 1 3 7	NOW IT
_	For ye For ye Fulto Widow of Co. C.	2
		, n

POWER OF ATTORNEY.

		WER				
STATE OF C			Causery }			
						hereby authoriz
Ι,		-				
		a pensio	n paid here	on, and req	uest that h	e remit same
			at			
La Wit	ncss Whereof	I have h	iereunto set	my hand ar	nd seal, this	en en responsable en
day of			1907.			
, VI.					-	[L.
Ex	ecuted in pre	sence of				
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9/			15	- 3	ا نے	F.
4		Z.	. 3	Day 1	LINDSEY,	961
3 5	5	1	1907	20	Reg	8
2 5 B	1		3,	500	DSE	Sueb
7 8	GEN	0	Dec	2	LIN C	NI IS
P = 7	9	2	PAID	· 9	JOHN W. LINDSEY	WARRANI ISSUED
715 0		•	5 mg	4	Z	3 2
Ose Heret	0.0		E 20	200	1 8	-
To Those Heretofore Pai	No. 6	M0(Ror year ending Dec. 31, 1907.	Widow of	JOH	

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

The state of the s
STATE OF GEORGIA, County of Fulton PERBOUNDLY COUNTY OF Fulton
who, being sworn says on oath, that she is a bona fide resident of said County of Fulton. State of Georgia, and that she has RESIDED in said State
continuously ever styce 4. Off 4.20' 1846. That she is the Widow of
of the all the Regiment of Life
Volunteers, that he enlisted in said regiment on or about the month of
theday of18
Infirmity and foverty.
2
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18.600.
I have been allowed an Indigent pension as a resident of Fulton.
County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the
year ending December 81, 1906.
Sworn to and subscribed before me the La. E. Kirkelanne
Post Office Uttauta
State of Georgia, County of State Of County of State County, Sertify that I am well
acquainted with Mrs. L. C. Markelland, who made the above affidavit, and
am satisfied that the facts therein stated are true, and I know she is the individual she represents
berself to be, and that she has continuously resided in this State since the day of 1846
Given under my official signature and seal, this this day of JAN 1 1906 1906.
Official Scal Prilion. County,
NOTE.—All blanks must be filled.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, PRESONALITY COMES MIRS.
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 // / / 1846 That she is the Widow of
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St. J. C.
the year 18_6 • The been allowed an Indigent pension as a resident of
year ending December 81, 1907.
Sworn to and subscribed before me
this day of Jan 2 1907.
Yes Williaman, Ordinary. Post Office
Join R. Wilkenson
State of Georgia,
Ordinary of said County, certify that I am well
acquainted with Mrs. 2 L. Mullaud., 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 of18 × 6
Given under my official signature and seal, this theday of JAV 1907.
John R. Wilkenson
Ordinary of F111ton. County.
NOTE.—All blanks must be filled. Youthers and Affidavits must bear date after January 1st, 1907.

County of Fulton.) & Musuama
who, being sworn says on oath, that she is a bona fide resident of said, County of
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who was a soldler in Company
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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 60
I have been allowed an Indigent pension as a resident of Fulton.
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I have been allowed an Indigent pension as a resident of
I have been allowed an Indigent pension as a resident of Filton. County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906.
I have been allowed an Indigent pension as a resident of Filton. County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906. Sworn to and subscribed before me
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Thave been allowed an Indigent pension as a resident of Filton. County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906. Sworn to and subscribed before me day of JAN 1 1906 1908. Post Office Ordinary. State of Georgia, County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. Ordinary deaid County bertify that I am well acquainted with Mra. County.
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I have been allowed an Indigent pension as a resident of Filton. County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906. Sworn to and subscribed before me day of JAN 1 1906 1908 State of Georgia, County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. County. County. Ordinary deaid County, bertify that I am well acquainted 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.
I have been allowed an Indigent pension as a resident of F1111011. County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906. Sworn to and subscribed before me day of JAN 1 1906 1908. Post Office Post Office Post Office County, ordinary daild County, peritry that I am well acquainted with Mra. County, 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 Given under my official signature and seal, this find day of JAN 1 1906 1906.
I have been allowed an Indigent pension as a resident of Filton. County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 81, 1906. Sworn to and subscribed before me day of JAN 1 1906 1908 State of Georgia, County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. County. Ordinary deaid County, bertify that I am well acquainted with Mra. County. County. County. Ordinary deaid County, bertify that I am well acquainted 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.

NOTE.—All blanks must be filed. Vouchers and Addaylie must bear date after January 2st, 2906.

who, being sworn says	s on oath, that she is a bona fide resident of said County of
Liton.	State of Georgia, and that she has RESIDED in said State
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the year 18. 6 • I have been allowed an Indigent per	since his death aforesaid, and that she became his wife in
County, under Act 1900, for the year 190 year ending December 81, 1907.	6, and now apply for the pension provided by law for the
Sworn to and subscribed before	me Sit his Kirkle
You B. Willinson, Ordina	
State of Georgia,	I, John R. Welkenson I, Ordinary of said County, certify that I am well Alaud, who made the above affidavit, and
	are true, and I know she is the individual she represents
	ly resided in this State since the
day of18 📈	6
Given under my official signature a	and seal, this theday of
Official Seal	Ordinary of F111ton. County.

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County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the	year ending December 81, 1907.
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Sworn to and subscribed before me + Alin Lo. C. Kirkelerune	this day of MAN 1907. I had Revillend
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State of Georgia. Jan 1 1906 1908. Post Omoo Cattauta State of Georgia.	State of Georgia,
Track on	County. Ordinary of said County, certify that I am well
County. / Ordinary of said County, pertify that I am well	acquainted with Mrs Le Misklaud, who made the above affidavit, and
acquainted with Mrs. J. S. Mirkland, who made the above affidavit, and	
am satisfied that the facts therein stated are true, and I know she is the individual she represents	am satisfied that the facts therein stated are true, and I know she is the individual she represents
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0/10/11/11/	day of18_K_6
day of Cfor, 18 46	Given under my official signature and seal, this theday ofJAN1907.
Given under my official signature and seal, this the day of JAN 1 1906 1906.	John R. Wilkinson
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See 14 -	Seal Ordinary of F111101 County.
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I have been allowed an Indigent pension as a resident of_

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	signature and soal, this fig. day of JAN 1 1906 1906.	John R. Wilkinson. Sometimes Filton
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The State of Texas Count of Bruith In person came W. B. Gowen before the Undgrasgress who on wall sais from the best of his own personal knowledge and information and belief Meso Face to hiskland of Flore County Brogen is the unton- of Elles Kirkland who was a soldier in Co A of the 30 15 Regiment Alabama Volunteer Col Charles me Shelly Regiment Coop Wow Patterson Company That said Soldier enlister in the service of the Contederal start in Tilladega County Waterma on or about the much of april 1862 the. predicular day is I remembered That while in said service he was stucken down sick and's nent to the Hospital at allantas & saw him any me that him that a cas it to to have diese in the fall of 1862 at allast. in the Bookeline That my opportunity of themens The facts about the said soldier as do which I have testified is that we were in the min -Company and Pogine . T. and heard from thes report pent in and to ... what Commades said that be diese affrant- fuller states that her load argumentice with " wife of some little think larvae but cannot requestion what her given whom I know and I have so do there fours & Kerthenais that person Swom to and subscribed before Just of the frace and la offices

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and subscribed bef of the frace and work lie Smith County Je ****LIGHT PRINT AND. OR BAD COPY **** ****LIGHT PRINT AND. OR BAD COPY **** J. B. STRONG. ORDINARY, TROUP COUNTY County Tigue may 200 149 of bruite County Dexas do hereby certing LAGRANGE, GA., Aag. 8 190/ that B. S. King whose name appears to the applicant in the apposite side of this Paper is now and was an the 25 the day of may 1894 a ligally elected maly The dann E. Millourd 517 South Payer Al-Natary Public in and for Swith Allanla La. County detas and his genuine name and signiture officers and is signed to being being the witness on hand A. n. Madami furnish you a copy of marriage date probe builton to Depar License under deal of Court, but I will have to charge you a small fee. I am sulitled to 200, but of you desire it I will furnish it higor at 100 half prier - I never charge the old Doldiers & widows in my county for their application, but it is now getting to be queli burdensom for me to do this work for nothing yourshuly

Tay Medelle ala Ita's of alabama. Ja. Wadeg a Co The is to Culing that a gardenally Ker Ellis Kirkland and Cante & Kirksand . He Kenew them to the man Vility, we further Knee he Junated in the Confederate army in Colone Sheetys Regiment, Compagnette William Patterson Capitain and was Treported to we the dies of Small yex in altanta The art say of a finite 1894 W. G. Me Phone Va , where with her place our hands This France Perrymon outsorbed Telwoon to before me On their the 3rd day of Ulfril 1894 1 6 10 km. P. Free Marth llia That or Mora a Janade C I to be colly sout of juneally Have Eller Kikland & her High Yours a hertand . That they were man & Hite and that in 1863, after his death I adino wind on his estate and had The Care of his Wedow till the Close of the war. Reported to me that he deed of * mail fox in atlanta Na source inte D place my hand This The Millein We-Subscribed I show to befor The? 11 This The 3 deput 1894)

6 Boy Kings

The State of Academa, Tallauge laurely 3 du pura come & M. Says from his least of his the own and informahian deed bely Men Laura & Kuhland of Flaged Currely Teorgia is the webars of Ellis Kickland who was a saldier in Campany it of the 30 - Required of Alabama Valunting Cal Charles M. Shelly's request Dr Wom Pallenan Caplain. That said solder Enlished in him Servin of the Confiderations in Meladya County Alabania on or about the mouth of april. 1862. The particular day real remembered that While in said server he was strucken down with small pay near Cumberland Lags Town. and was such from there to Knowwell, and I never saw him any mon but know that he was reported to have died about Hely 1862 but whether in the Harpital of Knazulinon of Allanca of do not know of my own Knowledge . That my apportunity of knowing The facts about the said salder on to which I have listified per that we were in the same Dampany and refunch and new and I helped to puch hum in the ambulance when he was and off such, and heard from the reports aut in and from What Courady and that he deed. Affeath feer-This states that he was acquainted with the wife. of said alles Kukland but cannot from his present recollection day that her tiame is dann E. He lift a wednes when he ded whom I know and I have no doubt that My dans a. Kutchand is that present.

State of Feras. 3 In person came 6. K 78 one 21 1 General for Country of I. To I the undersayered, who on oath says, from the own personal anowledge, Ins. Laura E. the ident of Frozed County, Grongie, is the widow of Eclis / Turkland, who was a sordier in Company "il" of the 30th regiment of diabama voimiting; Coloure Sindly regiment; Dr W" Pattison captain; Just said soldier misted in the Samer of the confiderate states on or about the 27th day o, it was, 1862, that while in said service in was thickan lower with small from that he was at atlanta in the hospital when he died of small flox, that he died of small pox are it day of Limber 1862; simt am opentunit of tenousing the facts stated in reference to the deads of applicants lineband were that so cook of along ing to it s and commencing it our sichers told are a wind the in the has death africant further suran rical himo Laura E. Kirkland was the wife of speed soldier during the service of The Considerate State while at was with the hunted Ellis K. Bong States & america. Swow to and subscribed before } MB Gowen one, tim, 13th day of africe 1894. Instree of the frence und Exofficio Stotary Jublice In it Komity Jesas

Subsculit and Livano Sheson to before me this 4day of May 1894 Il. Mun Judy of orrace I til Mucin propos odrovan for said county henry antify that I am well argumented with IM. Golden in forgaing affect and that he is worting of audit and that his apprehim is guine thereto. Leave under my hand thin Real of earl Counts this 4 day of May 1894. S. M. Muin Leamh Consonie

The State of Fixes Come, of South In person came disk the the indexigned who in oath sais that he un personally acquainted with talles hukling and laura & hiskonia before they were morrier and level neighbor to their I marriage and was in the same Comp any with him till he tolked Kirkland was dent to the Health it allines where her list time is several of the Company with them when to look small Por It the was a state of the de the Hogin at qualeum anteres (at (tortie, strings by ment I. The Sitterious Company That race relation intisted in the service of Mus Confederal States in Sittation of the 1811 the firsterday by not remarkered lat white in service to reas streeting love with Bush and and of (11/2 de 12 18 Deg yen of 1862 3 never san him after he wo i to the Hapital but have that the was reported to have dien and FB. Themps in one of our lawy saw him after to trade late out with ismall Por I was in the son . Company Registent and mess.

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International & Great Northern R. R. Co.

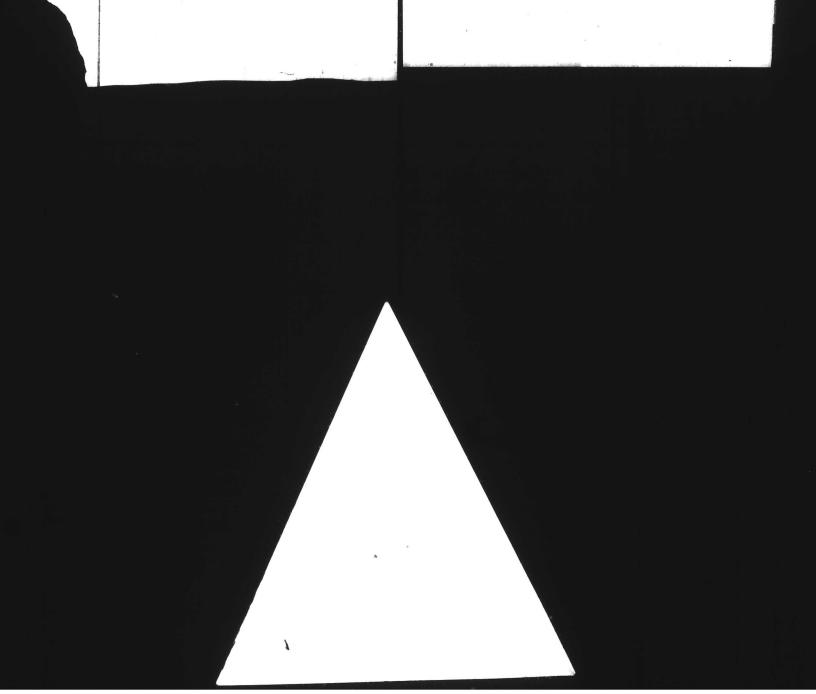
State of Texas. County of Trinity In person came W B Gowen before the undersigned who on oath says that he was personnally acquainted with Ellis Kirkland and Laura E Kirkland before they were married and lived in adjoining naborhood to them after marriage and was a member of the same company with himof the confederate army till said Ellis Kirkland was sent to the Hospital at Atlanta Ga where he was reported to have died with smallpox Deck 4th 1862. There were several of the Company with him when he took smallpox and saw him after he was broken out, . That he was asoldier in Company A commanded by Wm C Patterson and of the 30th Regiment Alabama volunteers commanded by Col, Chas M , Shelly, that said Kirkland enlisted in the service of the confederate states in Talladega Co Ala, on 27th day of Feby 1862. That while in service was stricken down with smallpox and died at Atlanta Ga Dec 4th 1862. I never saw him after he was sent to Hospital but know he was reported to have died there.

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C. J. Hinson Co Judge Trinity County Tryang

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the ser diese until October 1866 when alatama and house to Teraj International & Great Northern R. R. Co. 6. R. Bojas State of Texas, Divora to and Subscribed before me County of Trinity $\hbox{ In person came W B Gowen before the undersigned who on } \\$ this 26d day of may AD. 1894 Justice of the peace and Exofficio notary public oath says that he was personnally acquainted with Ellis Kirkland and Laura E Kirkland before they were married and lived in adjoining naborhood to them after marriage and was a member of the same company with himof the confederate army till said Ellis Kirkland was sent to the Hospital at Atlants Ga Smith County Total where he was reported to have died with smallpox Dec4 4th 1862. There were several of the Company with him when he took smallpox and saw him after he was broken out, . That he was asoldier in Company A commanded by Wm C Patterson and of the 30th Regiment Alabama volunteers commanded by Col, Chas E. R. Broaz M . Shelly that said Kirkland enlisted in the service of the confederate states in Talladega Co Ala, on 27th day of Feby 1862. That while in service was reagned and reason to before med was stricken down with smallpox and died at Atlanta Ga Dec 4th 1862. I never saw him after he was sent to Hospital but know he was reported to on the 16" any of Seft. 1901. George M. Craes, County Judge County, Texas, have died there. MB Sawen Internation source to before me an this 28th day of Defotunter a 2 1901 C. J. Huram Cofuly Francis County Trag



ORDINARY'S CERTIFICATE

No. Faltance	NOTES	are bel		F : 91
Widow's Application To Be Put on Rell in Her Own Right When Husband Was on the Indigent Bell ee Put on Under Act of July 11, 1910— As Amended by Act of 1919.	L Before any question You to solemnly you shall give will be. Additional affaire via that affaire vib and affaire vib and affaire vib and affaire vib and to make the control of Disables arrice—became he agrice—became he	before signing the respective affidavits, and t are entitled to full faith and credit. Sworn under my hand and official scal (SEAL)	the 17 day of That I also know M.	TARE OF GEORGIA, TARES 1. 7. d. C. 1. 7. d. C. 1. 7. d. C. 1. 1. d. C. 1. 1. d. C. 1. 1. d. C. 1. 1. d. C.
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Company 6. Regiment 1.542 14. Approved	Ordinary shall sever applicant and the witness in the following words: The sawers make to each of the questions asked you and the evidence on God, "ore are instificant, Ordinary of the county of ordinary. Ordinary of the county of ordinary. It has contributed, it not, prove marriage, by some person, or by general the filts application likely and exter and prove full term of husband's the filts application likely and exter and prove full term of husband's critics and was not required to do so.	and that they are truthful and trustworthy and their statements as seal of office this. He day of Mod Ordinary.	a bona fide continuing	TY. } Ordinar,
Morried Dea. 11, 1870.	and the witness in the following and the equestions saked you and the connect. Arriage, by some person, or by state and prove full term of his on.	the day of HOV	inuing resident of said County and was witness as to marriage, and I also know	Ordinary of said County, do certify that I the applicant for this pension, and that she is the
J. W. LINDSEY, Commissioner of Pensions. Byrd Printing Ca. State Printers, Atlanta.	d the syldence or by general or by general	y sworn by me heir statements 19 1 9 Ordinary.	inty and was	eertify that I

ORDINARY'S CERTIFICATE

STATE OF GEORGIA, COUNTY. 1	STATE OF GEORGIA, Fulton COUNTY. I. Thoo It Jeffines Ordinary of said County, do certify that I know Mrature R. Management 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 17 day of 100 1919 That I also know His a a Taylor witness as to marriage, and I also know it that both of the foregoing were duly sworn by me	person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the day of the first of the said County and was on the day of the first of the said County and was on the day of the first of the said County and the first of the foregoing were duly aworn by may class.
before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit. Sworn under my hand and official sent of office this. 12 day of 10 Ordinary. (SEAL) Ordinary. County.	before signing the respective affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit. Sworn under my hand and official scal of office this the day of CoC. 1920 (SEAL.) Ordinary. County.
NOTES 1. Hefore any questions are asserted the Ordinary shall sever applicant and the sittees in the following words: "You do selectually search that you will true assertes make to each of the questions asked you and the evidence you shall gere still be the train. So bely you due?" 2. Addit could additive may be attached if blank spaces are imarificate. 3. All arfolavis must be made before the Ordinary of the county of redsience. 4. Inly soldows sho married prior to first almany; Jash, are entitled. 5. The proposition of the property of the state of the proposition of the property of the county of the county of the property o	NOTES: 1. Before any questions are naswered the Ordinary shall swear applicant and the witness in the following words: 'You do soleanly swear that you will true asswers make to each of the questions asked you and the evidence you shall give will be the truth. Be bely you Ged, "now are insurfacing." At a findarite must be made before the Ordinary of the county of residence. At a findarite must be made before the Ordinary of the county of residence. At the country and the property of the county of the country of
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ÓRDINARY'S CERTIFICATE

WIDOW'S 'AFFIDAVIT

STATE OF GEORGIA,	
Fuelon COUNTY.	
Personally before me comes Miss E. King (policies) of said County,	
who after being duly sworn, says that she is the widow of O.K. Kara (palucy)	
to whom in the County of Talislano State of La she was married on	
date of his doubt in Fuelow C 100 and that she has not since his doubt monorpied. At	
date of his death in great in the same has not since his death remarried. At	•
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day of the 1979 Man & Wanthaleton	4
than Is Walling Ordinary	
of Tulton County	
(SEAL)	
Affidavit of Witnesses to Prove Maurings and to Whom	
AND	
Date of Dooth of Husband	
Date of Death of Husband	
STATE OF GEORGIA,	
STATE OF GEORGIA, Tuelon county.	
STATE OF GEORGIA,	
Personally before me comes. Mrs. G. A. Targlan	
Personally before me comes. Mrs. G. Taylor known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. E. Mrs. Palert who made the foregoing	
Personally before me comes. Mis. County. Personally before me comes. Mis. County, who after having been duly sworn, say: that of their own personal knowledge Mrs. E. Mis. Palicett. who made the foregoing affidavit, is the lawful widow of Mrs. County after having been duly sworn, say: that	
STATE OF GEORGIA, Twilton COUNTY Personally before me comes. Mus. a. Taylor known to be responsible and truthful persons, residing in said County, who after having been duly sworn, say: that of their own personal knowledge Mrs. E. Musipalities who died in full of the foregoing affidavit, is the lawful widow of Mus. Balutt's who died in full of County in said State of On Waldy of One of the County in said State of One of the County in State of One of the One of	
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WIDOW'S AFFIDAVIT

STATE OF GEORGIA,	
Trilting county.	0
Personally before me comes Aus Emina & Kirkp ative	I said County,
who, after being duly sworn, says that she is the widow of there Lie Kink	patrick
to whom, in the County of Talicaft Sile State of Jal. she	was married on
the 11 day of DRC 1870, and that she remained his wife, and resided	l with him to the
date of his death in 2012 75 - 1915 and that she has not since his death	remarried. At
the time of his death he was a resident of Fulture GO., Cou	1
of Georgia, and he was on the I miggett Pension Roll of the State at	
of 6000in De Kalls County for 1915 per again, on account of be	
Company Regiment St. Ja. (Volunteers	
That she is now a bonn fide resident efficient of said County of Itstirne	
has so continuously resided since 12. day of 126 feet 1919/	Jen Ja allen
Sworn to and subscribed before me, this the	
day of Oct 1920 Lee	all Sur 10
Within R washest Ordinary Was Emma X K	en year.
of T. Zet & Par . County.	
(NEAL)	
	Vhom.
Affidavit of Witnesses to Prove Marriage and to V Date of Death of Husband	Vhom.
Affidavit of Witnesses to Prove Marriage and to V	Vhom.
Affidavit of Witnesses to Prove Marriage and to V Date of Death of Husband STATE OF GEORGIA, Tue Low COUNTY.	,
Affidavit of Witnesses to Prove Marriage and to V Date of Death of Husband STATE OF GEORGIA,	,
Affidavit of Witnesses to Prove Marriage and to W Date of Death of Husband STATE OF GEORGIA, COUNTY. Personally before me comes Musslander Kantfalung responsible and truthful persons, residing in said County, who after having been duly	known to be
Affidavit of Witnesses to Prove Marriage and to W Date of Death of Husband STATE OF GEORGIA, COUNTY. Personally before me comes Musclineau Kinifalium responsible and truthful persons, residing in said County, who after having been duly of their own personal knowledge Mrs. D. 121. D. 12121111 A. Minifralium	known to be sworn, say: that the foregoing
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Affidavit of Witnesses to Prove Marriage and to V Date of Death of Husband STATE OF GEORGIA, COUNTY. Personally before me comes Marriage & Karafalland responsible and truthful persons, residing in said County, who after having been duly of their own personal knowledge Mrs. 2.13 & Suzzerna A. Airinfration in affidavit, is the lawful widow of Janes A. Mininfration in county in said Mate of Janes A. Mininfration died in the A. Xolny of Death and that she and he had resided tog wife continuously since / I. & day of Death and that she and he had resided tog wife continuously since / I. & day of Death and State from a County (A. 2) (A. 3) (known to be sworn, say: that the foregoing Fits Steen le 10/13.
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State of Georgia, Taliaferro County.

To any Minister of the Cospel, Judge, J. P. or any any person authorized to celebrate:

These are to authorize & permit you to join in the Honourable State of MatriMony John R. Kirkpatrick of the one part and Miss Emma R. Belk of the

MatriMony John R. Kirkpatrick of the one part and Miss Emma R. Belk of the other part according to the rites of your Church provided there be no lawful cause to obstruct the same; and this shall be your authority for so doing, Given under my hand as Ordinary for the County aforesaid, this Tenth day of December, 1870.

Charles A. Beasley, Ordinary.

I hereby certify that John R. Kirkpatrick and Miss Emma R. Belk were joined together in the Holy Bans of Matrimony by me on the Eleventh day of December, 1870.

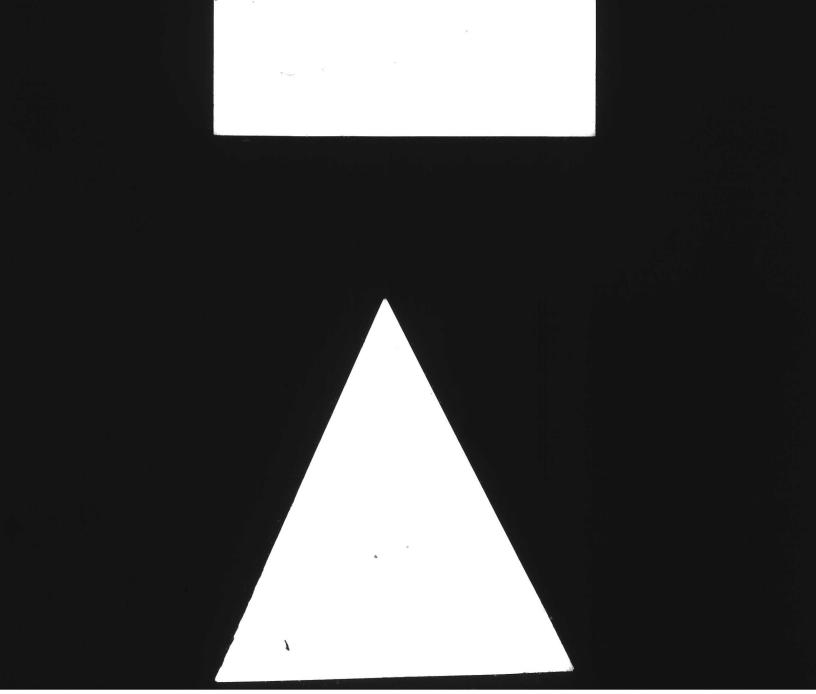
L. R. L. Jennings M. G.

Georgia, Talieferro County.

I, M. Z. Andrews, Ordinary of said County, hereby certify that the foregoing is a true and correct copy of the marriage license of John R. Kirkpatrick and Miss Emma R. Belk as appears of record in my office. Witness my hand and seal of office, this lst, day of October, 1920.

Millst, day of October, 1920.

Millst, day of October, 1920.



Kirkhotick, John 1	and the Elec-						polyacen as	29,000,00
Fulton G.				1		6	1	Ω,
INDIGENT PENSION,				Ex.	E E	receive and rec	<u>,</u>	STATE
1902.				Executed in pro	pud	receipt for the		OF G
Name John R Karkpatisk			8	wence of		pension allow		POWER GEORGIA
Co. D. 15- Ga Reg'm'	190					ed and remeat	COUNTY	R OF
Approved 1902,						of	×.	- 4
JOHN W. LINDSEY, Commissioner of Pensions.	13 · 13 · 13 · 13 · 13 · 13 · 13 · 13 ·	P 4			by_			TORNEY.
WARRANT HANDED TO		Logical American						K
Ordinary will write Name of Applicant, Company and Regiment on back as indicated above.		1			1902	a Green		
Geo. W. Marrison, State Printer, Atlanta,	A - A - Nation	#1	<i>y</i> -		[Ls]	arrior as		

POWER OF ATTORNEY.

STATE OF GEORGIA. COUNTY. to receive and receipt for the pension allowed, and request that he remit same to: Witness my hand and seal, this Executed in presence of INDIGENT PENSION, JOHN W. LINDSEY, Commissioner of Pensis 1902.

	Questions for Applicant.
ST	TATE OF GEORGIA,
	John K. Kirkhatrick of said State and County, desiring
true	vail himself of the Pension Act (Section 1254, Code), hereby submits his proofs, and after being duly sworn answers to make to the following questions, deposes and newers as follows: What is your name and where do you reside? (give Nate, County and post office) Lohn R. Kerkhallill. Juliance Co. 446
2.5	How long and since when have you been a resident of this State?
3. 4.	When and where were you born? Afril: 24-18-37- leslarke Go Su. When and where and in what company and regiment did you enlist or serve? July 1861- Sullipary 100. Ka-600-15-# Isa Rigent
5.	How long did you remain in such company and regiment? To July 1845 - Jun 30
lu	Mays - Juntarfled their fourt to Assente to Hospital la Mill thrust we from saye her suntartyed in stilly owns -
6. a	When and where was your company and regiment surrendered and discharged Durch Know - Who when you company and regiment surrendered and discharged Durch Know - Who was the way of the world will be the world with the way of scharles Jung.
7. 8.	Were you present with your company and regiment when it was surrendered? Mus Maf- If not present, state specifically and clearly where you were, when you left your command, for what cause
and 9.	by whose authority? IMAAA Manne are Frankler at Gentland Stathard Will Landbrard John Manne are specifically authority of How much can you care (gross) per annum by your own exerctions or labor a labour \$ 40.
10.	What has been your occupation since 1865? THE THE ALL ALL ALL LIGHT SET OF THE ALL ALL LIGHT SET OF THE ALL ALL ALL ALL ALL ALL ALL ALL ALL AL
BUDI	port: If upon the second, give a full and complete history of the infirmity and its extent? If upon the third,
a	in pletter you are totally blind and when and whose your look your right = 6 selects Associated blet To work to same of supplies to Part timb blendings. I am hope from hope with the same of supplies to the supplies of the same hope with the same supplies and the same hope with the same supplies to the
1	week, and very infino
13.	
14.	What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898, 1899, 1900 and 1901,
and	what disposition, if any, by sale or gift, have you made of same? Pathing
15.	in what County did you reside during those year, and what property did you then return for taxation, harden to taxation, harde
16.	How were you supported during the years 1800, 1900 and 1901? 123 my Chillian
17. vour	How much did your support cost for each of those years, and what portion did you contribute thereto by
18.	What was your employment during 1898, 1899 and 1901? What pay did you receive in each year?
19. home	Have you a lamily? It so, who composes such family? Give their means of support? Have they a Comment of Support? Have they a Comment of Support?
	Ato Planestias
20.	Are you receiving any pension? If 10, what amount and for what disability?
-	ii linka ka k
21.	Have you ever made an application for pension before?

QUESTIONS FOR WITNESS.

QUESTIONS FOR WITHESS.	
STATE OF GEORGIA,)	•
Telliperio COUNTY.	
80. Hint & R. S. Murthern , of said State and County, having been presented	
as a witness in support of the application of Lam. A Rick ratual, for pension under Section 1254, Code, and after being delease and	
1. What is your name and where do you reside? Sand of Hyrk x Minney & Muches	
2. Are you acquainted with Polin To Keek halice the applicant; if so, how	
long have you known him? /	1
M. When, where and in what company and regiment did be anlist, and how do you know!	
In Any 1861 in brown first the the in in to J. 15th ha Kegt lex were of same Angang	
5. Were you a member of the same company and regiment? Local States	
6. How long did he perform regular military duty? Thence And Hit how, such to the Lorenselted,	
7. When and where was his command surrendered? If lift mealey in 9 aft	
- 2007 applicated their being about one reminded feed upon	
8 Were you present when it surrendered? WC LUCCO	
9. Was applicant present? Was abstul in beautiful	
10. If he was not present, where was he? At helice wounded and full righted	
When did he leave his command? 74 1865; For what cause? Wounded	
By what authority he left? By augker of the feet How do you know all of this?	
At Georgia to dame commund. Teck pulsak made a mode	
11. What property, effects or income has the applicant? (Give your means of knowledge?)	
What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900 and 1901, and	
what disposition, if any, did he make of same! fruit level say	1
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom?	1
14. What is the applicant's occupation and physical condition?	
les train that he is in my facte health .)	
15. i- the applicant unable to support himself by labor of any sort, if so, why?	
15. 15 the applicant unable to support nimeen by labor of any sort, it so, wby:	
	i
16. How was he supported during the years 1898, 1899, 1900 and 1901?	
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? of the Clear pleasand Knawash to are her	3
wheel vay. It has beard that he is very fuller and	
ready traid as a result of the face wound, and that he show the age	
19. What interest have you in the recovery of a pension by this applicant? A shall could be fore me, this the sound subscribed before me, this the sound subscribed before me, this the	1
Sword to and subscribed before me, this the	Bet
Witness.	
Ordinary.	
Georgia Likelina County.	-
I certify that the about withinsonesides in Said Com	15
and an hearthy to be believest your this determine as welles to full	V
11/8 Aug 2 1 11	

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.
Personally came performe Al Ludoma had and
Droffield Dr. T. both known to me as reputable physicians
of said County, who, being severally sworn, say on oath that they have examined carefully
Jehn X. Kuth petter , applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:
Leve . Partial blindner, mine in right, less e
Left eye, - Enlarged prostate, Tille and not
I like to work, so All support.
and that we have no interest in said pension being allowed. (19 Linestanne Mo
Sworn to and subscribed before me, this the
3/st day of July 1902. The morphism
John Wilkinson Ordinary.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
Julian COUNTY.
1. July R Milkingar Ordinary in and for said County, hereby certify
that the applicant Jahn Rhulhahith resides in said County, and has
been a bona fide resident of this Staje since the day of
been a bonn fide resident of this Stage since the day of and that the witnesses, viz.: Martin & Hamilton
Ceaus-
are of trustworthy character, and that their statements are entitled to full faith and credit.
I turther certify that before answering the foregoing questions the applicant and each witness took the oath 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. Hall The County show that applicant
returned for taxation in his name in 1899
property, and in 1900Dollars of property.
In my opinion the foregoing claim ismade in good faith.
Witness my hand and seal of office, this day of June 1902.
John Well wish Ordinary.
of Trulin 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

words: "You shall fue 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." be attached if blank spaces are insufficient.

In every case the ordinary must certify to the character of the witness, and as to the execution of the proof, as above set out.

QUESTIONS FOR WITNESS.

16. Is the applicant unable to support himself by labor of any soy, if so, why? The strains of reactions in free Coursing tentions blink in both has all the reaction of reactions of the support of the		
as a witness in support of the application of the same company and regiment did by collections of the pullowing upon the same and where do you reside? What is your name and where do you reside? At your angulated with the same company and regiment did by collecting upon the same of the pullowing upon the same of the same	Hullan COUNTY	
as a witness in support of the application of labels with the labels of the polymers. In what is your name and where do you reside? Where you acquainted with the labels of the applicant; if so, how long have you known in your way and regiment did bit coiled. Where does he reside, and now long and since when has be been a resident of this State? Where does he reside, and now long and since when has be been a resident of this State? Where does he reside, and now long and since when has be been a resident of this State? Where you a member of the same company and regiment did bit coiled, and how do you know? When long did he perform regular military duty? When and where pas his command surremedered? When applicant present? When applicant present? When applicant present? When did he leave his command? Fur where cause? How do you know all of their labels of the surremedered? When applicant present? When applicant present? When applicant here was he? When the applicant have we was the applicant? (Give your means of knowledge?) Manual applicant of the applicant passess in 1889, 1897, 1898, 1899, 1900 and 1801, and what disposition, if any, did he make of same? What is the applicant any, did he make of same? What is the applicant and the make of same? What is the applicant accupation and physical condition? Manual Manua	11. T. of of.	A LL G. L. C. L. C. L. C. L. C.
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by occupation a	, that	t he enlisted in the mili	tary service of the Con.
federate States (or	of the State of		ng the war between the
States, and served f	or the term of 44	in Company L	, of 18 th Regiment
of you		_; that his p	physical condition is as
follows:	XP		
that his property co	onsists of the following it	ems:	· · · ·
	P .		Constitution Management (see a comment of the comment
of the value of		Dollars, that by	reason of his physical
condition and pove	rty he is unable to suppo	rt himself by his own	exertion or labor, and
	pension but the one here		
Deponent desi	res to participate in the	benefits of the Act, ap	proved December 15th,
	amendatory thereof, and i		
	year 1903. I have beret		sued
county been allowed	d a pension for the year	1903	7 T 2 2 21
	ubscribed before me, this	the G / L X	inte partiet
	1	Ordinary.	
STATE OF	GEORGIA,	1	
	County	.}	
ī	F. M. C. C. Williams	on. / / Or	dinary of said County,
	n well acquainted with		ick
	foregoing affidavit, and		
him in his said affic	lavit are true, and I know	v he is the individual h	e represents himself to
be and that he resid	les in this County.		
	Given under my official	signature and seal, this	4
	day of	1903.	
Affix your	**************************************	1 1	all estand
hore	*	Ordinary	County.
	Note -The blank spaces must b	e filled.	
	Note Affidavit should not be a	sttested before January lat, 19	09.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

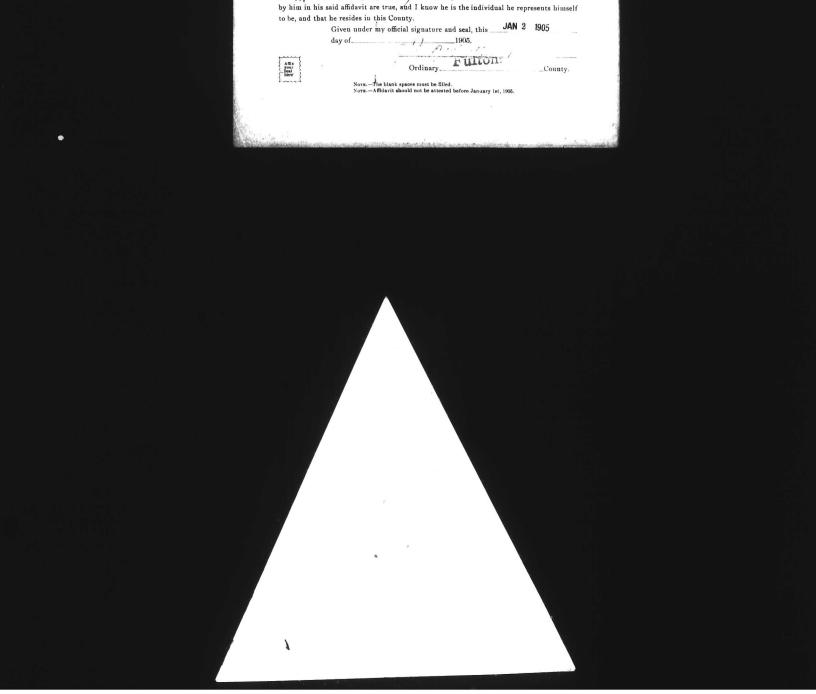
STATE OF GEORGIA,
Fulton. County.) Personally appears ANNIN Matricel
//~ (- (-) -)
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since the 24 day of april 1837; that he is 66 years old and
by occupation a that he enlisted in the military service of the Con-
federate States (or of the State of , . 4) during the war between the
States, and served for the term of 4 4 in Company D, of W th Regiment
of_ Ha ; that his physical condition is as
follows:
Tufine
· ·
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 seceives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1904. I have heretofore as a resident of
County been allowed a pension for the year 1 403
Sworn to and subscribed before me, this the \ \ \ Mail Kirlfout'ie
() day of 1904.
John Allel Russon Ordinary.
STATE OF GEORGIA,
County.)
do certify that I am well acquainted with for heart for catrick
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this JAN 20 49-
day of
day of.
your Beel County.
Norm.—The blank spaces must be filled. Norm.—Affidavic should not be attested before January 1st, 1904.

POWER OF ATTORNEY.

					-		-					
3	STA	TE OF C	GEORGIA,		-	1						
					County	r. \$						
			Ι,							11	ereby a	utho
						of.						
1	to rec	ceive and	receipt for	r the	pension	allowed,	and	request	that	he	remit	same
						at .				(2)		
1	by		/	+				`				
		WITNESS	my hand ar	ıd sea	l, this		day o	of_			1	905.
		Executed	liu the pre	sence	of							_ [L.
June June	(FOR THOSE ALREADY EMPOLLED.)	20 Markath Es 1906	SOLDIER'S PENSION	1905.	Name Jato. C. Alikopatrich	Conney & Regiment St. La.		12 - 1905.	JOHN W. LINDSEY.	Commissioner of Pensions.	WARRANT HANDED TO	The same of the sa

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. County.
Pearsonally appears as M. Michepatrick of Pulton.
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and Chat and have it as a said of the said County and Chat and have it as a said of the said of th
since the
since the day of all his left 18; that he is 6 / years old and by occupation a route the continuously ever
by occupation a revolution, that he enlisted in the military service of the Con-
federate States (or of the State of States, and served for the term of 4 1/1 in Company , of // th Regiment
of Hat his physical condition is as
follows: age and poverty
that his property consists of the following items:
Personal Control of the Control of t
of the value ofDollars. I am now earning,
by my labor, / Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1905. I have heretofore as a resident of
County been allowed a pension for the year 1904.
Sworn to and subscribed before me, this the day of JAN 2 1905 1905. Ordinary.
Ordinary.
CTI ITT OF CEOPER
STATE OF GEORGIA. County.
County.)
do certify that I am well acquainted with sw T. Surspatrich
the applicant in the foregoing affidavid and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this JAN 2 1905
day of
F1417017
Ordinary FULTOII: County.
Nors.—Affidavit should not be attested before January 1st, 1908.



[E] No. /5~ WIDOW'S Indigent Pension. 1901. Name Man Jorres & Je JOHN W. LINDSEY, WARRANT HANDED TO

POWER OF ATTORNEY

POWER OF ATTORNEY.

	I	F GEORGI.	County to re	by his ch	for the pension eck or registered	n allowed and tha	t he
70	(MAL)	d. Lo	1				
off any 2	of a vaded internal value	The day good the	The second second				
Novamy Jennies	No. 7.55-	Cont. Pension.	M. to action.	Total State of the	JOHN W. LINDSEY, Common of Persons WARRANT HANDED TO	1061	Tolder

Questions for Applicant.	
STATE OF GEORGIA,	
Donniter County.	
avail herself of the Pension allowed condigent Widows of Confederate Soldiers, under Act of General Assembly, passed 1900, hereby submits her proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true answer to make the proofs, and after being duly sworn true and the proofs and after being duly sworn true and the proofs and after being duly sworn true and the proofs and after being duly sworn true and the proofs and after being duly sworn true and the proofs and the proofs and after being duly sworn true and the proofs and the proofs and after being duly sworn true and the proofs are the proofs and after being duly sworn true and the proofs are the proofs and after being duly sworn true and the proofs are the proofs and the proofs are the proofs and the proofs are the proofs are the proofs are the proofs and the proofs are the proofs	*
removing duestions, deposes and answers as follows:	
1. What is your name and where do you reside? (Give State, County and Post Office.)	
2 How long and sincerwhen have you been a society of this Marie ?	
2. How long and sings when have you been a resident of this tigate? 3. When and where were you born? Handling doing Parlackii Co. Sa	
George So Ca 24 Appender 1822, Samuel Wiles Stroin	
Marvices the & 4th day of Deplanter 1857	
5. When and where, and in what Cappany and Begidnent did your husband ealist or serve during the war between the States of Sta	-
6. How long did your husband serve in said Company and Regiment? Left - Mrn. to Company	5
1863, and married with the Showing	
 When and where did your husband's Company and Regiment surrender and was discharged? 	
8. Was your huband present at the time and place when his Company and Regiment surrendered?	
9. If not with his command at surrender, state clearly and specifically where he was, when he left com	
mand, for what cause, and by what authority? He was with 1	
10. When and where did your husband die? Himes 10 th day of May 18	8
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?	
12. If upon the free ground, state how long you have been in the a condition that you cannot earn rour support. If upon the record, give a rull and complete bistory of the infirmity and its extent. If upon	
your support. If upon the second, give a full and complete history of the infirmity and its extent. If upon	
to third, state whether you are totally blind, and when and where you lost your sight.	
Harris of Base & Brief to the	0
18. What has been your occupation since your husband's death?	
14. How much can you earn gross, by your own exertion or labor? Mr. Cores. for Road 85-	5
16. What property, real or personal, did you pessens 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? More 21 cups	
17 In what counties did you reside in 1899 and 1906, and what property did you return for taxation?	
18. How have you been supported since feath of husband, and especially for 1899 and 1900?	
18. How have you been supported since floath of bushand, and especially for 1889 and 1900?	
19. How much did your support cost for each of those years, and how much did you contribute by your	
we labor or income? I Contribute to be grant of the half of therefore	.fl.
20. What was your employment during 1899 and 1900—how much did you receive for each year? As Italia & Morra	
21. Have you a family? If so, who composes such family? Give their means of support. Have they	
any lands or other property? no no no	
22. Have you ever made an application for pension before?	
23. How many applications have you made for a Pension, and under what class? Only one	
Swarn to and subscribed before the this the 15	
day of French 190 france to 16 sover	
Ordinary,	

Questions for Witnesses.

TATE	OF GEORGIA,
1	centles_ County.
	1 9 .0
,	of said State and County, having
en presented	as a witness in support of the Application of Mrs.
	ander the Act of 1900, and after having been duly sworn true answers to make to the
	tions, deposes and answers as follows:
towing ques	but is your name and where do you resisted the Manh Wells
1. "	more en la Donato Co Es
2. Ar	e you acquainted with the applicant, Mrs. Plas Journe & Storing
2. Ar	g have you known her? about frity thears
3. W	nede does and reside, and not long the
	Sometaco tall ner colo Parlankis Co La
	hen and where was she born :
	ere you ever acquainted with her husband?
	here did he reside in 1861?
	hen and to whom was he married? Difth day of September 1817
8. W	hen and where was he born? Cheray In Go 240 to the the
9. He	ow long have you known him? about froty Jrano
10 V	When and where did some a College Kerry our enliet in the war between
e States, and	d in what Company and Regiment did he enlist and how do you know this?
	1862 Charliet Crawle Co C. Morroands Vallation
11. V	Were you a member of the same Company and Regiment?
- 10 1000	au j
12. I	low long did be perform regular military duty?
	ofthewar
13. V	When and where was his Company and Regiment surrendered and discharged from service?
	at humbers A.C.
14.	Were you with the command when it surrendered?
15. V	Vas Samuel Willo Herone the husband of applicant present?
	40
16. I	f not present, where was he?
	When and where did he leave his Command?
or what cau	
	thority he left?
	know all this? (State fully and clearly.) Breams I way
	there my and the
•	Latzan tit Wile Korany Dec
18.	When and where did Samues Count Be at Home die?
18.	110 day of may 1880
19.	Where, did he reside at his death and how long had he been a resident of Georgia at his death?
10.	
20 3	
20.	Do you of your own knowledge know that applicant is the lawful widow of
	752
21.	Has she remained unmarried since her soldier husband's death, and is now his widow?
	J. J. J. J. J. J. J. J. J. J. J. J. J. J
22.	What property, effects or income has the applicant, it any, and how do you know this of your
wn knowled	ige? I do not Know
	1 2 7 200 27 27 27 27 27 27 27 27 27 27 27 27 27
23.	What property, effects or income did applicant possess in 1890 and 1900 and what disposition did she
ake of it?_	I do not Know
24.	Has applicant conveyed any property in last two years or given any away, if so what was it and to
whom ?	grove that & Kund of
05	What is applicant's physical condition and her chances and ability to earn a support?
25.	What is applicants payent condition and her condition and northly to earlie a support
S. A.	garant the an all to work
1.00	

26. Is applicant able to earn a support at labor of any sort, if not why	no no
27. How was she supported for 1899 and 1900?	1 Know
28. How much did applicant contribute to her support for last two ye	
29. Give a full and complete statement of applicant's physical condi-	Say whe
30. What interest have you in the recovery of this pension by the ap	plicant?
Sworn to and subscribed before me this the 1st and ay of March 190 . Though Allemi Ordinary,	a 16,16
County.	Witnesses.
Affidavits of Physic	cians.
STATE OF GEORGIA,	
Sunter County.	~
Personally before me comes Dr. Robert G. Co	alo and
hysicians of said county, who, being severally sworn, say on oath that	both known to me to be reputable they have examined carefully Mrs.
	ension under Act of 1900, and after
uch personal examination say that her physical condition is this	- The is very factle
the work for a living	hyicary welste
and we have no interest in said pension if allowed.	1 - 1
Sworn to and subscribed before me this the 27 th	Calo, ma
The mallon Ordinary, 21.5	Prastin M. S.
Sameter County.	
ORDINARY'S CERTIFIC	ATE.
STATE OF GEORGIA,)	
Samter County	
1/0 44 011	linary in and for said county, hereby
	resides in said
county, and has been a bona fide resident of this State since	day of
18, and that the witnesses, Mr. 2 a Nill all'h	or left and RECoa
and in Portling Sect are of trustworth	y character, and that their statements
are entitled to full faith and credit. I do further certify that before answering the foregoing questions, the	a pplicant and said witnesses took the
oath herein prescribed, and the full text of the amdavits was read to the ap	plicant and witnesses before the same
I further certify that the tax digret of Saraha	county shows that applicant
returned for taxation in her own name in 1899	Sent State Part Sent State Sent Sent Sent Sent Sent Sent Sent Se
of property, and in 1900 200 Clear of length 2005	dollars worth of property.
Witness my hand and official seal, this The 1987 day	of March 1901
STAT)	all Ordinary,

Ordinary's Certificate

	COUN 14 Inffice Lorenta herself to be and she	Ord	inary of said County, do cer he applicant for pension. resident citizen of said Cou	She
the witness who awar were duly sworn by worthy, and their stat	ovember 1908; that I also be to the assume of husband, which is against the foregoi ements are entitled to full fund and official seal of office	that believe now ing affidavits and that the aith and credit.	v resident of said County	,
NOTES: 1. Before any 'You do sol you shall give 2. Additional at 3. this widows and the such Codinar such Cod	questions are answered the Ordi mmly swear that you will true it will be the truth. So help you Gi who married prior to January must be made before the Ordi yet copies of marriage license if		the witness in the following we used to saked you and the evid person to be sworn and certifies	ords: dence
Widow's Pension Under Act 1310 as Amended by Act of 1319.	County I We tone Name David Jerranse Hesselva Widow of Sarah W. Hesselva	Regiment 28th ga Jost	J. W. LINDSEY, Commissioner of Pensions.	Period Co. Bases Printers, Adapta.
		*		

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

Questions for Applicant

STATE OF GEORGIA,
Fulton County.
Personally before me comes
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. Jennie E. Kirvin, 14 Ormond St. 2. How long and since when have you been a continuing resident of the State of Georgis!
All my life
3. When, where and to whom were you married! Sep. 24. 1857. Hawkin myille. Ga. to Samuel Wilms Kirvin
a. Have you married since the death of first and soldier husband 1No
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Con-
federate Army or Georgia Militia! (State the arms and class of Service.) Nov. 6 1863 At
Smithville. Ge. Co. "C" 28th Ge. Bet. Vol. Inf. under Capt C. P. Crawford and Maj or Borneud . When and where did the commands of your husband surrender or discharge from the army!
5. When and where did the commands of your busband surrender or discharge from the army t
April 1865 Greensboro, A.C.
Was your husband personally present at the time of the surrender or discharge of this command ! YSA.
7. If he was not present state clearly where he was !
8. Where was his command when he left! surrender
s. 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
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?NQ
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 10 1888 in Sumter Co., Os.
k. Were you residing together when he died? Yes
I If not, how long had you resided apart?Never_resided_apart
m. Are you now a widow?XR.
- 0.0000000 • 0.00000 0.0000000000000000
9. Have you or your husband heretofore been paid a pension by the State?
If so, when and for what cause were you or your husband placed on the roll! Applied on Sumter Co. Fell in 1901 but wes not approved on account of property.
Sworn to and subscribed before me this the
Charles Continued Ordinary
of Pult on County.
(SEAL)

STATE OF GEORGIA. COUNTY OF FULTON.

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

That she is the widow of Samuel Wiles Kirvin, who was a member of Co. "C" 28th Ga. Bat. Vol. Inf. and served with said company and regiment from Nov. 6 1863 to the surrender at Greensbore, N. C. im April 1865.

That F. A. Hill, who was a member of said company and regiment and who previously made affidavit as to the service of affiant's husband in the Confederate Army, is now dead and affiant knows of no living member of said company and regiment. She, therefore submits the affidavit of said F. A. Hill, duly sworn to before the Ordinary of Sumter County, Georgia, on Match 1st, 1901, and asks that same be accepted as proof of the service of her husband as above set out.

Sworn to and subscribed before me

this July 20, 1920. Men fermi Collins

C CORD DARY FULTON COUNTY, GA.

Herry Dilechi Comp.

Book of Marriago Licenses.

Ordinary.

In The Court of Oroman.

It I a Hashins Ordinary of Sared Round: and Enoffers Black of The Court of Oroman. Jertify that the attached and foreign page of fruiting and writing Contains a full, true and Conseptite topy of the Marriage licens of Barnell W Harris and Jone & Milhell, as the ham poplar receive and file in this office.

Witness my hand and the half of hair Court of Hawkinsville ba.

Shis The 21 day of July 1920

H. A. Hadkens, Ord ream

and writing contain a full true and complete lopy of the man lieurs of Samuel W Miron and Jame & Mitchell, as the same poplars of reach and file in this office. Witness my hand and the till of laid down at Hackinsville bea. This The 21 th day of July 1920 and at office class of the and par

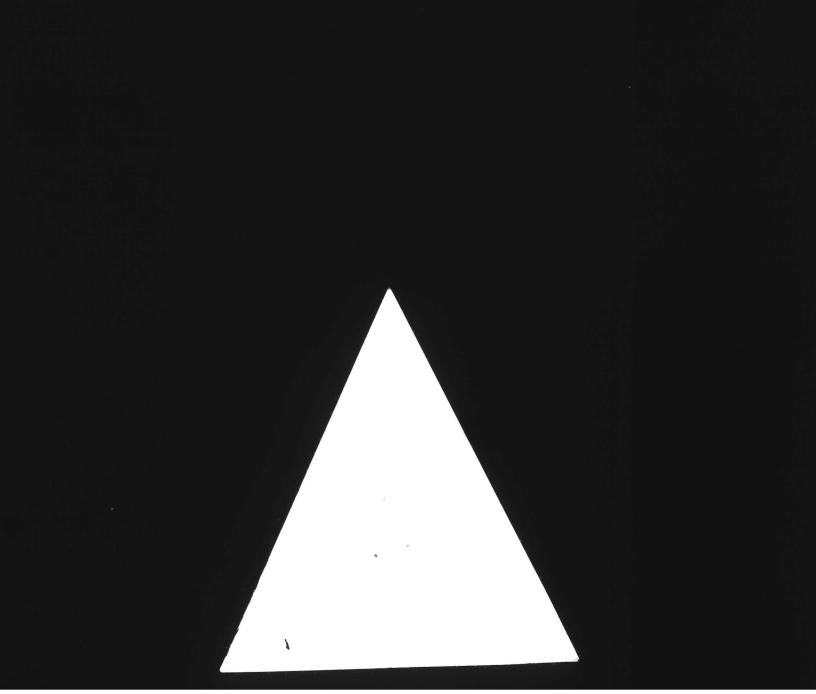


TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

You are hereby authorized to join Samuel W Kervin or the Holy State of Matrisony according to the Constitution and I aws of this Stale and for so doing this shall be your Ficense. And you are hereby required to return this Ficerise to me with your Certificate hereon of the fact and date of the Marriage. John It Brantley Jr CERTIFICATE STATE OF GEORGIA. COUNTY OF PULASKI.

I Codify that Samuel . W. Kiroin and Jane. E. Mitchell were joined in Matrimony by mothis 24 day of Leptenter of Francisco Howarded Sitty Sives

James It Roese M. G.



Ordinary's Certificate

that I know the 4th November 1908, that I also know sents herself to be and she is a bona fide COUNTY

the witness who worthy, and under my hand and official their statements are swears to the service of husband; that both of them are now residents of seal of office this to full faith foregoing affidavits S and that \$77. they both

truthful.

111

the applicant

for pension.

She

of said County

3

(SEAL)

0, The person

each of

asked 8 sworn

County

by

Widow's Pension Widow of ____ C C Kiper Company ... "F" Regiment lst Conf. Vol.

Under Act 1910-as Amended by Act of 1919.

Approved

THE RESERVE OF THE PARTY OF THE

County ____ Fulton____ Name ... Mrs. Eller A. Kiser

Kiser, Co

Pulton

that husband

Applicant must smend and state that the manufactor of the weater he went with the card in what way the slobness affected him way from dutyto close of the war and him honorably many to the end of the war and him honorably many to the should be seen in the control of the war as all to be true by someone that of his or

J.W. Lindsey" Witness of the war.
act of his own
submitted don't

J. W. LINDSEY, Byrd Printing Co., State Printers, Atlanta

COMMISSIONER OF PRISTONS

Commissioner of Pensions. 6/23-1921

O'rdinary's	Certificate
	ì

NOTES: I. Before any questions are any red the Ordinary shall seem applicant and the witness in the following words:

"You do solemuly sever that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. So below you todd."

Addit coals affaliavits may be attached if blank spaces are insufficient.

Unity wishows who married prore to January Ist. 1881, are entitled.

A. All affaliavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.

At the certified copies of matringe license if obtainable. If not, prove marriage, by some person, or by general reputation.

(2) S

C.C. Kiser. Fulton Co.

Applicant must smend and state date that husband left command- to where he went- with what he was sick- and in what way the sickness affected him that kept him away from dutyto close of the war and account for him honorably away to the end of the war. Then prove all to be true by someone that of his own knowledge knows it to be true. Witness submitted don't know .

J.W. Lindsey

COLMISSIONER OF PRESIONS .

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

Questions for Applicant

STATE OF GEORGIA,
Fulton COUNTY.
Personally before me comes. Dillen W. / Will 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! Gillen 1. Austr 134 Guilled live
2 How long and since when have you been a continuing resident of the State of Georgia!
all my life, seventy five years.
3. When, where and to whole were you married!
near Marietta, Ga, C. C. Riser
a. Have you married since the death of first and soldier hasband! A have Mare
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Con-
federate Army or Georgia Militia! (State the arms and class of Service) 1862 1862 1863
60. I st Confederate Volunteers, It you
5. When and where did the commands of your husband surrender or discharge from the army?
Greensbord, N. C. April 26, 1865
6. Was your husband personally present at the time of the surrender or discharge of this command !
re was not.
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 t
b. By whose authority did he leave his command! apture
c. For how long was he granted leave of absence? And office for how long was he granted leave of absence? And office for how long was he granted leave of absence? And office for how long was he granted leave of absence? And office for how long was he granted leave of absence? And office for how long was he granted leave of absence?
e. What was his physical condition when he left his command! Utilical Corndition
f. What effort did he make to return to his command!
g. In what way was he prevented from going back to Command Said Realth
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?
When and where did your first husband die 1 December 13/ 90 3 Utlanta
k. Were you residing together when he died!yes.
i if not, how long had you resided apart! V Never resided apart
m. Are you now a widow t
9. Have you or your husband heretofore been paid a pension by the State!
If so, when and for what cause were you or your husband placed on the roll?
Sworn to and subscribed before me this the
day of September 19.19
Al 2 m. 101 1000 Por 16 1016
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
ofCounty.
(SEAL)

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

Fulton COUNTY
Personally before me comes
being duly sworn, true answers to make to the following questions, answers as follows:
1. What is your name and where do you reside!
J K McKenney, near Austell, Ga.
2. How long and since when have you known Mrs. Ellen A. Kiser applicant?
Just met ber
3. How long and since when has she continuously resided in this State? (Give date.)
Dont know
4. When and to whom was she married !
5. How long and since when did you know C_C_Kiser her
husbandf Over sixty years
6. When and where did C C Kiser
the husband of applicant, die! Dort know
7. Were the applicant and her husband living together as husband and wife at the date of his death?
Dont know
8. If not, how long did they live apart before his death? Dent knew.
Were they divorced 1
9. When, where and in what Company and Regiment did
May 1862, Ft. Gaires, Ga., Co. F. lat Conf. Vol. (Inf)
10. Were you a member of the same Company? Yes
11. How long within your personal knowledge did he perform actual military service with his Company
and Regiment From May 1862 to June 1864, over two years
12. When and where did his Command surrender, and was discharged!
Near Greens boro . N.C April 26 1865
13. Were you personally present when it was surrendered?YgsIf not, where
were youand how came you theref
14. Was the husband of applicant personally present at surrender!NoIf not
where was he!Do nt_know When, where and for what
cause did he leave Command (Give date.)Sent_to_HospitalBy whose
authority did he leave his Command Coursending officers
long was he granted leavet: During period of illnea
I was member of same company and saw bim constantly in service
until about June 1864
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-
mand1 Rad Mealth
16. What effort did he make to return to his Command and how do you know this? Of your own
knowledge or how1
Sworn to and subscribed before me this the
Sworn to and subscribed before me this the
day of September 19.19)

day of September 19.19

Speech to Discussific Ordinary
of Pulton County

(SEAL)

STATE OF GEORGIA.

Personally before the undersigned authority now comes Mrs. Ellen A. Kiser. who upon oath says:

That she is the widow of C C Kiser, who was a member of Co. "F", let Conf. Vol. and served with said company and regiment from May 1862 to June of 1864, when he was forced to leave his command on account of sickness and was nover physically able to rejoin his command; That she has made every effort to locate some member of said company and regiment who could give evidence of her husband's disability after leaving his command in June 1864 and has been unable to doso, and now knows of no living member of said company and regiment who could make such affidavit.

Affiant attaches here to affidavit of the sister of her deceased husband, who is familiar withall of the facts concerning the disability of the said C. C. Kiser, and asks that same be accepted in lieu of affidavit of a member of his own company and regiment.

Sworn to and subscribed before me this June 18, 1920.

Mrs Ellen a Kour.

Ordinary Fulton County, Georgia.

STATE OF TENNESSEE.

Personally before the undersigned authority now comes MRS. W. T. WORLEY, who upon oath says:

That she is the sister of C. C Kiser, deceased, and remembers that the said C. C. Kiser enlisted in the Confederate service in 1862; that he was in Resaca, Gs. in April 1864 and had to leave his command on account of his physical condition and walked home barefooted to Powder Springs, Ga. He was so weak he could hardly walk and refugeed with the family to Newton County, Georgia, to which place he was carried on a mattress in the carriage. He had disreshres, flux and bronchitis. He left us in August 1864 and went back to his company in Laudale, Ala., and also in Mississippi, and then came back to Powder Springs, Cobb County, Ga. in January 1865. He had to be sent back home from hiw command, as he could hardly speak above a whisper and was not able to travel with his command on the march, and later received his discharge at Laudale, Ala.

Affiant further states that the said C. C. Kiser suffered for many months with the flux and br onchitis and, in fact, was affilicted for the remainder of his life with a complaint which was the direct result of his illness with which he was farced to leave his command in 1864; that during the period that he was forced to stay at home, he was not physically fit for military service and never regained his health sufficiently to rejoin his command. That said C. C. Kiser was honorable and upright in every respect and his absence from his command was absolutely unavoidable on his part.

Sworn to and subscribed before me this June 4, 1920.

County Count Carra

mart of Worley

STATE OF GEORGIA. COUNTY OF FULTON.

Personally before the undersigned authority now comes R. W. McAFEE, who upon oath says:

That he has known Mrs. Ellen A. Kiser for over forty years and know her husband, C. C. Kiser; that the said Mrs. Ellen A. Kiser and C. C. Kiser lived together as man and wife continuously for more than twenty-five years before the death of said C. C. Kiser, who died on December 13, 1905; that the said Mrs. Ellen A. Kiser has not remarked since the death of her husband and is now his lawful widow.

Sworn to and subscribed before me this September 17, 1919.

C SORDINARY FULTON CO., GA.

R.M. M. Aflee

MARRIAGE LICENSE

cicero C. Liser

Ellen A. Roberts

Issued Feb. 8, 1871

and recorded on page ... 299

ok A of Marriage Licenses.

Ordinary

STATE OF GEORGIA. COUNTY OF FULTON.

Personally beforethe undersigned authority now comes R. W. McAFFE, who upon oath says:

That he has known Mrs. Ellen A. Kiser for over forty years and knew her husband, C. C. Kiser; that the said Mrs. Ellen A. Kiser and C. C. Kiser lived together as man and wife continuously for more than twenty-five years before the death of said C. C. Kiser, who died on December 13, 1905; that the said Mrs. Ellen A. Kiser has not remarried since the death of her husband and is now his lawful widow.

Sworn to and subscribed before me this September 17, 1919.

C & ORDINARY FULTON CO., GA.

R.M. M. Afre

MARRIAGE LICENSE

O

cicero C. diser

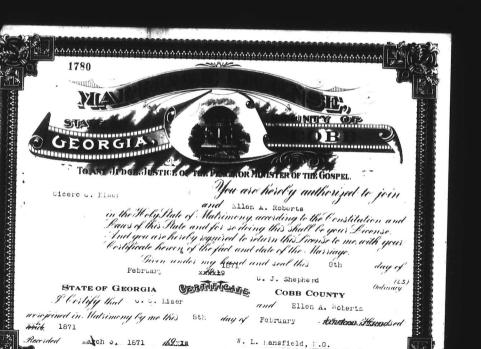
Ellen A. Roberts

ed Feb. 8, 1871 XX

and recorded on page 299

Book A of Marriage Licenses.

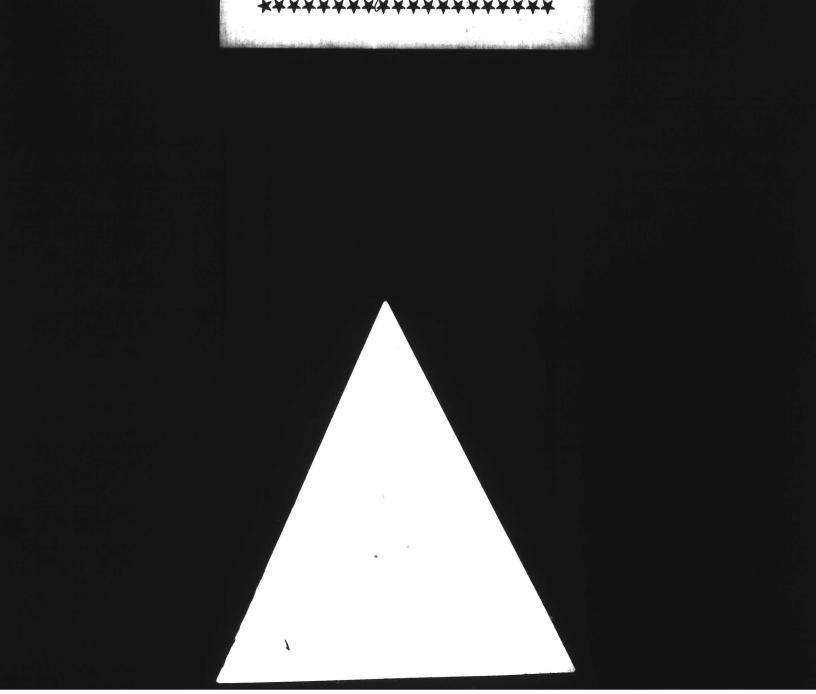
Ordinary



Office of Ordinary

GEORGIA, Cobb County.

I, J. M. GANN, Ordinary and Ex-Officio Clerk of the Court of
rdinary (I having no clerk), do hereby certify that I have compared the
egoing copy of Marriage Linense and Certificate of
Cicero C. Kiser and Mis Ellen A. Roberts
th the original record thereof, now remaining in this office, and the same
a correct transcript therefrom, and of the whole of such original record
found in book A", records of Marriages
, folio
IN TESTIMONY WHEREOF, I have hereunto set my hand
laffixed the seal of the Court of Ordinary, this thelithday September , 1919, 191



KISER, MARY E. (MIO)

WIDOW OF ANDROW JACKSON KISER

FULTON COUNTY. APPROVED EFFECTIVE NOV. 1

Widow's Application

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

County FULTOR Name ! ISET ! Widow of Date of Marriage Dec. 17, 1 885 Date of Husband's Death Ju. .. 0, 1908

Company . Co. 7, lot Confederate Regiment Incantry

198 48

Approved Oct. 1C Lillian Jendus Director.

> CONTENED AND DIVISION State Department of Public Welfare

CONFEDERATE PENSION AND RECORD DEPARTMENT. Received Oct. 14, 1948. Approved Oct. 16, 1948.

CONFEDERATE PENSION & RECORD DEPT., Atlanta, 3a., 10.16.1948

Amirew Jackson Klaer enlisted as a private in the Co. F,lst Conference need. Inf. May 1, 1862. Detailed in Conference lent. ent to Atlanta, 3a. hosoitalwin typicii fever July 1984. Period med for

The last of the of a of a of animal data to the one of a control of Pulsar doubt. Her object of reserve to the object of the obj

Lelle an Hinduson.

The Persion & Record

Director. Confederate

198 48

d, 1908

Date of Marriage Date of Husb Widow of County

CONFEDERATE PENSION AND RECORD DEPARTMENT. Received Oct. 13, 1948. Approved Oct. 14, 1948. APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

	QUESTIONS	FOR	APPLICANT	TO	ANSWER:
STATE OF	GEORGIA,				

FULTON

and h	
after wit:	Personally appeared before me, Mary E. Kiser of said State and County, hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and 20nstitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, being duly sworn, true answers to make to the questions propounded, answers as follows, to-
	TION I.
1. Ma	What is your name, and where do you reside? (Give Post Office and County)
2. of Ge	How long and since when have you been, continuously, a bona fide resident citizen of the State sorgia? _All my life
Give	date, or year, of your birth Aug. 10, 1862 Age? 86
8.	(1) When, (2) where and (8) to whom were you married? Dec. 17, 1885, Troup C: Point, Ga. Andrew Jackson Kisef
	Have you married since the death of first and soldier husband?
b.	When and where did your soldier husband die? July 30, 1908, Atla nta, Gs.
	Were you residing together when he died? Yas
d.	If not, how long had you resided apart?
e.	Van
	Have you or your husband heretofore been paid a pension by the State? No.
g.	If so, in what county was first pension drawn and what year were you or your husband placed on rolls?
	ON FOLIS 7
	When, where and in what Company and Regiment did your husband enlist as a soldier in
	Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops. .isted May 13, 1862, Co. F., First Confederate Georgia Reg.
Enl Col	isted May 13, 1852, Co. F., First Confederate Georgia Reg. Geo. A. Smith. Infantry. from State of Georgia. When and where was the Command of your husband surrendered? April or May.
Enl Col	isted May 13, 1852, Co. F., First Confederate Georgia Reg. Geo. A. Smith. Infantry. from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C.
Enl Col 2.	isted May 13, 1852, Co. F., First Confederate Georgia Reg. Geo. A. Smith. Infantry. from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C.
Enl Col 2.	isted May 13, 1862, Co. F., First Confederate Georgia Reg. Geo. A. Smith, Infantry, from State of Georgia. When and where was the Command of your husband surrendered? April or May, 1865, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered?
2. 18	isted May 13, 1862, Co. F., First Confederate Georgia Reg. Geo. A. Smith, Infantry, from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? -Present.
2. 18 3.	isted May 13, 1852, Co. F., First Confederate Georgia Reg., Geo. A. Smith. Infantry. from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? -Present. If he was not present, state specifically and clearly where he was?
2. 18 8. 4. 5.	April or May, 13, 1852, Co. F., First Confederate Georgia Reg., Geo. A. Smith, Infantry, from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? -Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender
2. 18 3. 4. 5.	isted May 13, 1852, Co. F., First Confederate Georgia Reg., Geo. A. Smith, Infantry, from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? - Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War clossed By whose authority did he leave? For how long was his leave of absence granted? d. In what way?
2. 18 3. 4. 5. a. b. c. e.	April or May, 13, 1852, Co. F., First Confederate Georgia Reg., Geo. A. Smith, Infantry, from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War closed By whose authority did he leave? For how long was his leave of absence granted? d. In what way? What was his physical condition when he left his Command? Fair
2. 18 3. 4. 5. a. b. c.	April or May, 13, 1852, Co. F., First Confederate Georgia Reg., Geo. A. Smith, Infantry, from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War closed By whose authority did he leave? d. In what way? What was his physical condition when he left his Command? Fair What effort did he make to return to his Command?
2. 18 3. 4. 5. a. b. c. e.	isted May 13, 1852, Co. F., First Confederate Georgia Reg., Geo. A. Smith, Infantry, from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? - Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War closed By whose authority did he leave? - For how long was his leave of absence granted? d. In what way? What was his physical condition when he left his Command? Fair What effort did he make to return to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command? - In what way was he prevented from going back to his Command?
2. 18 3. 4. 5. a. b. c.	April or May, 13, 1852, Co. F., First Confederate Georgia Reg., Geo. A. Smith, Infantry, from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? -Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War closed By whose authority did he leave? For how long was his leave of absence granted? What was his physical condition when he left his Command? Fair What effort did he make to return to his Command? In what way was he prevented from going back to his Command? Was he captured by the enemy at any time? No
2. 18 3. 4. 5. a. b. c. e. f. g.	isted May 13, 1852, Co. F., First Confederate Georgia Reg., Geo. A. Smith, Infantry, from State of Georgia. When and where was the Command of your husband surrendered? April or May, 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War closed By whose authority did he leave? For how long was his leave of absence granted? d. In what way? What effort did he make to return to his Command? Fair What effort did he make to return to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command? In what way was he prevented from going back to his Command?
2. 18 3. 4. 5. a. b. c. e. f. g. h. i.	April or May. 13, 1852, Co. F., First Confederate Georgia Reg., Geo. A. Smith. Infantry. from State of Georgia. When and where was the Command of your husband surrendered? April or May. 165, Charlotte, N. C. Was your husband personally present with his Command when it was surrendered?—Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War closed By whose authority did he leave?———————————————————————————————————
2. 18 3. 4. 5. a. b. c. e. f. g. h. i.	April or May. When and where was the Command of your husband surrendered? April or May. April or May. April or May. Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War closed By whose authority did he leave? For how long was his leave of absence granted? What effort did he make to return to his Command? In what way was he prevented from going back to his Command? Was he captured by the enemy at any time? Was he held and when was he released? Out to and subscribed before me, this the
2. 18 3. 4. 5. a. b. c. e. f. g. h. i.	April or May. When and where was the Command of your husband surrendered? April or May. April or May. April or May. Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War closed By whose authority did he leave? For how long was his leave of absence granted? What effort did he make to return to his Command? In what way was he prevented from going back to his Command? Was he captured by the enemy at any time? Was he held and when was he released? Out to and subscribed before me, this the
2. 18 3. 4. 5. a. b. c. e. f. g. h. i.	April or May. When and where was the Command of your husband surrendered? April or May. Soft Charlotte, N. C. Was your husband personally present with his Command when it was surrendered? Present. If he was not present, state specifically and clearly where he was? When did he leave the Command? At the surrender For what cause did he leave? War closed By whose authority did he leave? For how long was his leave of absence granted? What was his physical condition when he left his Command? What was his physical condition when he left his Command? In what way was he prevented from going back to his Command? Was he captured by the enemy at any time? No If so, when and where? In what prison was he held and when was he released?



(MM)

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

Widow's Application

1

	COUNTY.
	of said State and County is hereby presented
as a witness in support of the a	
	s amended by the Act of 1919 and the Constitutional Amendments
	, who, after being sworn true answers to make to the questions
propounded, answers as follows	
1. What is your name and w	there do you reside? (Give Post Office and County)
2. How long and since when	have you known applicant
	le, and since when has she been, continuously, a bona fide resident
citizen of this State?	
When and to whom was s	she married? How do you knew?
How long and since when	did you know her
husband?	
6. When and where did	
the husband of applicant, die?	
	er husband living together as husband and wife at the date of his
death?	
8. If not, how long did they	live apart before his death?
Were they divorced?	
Sworn to and subscribed befor	re me this the 3
day of	, 193 (Witness)
	County
(SEAL OF ORDINARY)	county.
	Ordinary's Certificate
STATE OF GEORGIA,	
FULTON	COUNTY.
I, EUGENE GUNB	Ordinary of said County, do certify
that I know Mrs. Mar	y E. Kiser the applicant for pension; that
	herself to be, and that she has been, continuously, a bona fide resi-
	anuary 1st, 1920; that I also know
the witness who swears to the se	ervice of husband and/or the marriage; that both of them are now
pasidente of said-Gounty and-we	ere-duly sworn-by-me before-signing the foregoing affidavit, and
hat they are truthful and trust	worthy and their statements are entitled to full-faith-and credit
Given under my hand and se	eal of office this 15th day of October , 198 48
(SEAL OF ORDINARY)	Gugene Bearly Ordinary
	FULTON County.
	INSTRUCTIONS:
Before any questions are ans words: "You do solemnly swear that you shall give will be the whole touth	you will true answers make to each of the questions asked you and the evidence. So help you God."
1. Before any questions are answords: "You do solemnly swear that you shall give will be the whole truth. 2. Additional sindavits may be a S. Only widows who married prid. 4. All affidavits must be made be not be excelled by such Ordinary.	wered the Ordinary shall swear applicant and the witness in the following you will true answers make to each of the questions sked you and the evidence . So help you God." stached if blank spaces are insufficient. or to January 1st, 1990, are eligible. fore the Ordinary of the County is which the applicant or witness resides and
1. Before any questions are answords: "You do solemnly swear that you shall give will be the whole truth. 2. Additional siffactive may be a 3. Only widows who married primus be a supplement of the supplement o	you will true answers make to each of the questions asked you and the evidence to the help you God." Stacked if blank was make to sean of the questions asked you and the evidence totached if blank asked with the control of the con

eral reputation.

The reputation of the control of the reputation

SPARTMENT OF COMMERCE CENTER	TCATE OF DEATH State File No
BUREAU OF THE CENSUS GEORGIA DEPA	ETMENT OF PUBLIC HEALTH
l. Piece el Douth	2. Usual Residence of Decoused
(a) County Fulton Dist. No.	(e) State G8. (b) County Fulton
(b) Town Atlanta	City or Atlanta (c) Town. Atlanta (r) Outside Olin; or Young Limits, Write Bornt)
(if Gutside Gity or Tewn Limits, Write Sures)	
Hame of Hosp- (a) or finelitation 826 De Ke 1b	(4) 22 2. 22 24 11
(d) Longth of Story Hoop, or In This Community	(c) Foreign Country? (Yes. Hame of the Ho.) Hame of the Ho.) Country Humber H. Veterm Heme Wer Societ Security Humber
A. J. KISER	MEDICAL CIRTIFICATION
PRISONAL AND STATISTICAL PARTICULARS	
Male White & Stetus (circle) W. D	puts of July 30 10 OS Time (Mary 1 Miles)
7. Give Reine of Sposes	
8. Age Years Mouths Days II less then 94 less fire. Mrs. Mrs.	54. I hereby certify that I attended the descared who died on the above date. I last saw
9. Deto of 1844 Note Georgia	HAlive on10Duration
Mo. Dey Your	Primary Course of Dooth Brights Disease 1 ys.
16. Occupation	
Industry 11. or Business	(Flease Vadorillae the Gases to Which Yule Death Should S: Charged)
	Contributory Control
18. Hema Georgia	Clasteding Any Propagate Within Three Health of Death)
Meddon 14. Hema	
14. Heme	Operation. Date of Diagnosia : Clinical. Was Autopay Operation Leb., X-Rey (Check) Furiermod :
Informania	28. If doeth was due to external violence ploase unawer the following questions :
Informante 16. Own Rignesture 17. Informante P. O. Address	(a) Rosident, Sminide Dute of Homiside (Specify) (b) Courrence
Budel Cremetten Burial (c) Date	Pioco el (e) Accident
	Whore I Home, Form. While at (d) industry. Public Ploos Work.
18. Place of Bratel	(d) Industry, Poblic Floor
M. Burging Body. Atlanta Ga. Daniel	(e) Injury
11. D. O. Address of Atlanta, Ga.	25. Over Signature H. B. Shultz
Registration of the territories	Atlente, Ge.
(Cheek Cordinate Caretory Extern Engany)	
c.	BRTIFIED COPT
State of Georgia Pulton	
County of	od as the to the other of Hacking mi
I hereby certify that the feregoing is a true and correct copy of a roce	don the in the own of I factory m.
	(Blaned)
1	14 7

(Golfary) (Bodth Officer)

State of Georgia, Troup County

Ordinary's-ss:

I, Mrs.Virginia Coker Ordinary of said County, do hereby certify that I have compared the foregoing copy of Marriage License and Certificate of Andrew J. Kiser and Miss Emma Dixon

with the original record thereof, now remaining in this office, and the same is a cerrect transcript therefrom, and the whole of such original record.

In Testimony Whereof, I have hereunto set my hand and affixed the seal of the Court of Ordinary, this the 1^{l_1} th day of October 19 l_2 5

Mrs. Virginia Caker

7	
Waiver of Pa TO THE ORDINARY OF We, the purent [or] guardian	MARRIAGE LICENSE OF Andrew J. Kieer
of Pa	Miss Emma Dixon
arent	Issued Pecember 7 xxx
or O	and Recorded on Page 214 Book
Ga	of Marriage Licenses. I R.M. Young
ian for	Ordmary
Waiver of Parent or Guardian for Marriage License Ga	•
icense	
1	ADDETTS & COR. BIEDINGRAG

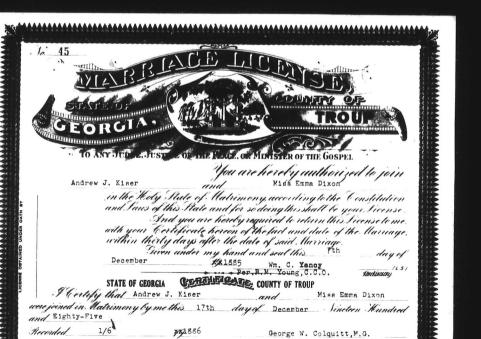
張

and waive the posting of notice of same as required by law.

Witness.

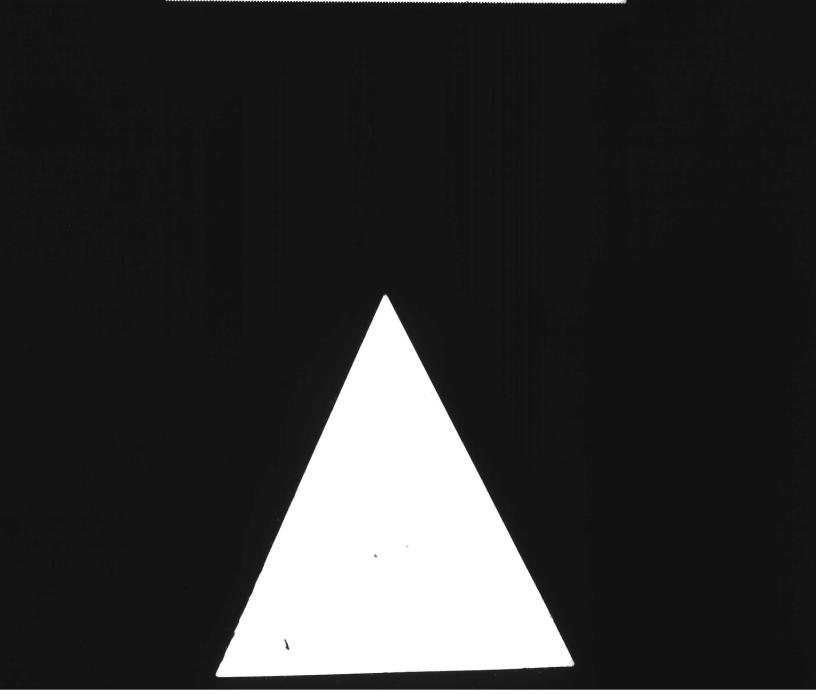
a female of the age of ______, hereby censent to issuance of marriage license to her and

emale of the age of. THE ORDINARY OF.
We, the parent
[or] guardian MARRIAGE LICENSE waive the posting of notice of same Waiver of Parent or Andrew J. Kiser AND Miss Emma Dixon Bluember 7 x#0_1885 Issued____ of and Recorded on Page 214 Book hereby consent to issuance of marriage license to her and as required by law Guardian of Marriage Licenses. R.M. Young-Ordinary for Marriage License COUNTY, GEORGIA: ------



R.M. Young

Ordinary.



27 Pil man as	Proming to 18/8 wife -
NDIGENT PENSION	Rich Johnson
ame f. Holistler	
RICHARD JOHNSON, Commissioner of Pensions. WARRANT "HANDED TO App of	

1

	1	to 1	1		Ĭ	S
T		eccive and		Ι,		[ATE
-		receipt				OF
W		to receive and receipt for the pension allowed and request that he remit same to			CC	STATE OF GEORGIA.
•		sion allowe	of		COUNTY.	RGIA.
	-	d and rec				•
		quest tha				
		t he ren	of			
	by	nit same				
	-	to				
1000				herel		
ŏ				hereby authorize		

Executed in presence of

٠,	GEORGIA	OF	STATE
	COUNTY		

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 __1898. Executed in presence of

WARRANT HANDED TO RICHARD JOHNSON, Approved

O II Militer A II II
Questicant Applicant
STATE OF GEORGIA,
County.
Paul Viiher 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.)
1. What is your name and where do you reside? (give State, County and post office.) Sand A. Six les 1028 Conswant Millian Section County, Surgery
2. How long and since when have you been a resident of this State? Well of my life
3. When and where were you born? Then for County June 11. 184
4. When and where and in what company and regiment did you splist or serve? Child from toll?
When in G. & 11th them to them to the fresh in hely 10186 1.
Whit middle of lepice 1869 in 11 6. 18
5. How long did you remain in such company and regiment But be well in the like
6. For how long a period did you discharge regular military duty? 24 Miral as
7. When, where and under what circumstances were you discharged from service? " 114.3
WE WERE ONE of the tree will of orest trees writing
8. What is your present occupations Podella.
9. How much can you earn (gross) per annum by your own exertions or labor?
10. What has been your occupation since 1865? Colling & Chaile
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"? Mec out 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?
2. £
13. What property, effects or income do you possess and its gross value? Homeing
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897 and what disposition,
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? Helic Ly Caph Helical Congae hards (Call
May 197-
15. In what County did you reside during those years and what property did you then return for taxation?
Outella land, hothing
16. Mowwere you supported during the years 1898 and 1897? By Scholling & fin hill
17. How much did your support cost for each of those years and what nortion did you contribute thereto
by your own labor or Income ? CIL ach \$100 110 K Min 1
18 What was your employment during 1896 and 1897? What pay did you receive in each year?

19 than was your employment ourning sow and now? What hay gid you good on each year?

10. Have you a family? If so, who composes such family? Give their means of support? Here they a homestead? If the Aud one Principality Receipt to the total facility.

10. The receive stee A

20. Are you receiving any pension, if so, what amount and for what disability? Ho

Applicant.

OUESTIONS FOR WITNESS

QUESTIONS FOR WITNESS.
STATE OF GEORGIA,
Fulla County
G. Me. Beecen & P. Gillowan gulkilchell
as a witness in support of the application of Paul H. Kartla 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? but Buchy
X. Hill Willolack being but I P bulleren Fully Co.
2. Are you acquainted with the second of the second of the applicant, if so
how long have you known him? Les I Jeans
1. Where does he reside, and how long and since when has he been a resident of this State?
Lacside Voll 2, & Beulinana Stattante Residentallonglife
4. When, where and in what company and regiment did he enlist, and how do you know?
1844, Kot, Kulov Balla Buch, I was there
6. How long did he perform regular military duty, and what do you know of his service as a Confed-
erate soldier, and the time and circumstances of his discharge from the service? About the
rear & Know he served, at the Enroude.
at next direct &, est It Zylar, to Milanes
Cabally
7. What property effects or income has the applicant? (Give your means of knowledge.)
None I hour have con the family for therty years
8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if
any, did be make of same? - LIW Harriand Wayore The Harse
died welfy.
9. Has be conveyed away any of his property in the last three years, if so, what was it and to whom?
Llouryed sun alal
10. What is the applicant's occupation and physical condition? / Zalice Condition
Consularifition Catarent General, dispositify
11. Is the applicant unable to support pimself by labor of any sort, if so, why?
Ale is they to many when discussed
12. How was he supported during the years 1896 and 1897?
By Pedling and the helps of friends
13/ What portion of this support for these two years was derived from his won labor or income? Liffar a bout History Little dellars.
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? Hinst Conssultion Seone
Estarel and General, disability Bring
Much le to Zar & any Thing life a Suffert of ling 15. What interest have you'n the recovery of pension by his applicant? Do it
Sworn to and subscribed before me, this
the 24 day of Jeresevery 1898.) as to question, 1.2, Witness.
The Harden porlinary. I Cultures on Porinte Coll.
W. Wirbles

APPENDAMIT OF DUMOIOLANO

STATE OF GEORGIA,
-hillon County.
Personally came before me ILC I TUTO ICAS and
of said County, who being severally sworn, say on oath that they have examined carefully . James
. Fr Ristlet , applicant for pension under the Act of 1894, and after
such personal examination say that his precise physical condition is as follows:
Chronic pulmeran tuberculaver
loiel general eleterici
\mathcal{L}
de · · ·
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
Sworn to and subscribed before me this the 24 Laday of January 1898.
Ordinary,
ORDINARYS' CERTIFICATE.
STATE OF GEORGIA,
Ful Can County!
I, _ Pall Toules , Ordinary in and for said County, hereby ceptify
that the applicant fruit of Turker resides in said County and has
been a bona fide resident of this State since the 2 are fine the day of
and that the witnesses, viz. & nc 13 acm colonian 676
are of trust worthy character and that their statements are entitled to full faith and credit.
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.
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
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.
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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

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

Additional Control of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."

Additional Control of the questions asked of you, and the evidence you shall give will be the whole truth, so help you God."

Additional Control of the questions are the properties of God."

2. Additional affidavia may be attached if blank spaces are insufficient.

3. In every case the Ordinary must certify to the character of the winness, and as to the execution of the proof as above at out.

STATE OF GEORGIA	Α,)		POWER OF ATTORNEY.	
Ι,	County.	hereby authorize	STATE OF GEORGIA, County.	
	of	5	I, and an an an an an an an an an an an an an	hereby authorize
o receive and receipt for	the pension allowed, and request the	nat he remit same to	of	
	at .	THE PERSON NAMED IN COLUMN NAM	to receive and receipt for the pension allowed, and request that he	remit same to
by.			_ at	
Witness my hand and	d seal, this day of.	1909.	by	
		[L. S.]	WITHESS my hand and seal, thisday of	1907.
Executed in presen	ace of		*	[1 5.]
			Executed in presence of	
			Company of the second control of the second	
			,	
_		. k 1 F	20 DOOR 5	1
3	SULUDIER'S PERSION 1900. Name F. C. C. C. County WARRANT ISSUED ARCEN (C. 1900)	enotena ====================================		1/2
For Those Already Enrolled.) NO. F.O. INDIGENT	2	EY.	HELL, O. H. HUELL COAD BESSEDO 184, NA. 321 INDIGENT INDIGENT ISOOZ. Regiment. Regiment. AMARANT ISSUED WARRANT ISSUED WARRANT ISSUED JOHN W. LINDSEY. Commissioner of Pru.	2
CODE SEC. 1224. Those Already Enro NO. & O INDIGENT	1900.	LINDSEY Commissioner of BANDED TO BANDED TO	Coas Brosson 124. Coas Brosson 124. INDIGENT INDIGENT ISON Regiment Regiment Regiment Regiment COAN W. LANDSEY Commission	WARRANT HANDED PL
NDIGEN		Comm Gomman HANI	Handle Ha	HAN
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No.	☐ 3 × R 3	WARRANT WARRANT GOO, W. HATROOL	MA NA NA NA NA NA NA NA NA NA NA NA NA NA	ARR.
[a [a	5	o * 7 8		8
7	Name County			
t	A Z ů		2 2 3 3	1.5
			The state of the s	

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
County
personally appears 94 Kischer of FULIVI
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 June 1845; that he is 54 years old and
by occupation a ;that he enlisted in the military service of the Confed-
erate States (or of the State of Su-) during the war between the States,
and served for the term of 2 Have in Company E., of // th Regiment of
72. E; that his physical condition is as
General delecting
that his property consists of the following items
that his property consists of the following feems
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 tillion
county been allowed a pension for the year 189_9_
Sworn to and subscribed before me, this, the
day of
day of Cores 1900.)
State of Georgia,
County.
1, Y Ordinary of said County.
do certify that I am well acquainted with House County,
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of
ber }
Ordinary_ FULTON County.
Nors. — The blank spaces must be filled.
Note,—A fildavit should not be attested belore January 1st, 1930.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,
Country
Personally appears 1.16, Ristler 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 12 that he is 62 years old
and by occupation a phat he collisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of 3/242 in Company Li, of // th Regiment
of that his physical condition is as follows: It follows:
follows: Lunily I 2 2 cc iti
and commence of the contract o
Annual of the second of the se
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
and the second control of the contro
County, been allowed a pension for the year 1906. Sworn to and subscribed before me, this the
day of
July of Wilherman Ordinary.
State of Georgia,
County.)
1, Ordinary of said County,
do certify that I am well acquainted with Illi Aldle ?
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal this
day of1907.
<u> </u>
Adia four OrdinaryCounty.
here

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

		EORGIA,	}					
			County.					
I,				hereby	authorize			
				of.				
o receiv	e and r	eceipt for	the pensi	on allowed and	request	that he	remit same to	
			. 4	at				
оу								
W	itness m	y hand and	seal, this_	day of			1901.	
		1					_[L. S.]	
Ex	ecuted in	n presence	of					
CODE SECTION 1264 (For Those Aiready Enrolled.)	No. 526	INDIGENT	1901.	Name Marklen	WARRANT ISSUED	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT BANDED TO ### AM AM AM AM AM AM AM AM AM AM AM AM AM	

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,			
	6	7.11/2	
personally appears FIX Kielter	of_ 🛇	iti m	
County, State of Georgia, who being duly sworn,	says on oath tha	the is a bona fi	de citizen
and resident of said County and State, and has			
since the day of lea	_18/1; that		•
and by occupation a that he e	nlisted in the mi	litary service o	f the Con-
federate States (or of the State of		ng the war be	
States, and served for the term of Type and	in Company	, of // the physical cond	
follows:			
Love Debil	cty		
hat his property consists of the following items_		\	
40. 45. 10.			
			# # Const.
f the value of	Dollars, that b	by reason of hi	s physical
ondition and poverty he is unable to support hi	mself by his ow	n exertion or l	abor, and
hat he receives no pension but the one herein ap	plied for.		
Deponent desires to participate in the benefit	(E)	pproved Decem	ber 15th.
1894, and the Acts amendatory thereof, and make			
he is entitled for the year 1901. I have heretofo	tes application i	211	100
ne is entitled for the year 1901. I have heretord	re as a resident	01_5	
county been allowed a pension for the year 1	0		•
Sworn to and subscribed before me, this the	1 928/1	Beller	-
4th day of Jacry 1901.	201		
Mor Wilkumon Ord	inary.		
STATE OF GEORGIA,			
County.)			
TORUN WIKINGU	1 /	Ordinary of sai	d County,
do certify that I am well acquainted with	1. history	,	the
applicant in the foregoing affidavit, and am wells			
n his said affidavit are true, and I know he is th			
and that he resides in this County.	· marriagni ne		
•		this 4	K-
Given under my official sig	gnature and seal,	this y	
· · · · · ·			
day of	1901.	,	
day of Jun A	10 1901.	uso:	
day of Mus A	Wilk Quet	uso:	County.

STATE OF GEORGIA,		
County.		
I,	hereby authorize	
Management of the second control of the seco	of	
to receive and receipt for the pension	allowed and request that	he remit same to
Witness my hand and seal, this		
Executed in presence of		[L. S.
	×	

SOLDIER'S PENSION 1902.

INDIGENT

(FOR THOSE ALREADY ENROLLEB.)

No. 4

(2)

to the

Regiment // LA Name

WARRANT HANDED TO

JOHN W. LINDSEY,

WARRANT ISSUED

No Sula

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

	
STATE OF GEORGIA,	1 2
- will Deguntary	
Personally appears	elter of tellin
County, State of Georgia, who-being duly swo	orn, 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 / Aday of Mul	18/9; that he is V years old and
by occupation a that I	he enlisted in the military service of the Con-
federate States (or of the State of	during the war between the
States, and served for the term of	in Company, ofth Regiment
of	; that his physical condition is as
follows: Sent de	1. if it
serie al	unil.
that his property consists of the following it	tems
	1.7 P. 1.9 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0
and the second of the community of the second of the secon	
of the value of	Dollars, that by reason of his physical
condition and poverty he is unable to support	t himself by his own exertion or labor, and
that he receives no pension but the one herein	n applied for.
	enefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and in	akes application for the pension to which he
is entitled for the year 1902. I have heretof	fore as a resident of Hullin
county been allowed a pension for the year 1	101 26 Milli
Sworn to and subscribed before me, this th	he)
day of JAN 19 1902 190	2,
Carl Nist	Wordinary.
STATE OF GEORGIA	
John R. Wilkinson.	
The state of the s	Ordinary of said County,
do certify that I am well acquainted with	
the applicant in the foregoing affidavit, and an	
him in his said affidavit are true, and I know l be and that he resides in this County.	he is the individual he represents himself to
•	
Given under my official si	
day of	1902.
your seal here	and the second s
	Fullon -

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

Fulton. County.

			POV	VER	OF	ATT	OKN.	EY.				
STAT	E OF	GEOF	RGIA,)							
				C	ounty.							_
1.						hereby	authoriz	e				
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to rece	rive and	recei	ot for	the pe	ension a	llowed ar	id reque	st tha	he re	mit	same to	,
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by.					.,							
	itness m	v hand	and cur	1 this		day o	· ·				1903.	
	iciicas m	y manu	and sea	n, this		Lay C			-		1	
Ex	ecuted i	n brese	nce of								[L. S.]	
***	e area i	n prese	nec or				all v					
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<u>.</u>								1903	inus.			
3			S			75			LINDSEY,	0	11.	
ENB		H		•	2		ED		EY,	WARRANT HANDED TO	ieo. Harrison, State Printer, Atlanta	11
CODE SECTION 1584 SE ALREADY E	3	INDIGEN	P	3	13	ent	76 Warrant issued	0	JOHN W. LINDSEY	NDE	4	13
SEA.	ile	GE	50		13	Regiment	_	90,	LII	HA	3	B
ALF		DI	À		20	Re	RAN (3	1	×.	LNI	. Non	8
SE OSE	No.	Z	Ξ		2	1 3	VAR		NHO	RR.	Harri	9.
Ŧ	2.				8	00,	1 >		Jo	WA	3	6
CODESECTION DATE (FOR THOSE ALREADY ENROLLED.			3		Name	County Co. (i					
=			5		N Z	ပ္ပံ ပိ	Ι.					

(N.15)

Kistler Q. H.

POWER OF	F ATTORNEY.
STATE OF GEORGIA,	· · · · · · · · · · · · · · · · · · ·
I,	hereby authorize
	of
to receive and receipt for the pension	allowed, and request that he remit same to
	at
by	x- xx
WITNESS my hand and seal, this	day of
The Frankey of the second	[L. S.
Executed in the presence of	*
	,
•	
/	r r and n re
9 6	1904 1904
	Regiment 19.
IER'S PENS	Regiment. WARRANT ISSUED JOHN W. LINDSEY. Commissioner of P WARRANT HANDED TO
IER'S PH	Regiment. WARRANT ISSUED WARRANT ISSUED Commissioner of Commissioner of Commissioner of Commissioner of ARRANT HANDED
ALREA ALREA	Reg
	HN HAR
	The MARK
(FOR THOSE ALIERADY EINO, 2859 INDIGENT	County.
SO Name.	Š 3

(FOR THOSE ALREADY No. 24 INDIGE Name C. H. L. 190 SOLDIER'S

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
Ton. County.	
Personally appears Plostiette	r of Ellion.
County, State of Georgia, who, being duly sworn	
and resident of said County and State, and has	resided in said State continuously ever
since the // day of June	18 45; that he isyears old and
	enlisted in the military service of the Cou.
federate States (or of the State of) during the war between the
States, and served for the term of 2 711	in Company E, of / th Regiment
of nc	; that his physical condition is as
follows: & F	
G , 0	
that his property consists of the following items	
	D.H. d. d. d. d. d. d. d. d. d. d. d. d. d.
of the value of condition and poverty he is unable to support h	Dollars, that by reason of his physical
that he receives no pension but the one herein a	
Deponent desires to participate in the ben	
1894, and the Acts amendatory thereof, and mak	
is entitled for the year 1903. I have heretofor	
county been allowed a pension for the year 1	
Sworn to and subscribed before me, this the	
day of1903.	
1	Ordinary.
STATE OF GEORGIA,	
County.	
I, J.	Hand Said County,
do certify that I am well acquainted with the applicant in the foregoing affidavit, and am	and assisted that the atetaments made by
him in his said affidavit are true, and I know he	
be and that he resides in this County.	is the marriage in representation of the
Given under my official sign	sature and seal this
day of	<u>/</u>) 1903.
Affix	Pro line
heal here	rdinary County.
Note.—The blank spaces must be fill	
Note. — Affidavit should not be attest	ed before January ist, 1903.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

FUR APPLICANTS HERETURURE ALLUWED PENSIONS.
STATE OF GEORGIA,
Fulton. County.
Personally appears Plostestly
reisonally appears
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever since the 11 day of June 1845; that he is 37 years old and
by occupation a, that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of 7 yr in Company 6, of 1 th Regiment of 10; that his physical condition is as follows:
Infine
V e
that his property consists of the following items:
condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1904. I have heretofore as a resident of
County been allowed a pension for the year 1
Sworn to and subscribed before me, this the
John Alle Kinson Ordinary. De Vieller
STATE OF GEORGIA,
County.
I, Ordinary of said County,
do certify that I am well acquainted with THAC'ESTERY
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, thisJAN 20 1904
day of
Jan RWilkinson
Odinary County.
Note.—The blank spaces must be filled.

Note.—The blank spaces must be filled.

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

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STA	TE OF	GEO	RGIA,			1							-
					Count	rv.							
			Ι,							h	ereby	autho	orize
						of							
to re	ceive an	d rece	eipt for	the	pension	n allowed	and	request	that	he	remi	t sam	e tó
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by								,					
	WITNE	ss my	hand a r	id sea	l, this		day o	f.				1905.	
								-				[L	. s.]
	Execut	ed in t	he pres	sence	of								
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9			$\frac{1}{2}$.\	Ma		=		commissioner of Pensions			3
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2 E	~	Z	H	10	1	: :	WARRANT ISSUED	4	IOHN W. LINDSEY	muer	WARRANT HANDED TO	3	BNIM
AD	1	田田			11	Regiment	7 /5	11/2	LIN	esimi	IVN		TOBE S
E ALREADY E		INDIC	<u>~</u>		3	, a	N. A.A.		*	10.7	N.	3	0
SE)	No.	Z	2	W	8	100	WAR		OHN		RRA		WIN TIM
THE					6.				_		N/		WITH B
(FOR THOSE ALREADY ENROLLED.					ne	County Co.							THE FRANKLIN PHINTING AND PUBL
٠	1 1		S		Name	<mark>රි</mark> රි		1.1					344
52 m. Co 1 . 1	STORY MANAGEMENT		ABOUT MANY TOTAL	-	No. of the			Andrew Address					

POWER OF ATTORNEY.

STATE OF GEORGIA, COUNTY. I, to receive and receipt for the pension	hereby authorized for allowed, and request that he remit same
by	atday of1906,
Executed in the presence of	
NOIS 310N	1906.
SOLDIER'S PENSICE 1906.	Co. L. Regiment, T. Co. L. Regiment, T. WARRANT ISSUED (7) . 18 JOHN W. LINDSEY. Commissioner of President WARRANT HANDED TO C. C. L./. 1

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

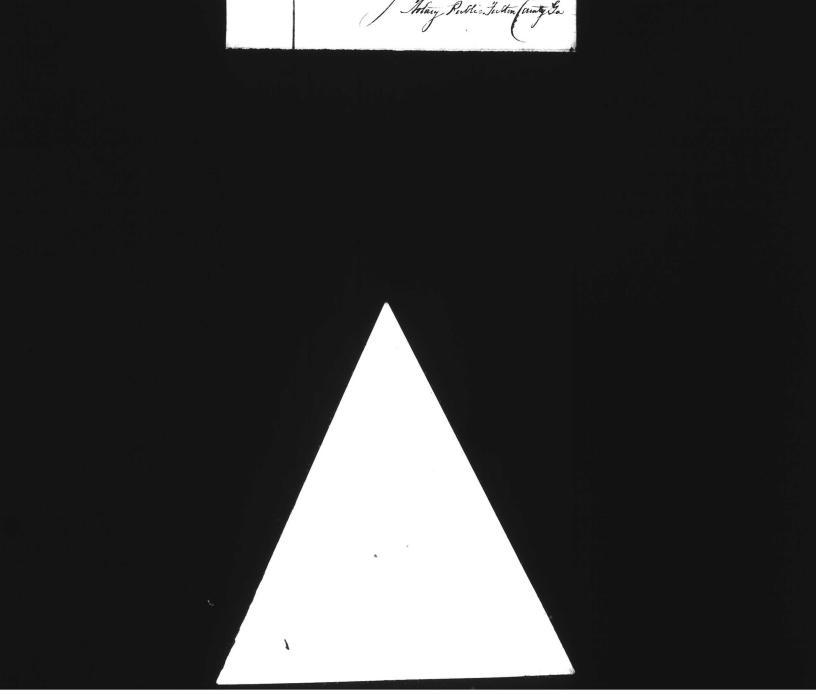
Mark of the same o	
STATE OF GEORGIA,	1
_County.	}
Pearsonally appears I sele. Me	sitter_or
County State of Georgia, who, being duly sw	vorn, says on oath that he is a bona fide citizen
and resident of said County and State, and	has resided in said State continuously ever
since the day of.	18 ; that he is 6/ years old and
by occupation a, that	he culisted in the military service of the Con-
federate States or of the State of) during the war between the
States, and served for the term of	in Company , of // th Regiment
of tt. les	1.1.1.1.1.1.
Collows Infermity and	a kovertu
	- /
that his property consists of the following it	eme :
· ·	
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	e one herein applied for.
Deponent desires to participate in the	benefits of the Ast approved December 15th,
1894, and the Acts amendatory thereof, and i	makes application for the pension to which he
is entitled for the year 1905. I have heretofe	
County been allowed a pension for the year I	904. his
Swora to and subscribed before me, to	his the A. Sto. x . Kirther
, day of	5. J. J. V. Carre
12 ,0	Ordinary. Mark
	. Ordinary.
STATE OF GEORGIA. /	
County.	
I,	Ordinary of said County,
do certify that I am well acquainted with _ (J. He. Stistler
the applicant in the foregoing affidavit and	am well satisfied that the statements made
by him in his said affidavit are true, and I kn	now he is the individual he represents himself
to be, and that he resides in this County.	1006
Given under my official signa	iture and seal, this
day of	1905.
,	- American
Amx Jour Jour Jordin	county.
Note.—The blank spaces mus	t be filled.
Note.—Affidavit should not be	e attested before January 1st, 1905.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Coormic	
State of Georgia,	}
County	7.
Personally appears J. M. c	listler of Fulton
County, State of Georgia, who, being duly	sworn, says on oath that he is a bona fide citizen
and resident of said County and State, a	nd has resided in said State continuously ever
since theday of	18/1; that he is & // years old and
by occupation a Peddler , the	t he enlisted in the military service of the Con-
federate States (or of the State of	during the war between the
States, and served for the term of	in Company , of // th Regiment
of horthe Carolyn	that his physical condition is as
follows: Misimity ac	ed poverty
	*
that his property consists of the following	items: 11 A hish in C.
that his property emission or the foresting	
of the value of	Dollars. I am now earning
	Dollars per month. That by reason of his
	able to support himself by his own exertion or
labor, and that he receives no pension but	
	he benefits of the Act approved December 15th,
	d makes application for the pension to which he
	etofore, as a resident of
County, been allowed a pension for the ye	
Sworn to and subscribed before me,	this the) Ziff (CC)
May of If.	1906.
Ch RWERSHOW	Ordinary.
1	J. C. C. C. C. C. C. C. C. C. C. C. C. C.
State of Georgia,)
State of deorgia,	(**
Ol Duringt	,
I, John JADA	Ordinary of said County,
do certify that am well acquainted wit	
**	and am well satisfied that the statements made
by him in his said affidavit are true, and	know he is the individual he represents himself
to be, and that he resides in this County.	
Given under my official si	gnature and seal, this JAN 1 1906
day of	1906.
	Of Alverson
Ams your seal	Ordinary 277 County.
here Nors.—The blank spaces :	
Note.—Affidavit should no	ot be attested before January 1st, 1906.

KINUKurou _County. Ordinary 271_County. Note.-The blank spaces must be filled. Nors.—The blank spaces must be filled.

Nors.—Affidavit should not be attested before January 1st, 1906. NOTE.—Affidavit should not be attested before January 1st, 1905. Thate of Georgia County of Fullon In ferein before true dame Sand . I Kistle The chann aut in Ofishication for indiquet pension hearts amused who bring duly devore, says that in his answer to pushing 18 Which he said his suplyment was plotding out of whe she he made" about a bar being not mire those \$50. on \$100" in 1896 and 1899 Refinent ways the amounts stated sous according to the best of recollecting what he realized from his said humas during those I care which did not provide him a steefffort since his willight care any money who love from paid hesiness has fore materally listing on account of his shysical condition, that at the time of making said appleadin send suce in is defender befor others for support the sucome in frech accounts to resthing towards free ling him a confert. Land H History Owen to and subscieled before me this shows who 16th 1898 lovefoh H. Smith Istary Public Tection farming Sa



No.

INDIGENT PENSION,

1901

Name & W. Stizzir

County Putton

2 Sa

Approved 1500.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

QF	
GEORGIA.	
P	10
	OWEI
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	ower of Attorney.

Power of Attorney.

STA	TE	OF	GEORGIA

		, Co	ounty.		
1,		100		he	reby authorize
41.11			of		
to receive	and receipt for the pe	ension allowed, i	and request that he remit sa	me to	
		n*		by	
W	itness my hand and so	eal, this	day of		1900.
					[L. S.]
	Executed in pres	ence of			

Fulfon County. to avail himselt of the Pension Ad (Section 1254, Code), hereby submits his proofs, and after being duly sworm true answers to make to the following questions, deposes and answers as follows:

1. What is your name, and where do you reside a 'give Stare, Councy, and jost office). S. W. Kinger Georgia Julion allanta 2. How long and since when have you been a resident of this State?

All ony life 1833-24 august 2. When and where were you form" Six Miles below Gainesorlla 1633 When and where and in what company and regiment did you enlist or serve? and 1861 in Co D 21th Regiment Sa Voluntery 6. How long did you remain in such company and regiment? August 1861 Until the End of the 3 years & Sylvonvorths 6. When and where was your company and regiment surrendered and discharged " Bold storo H.C. 14 Th afful 1865 - Joh my parole in augusto 70 Were you product 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 ? Hothing 10. What has been your occupation since 1865? Carpenter 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"? as infirmity & beristy 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, says whether you are totally blind and when and where you lost your sight? 13. What property, real or personal, or income, do you possess, and its gross value? 14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? Hever had any 15. In what County did you reside during those years, and what property did you then return for taxation? Aulton Co made no returns 10. How were you supported during the years 1808 and 1800?

17. How much did your deposit cost for each of those years, and what portion did you contribute thereto my cost by your own labor or income? The Secretary to the Alices Craed noting 18. What was your employment during 1808 and 1800? What pay did you receive in each year?

18. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? When the Children Theorem ("a specific of the family of the famil none 20. Are you receiving any pension? If so, what amount and for what disability? Murie 21. Have you ever made an application for pension before? 22 How many applications have you ever made and under what class? Two Indigent

Questions for Applicant.

STATE OF GEORGIA.

INDIGENT PENSION,

TEOOO.

190

County Adding

Approved 1800

JOHN W. LINDSEY,

Commissioner of President.

WARRANT HANDED TO

WARRANT HANDED TO

11.85

QUESTIONS FOR WITNESS.

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AFFIDAVIT OF PHYSICIANS.

STATE OF GEORG	T A)
Justin	,
	Ma Switte Mint and
Personally came before me	The Control of the And
	, both known to me as reputable physicians
	sworn, say on oath that they have examined carefully
DW. Reger	applicant for pension under Section 1254, Code, and after
such personal examination say that h	is precise physical condition is as follows:
14 cia 68 4171	Howarhist.
he Suffrenz Iron	a Hemorrhoid.
1. 6	of A. O adams to the
	corner times of manual Pob.
to a thing to be	Manual La
	The state of the s
	the physical condition of applicant renders him unable to labor at
NAME AND ADDRESS OF THE OWNER, WHEN PERSON NAMED IN	a support for himself, and that we have no interest in said pension
being allowed.	1 / Ca. Den the his
Sworn to and subscribed befo	re me, this the
12 th day of Sept	1900.
Johns wieke	ordinary.
ORDIN	ARY'S CERTIFICATE.
STATE OF GEORG	
futton	COUNTY.
· Aoha R Will	Ordinary in and for said County, hereby certify
that the applicant SW	resides in said County, and has
been a bonn fide resident of this Stat	is since the 24th day of arrant 18833
been a bona not resident of this State	D Frances
and that the witnesses, viz:	
	at their statements are entitled to full faith and credit.
	inswering the foregoing questions the applicant and each witness took the full text of the affidavits was read to the applicant and witness
before same was signed.	the full text of the amounts was read to the applicant and withess
I further certify that the tax	digests of Fullow County show that applicant
returned for taxation in his name in	n 1898 Dollars
of property, and in 1899	Dollars of property.
In my opinion the foregoing	claim is made in good faith.
Witness my hand and seal of	14 ~ 6.10
100 AND 1100 AND 100 A	John Rlockerican Drdinary,
b	of Firston County.
	NOTE:
1. Before any questions are answered	d, the Ordinary shall swear applicant and the witnesses in the following words: "You

shall true a new make to each of the quastions are shall awar applicant and the winnesses in the following words: "You spould true as new make to each of the quastions staked of you, and the evidence you shall give will be the whole truth, so help you God," Additional sfill-davits may be attached if blank spaces are insufficient,

2. "Additional sfill-davits may be attached if blank spaces are insufficient,

3. In every case the Ordinary must certify to "be character of the witness, and as to the execution of the proof as above set out.

STATE OF G			
	County.		
I,		hereby authorize_	
		of	
to receive and re	eceipt for the pension	allowed and request that I	he remit same to
		_at	
by			
Witness m	y hand and seal, this	day of	1902.
	ŕ		[L. S.]
Executed in	presence of		

SOLDIER'S PENSION

INDIGENT

(FOR THOSE ALREADY ENROLLED.)

No. 99

1902.

Fulton

JOHN W. LINDSEY,
Commissions of Pre
WARRANT HANDED TO

Ly delle

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

	STATE OF GEORGIA, Fulton County
	Personally appears AMY was of Fulton.
	County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
	and resident of said County and State, and has resided in said State continuously ever
	since the day of Suih 18; that he is 68 years old and
	by occupation a past he enlisted in the military service of the Con-
	federate States (or of the State of) during the war between the
14.	States and served for the term of 345 & Man Company 1, of the Regiment of 1 that his physical condition is as
	follows:
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	- Chara
	that his property consists of the following items
7 15	
	The state of the second st
	of the value of Dollars, that by reason of his physical
	condition and poverty he is unable to support himself by his own exertion or labor, and
	that he receives no pension but the one herein applied for.
	Deponent desires to participate in the benefits of the Act, approved December 15th,
	1894, and the Acts amendatory thereof, and makes application for the pension to which he
	is entitled for the year 1902. I have heretofore as a resident of Fulton.
	county been allowed a pension for the year 1 1907
	Sworn to and subscribed before me, this the S. M. R. M. Ordinary.
	STATE OF GEORGIA,
	Fulton. County.
	John R. Wilkinson. As 100 Ordinary of said County,
	do certify that I am well acquainted with Thursday
	the applicant in the foregoing affidavit, and am well satisfied that the statements made by
	him in his said affidavit are true, and I know he is the individual he represents himself to
	be and that he resides in this County.
	Given under my official signature and seal, this JAN 31 1902
	day of 1902.
4	Ordinary County Nork_The blank spaces must be filled. Nors.—Affidavit should not be attested before January 1st, 1992.

STAT	EOF	EORGI.		ounty.						
I,			-	,	hereby	authoriz	e			-
<u></u>				of						
to rece	eive and	receipt f	or the p	ension al at		nd requ	est that	he re	mit	same
by										
W	itness my	hand and	seal, this		day	of		-		1903. [L. S
Ex	ecuted in	presence	of							
CODE SECTION 1581. (FOR THOSE ALREADY ENROLLED.)	No. 246	INDIGENT	DULDIER D FERDIUM 1903.	Name Sathyer	County.	Gu Vole	(30)	JOHN W. LINDSEY, Commissioner of Pensions.	WARRANT HANDED TO	Con Harrison State Prince Atlanta

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

77	7. Cou	unty.)
	0	Tiger of
Personally ap		ly sworn, says on oath that he is a bona fide citizen
		and has resided in said State continuously ever
since the		18; that he is 69 years old and
by occupation a		, that he enlisted in the military service of the Con-
federate States (or) during the war between the
Chatan and somed	for the Space of 1344	1820 in Company , of 27 th Regiment
of Isa U	of T.	; that his physical condition is as
0		that his physical condition is as
follows :	BHP	
	NO 100 200 20 10 10 10 10 10 10 10 10 10 10 10 10 10	
that his property	consists of the following	ng items:
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of the value of		Dollars, that by reason of his physical
condition and por	verty he is unable to s	
		support himself by his own exertion or labor, and
that he receives n	o pension but the one	support himself by his own exertion or labor, and herein applied for.
that he receives no Deponent de	no pension but the one esires to participate in	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th,
Deponent des 1894, and the Acts	to pension but the one esires to participate in as amendatory thereof, a	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th, and makes application for the pension to which he
Deponent de 1894, and the Acts is entitled for the	on pension but the one esires to participate in as amendatory thereof, a e year 1903. I have h	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of
Deponent de 1894, and the Acti is entitled for the county been allow	to pension but the one estres to participate in s amendatory thereof, a eyear 1903. I have he wed a pension for the y l subscribed before me,	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th, and makes application for the pension to which he neretofore as a resident of
Deponent de 1894, and the Acti is entitled for the county been allow	to pension but the one estres to participate in s amendatory thereof, a eyear 1903. I have he wed a pension for the y l subscribed before me,	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of this the this the thin
Deponent de 1894, and the Acti is entitled for the county been allow	to pension but the one sires to participate in s amendatory thereof, at year 1903. I have haved a pension for the yll subscribe before me, of JAN. 1903	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th, and makes application for the pension to which he neretofore as a resident of this the 1903.
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Deponent de 1894, and the Acti is entitled for the county been allow	to pension but the one sires to participate in s amendatory thereof, a year 1903. I have haved a pension for the year 1904. I subscribed before me, of JAN. 1903	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th, and makes application for the pension to which he herectoore as a resident of this the 1903. Ordinary. Ordinary.
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that he receives no Deponent de 1884, and the Acts is entitled for the county been allow Sworn to and STATE OI	to pension but the one sires to participate in s amendatory thereof, it year 1903. I have he dead a pension for the year subscribed before me, of JAN. 1903 FGEORGIA, Could a me well acquainted with the foregoing affidavit,	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th, and makes application for the pension to which he heretofore as a resident of this the 1903. Ordinary. Ordinary. Ordinary of said County, and am well satisfied that the statements made by
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that he receives no Deponent de 1884, and the Acts is entitled for the county been allow Sworn to and Sworn to and Sworn to and I. I. I. I. I. I. I. I. I. I. I. I. I.	to pension but the one sires to participate in s amendatory thereof, it year 1903. I have he wed a pension for the year a pension for the year 1903. FGEORGIA, Coulombor am well acquainted withe foregoing affidavit, ffidavit are true, and I sides in this County.	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th, and makes application for the pension to which he herectore as a resident of The pension to which he here to be a serious and a seal of the statements with Substitute and am well satisfied that the statements made by know he is the individual he represents himself to ficial signature and seal, this
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that he receives no Deponent de 1894, and the Actris entitled for the county been allow Sworn to and Market State Of The Actrify that I are applicant in thim in his said af be and that he research	ropension but the one sires to participate in s amendatory thereof, a year 1903. I have he wed a pension for the yl subscribed before me, of JAN. 1903 FGEORGIA, Country am well acquainted we the foregoing affidavit, fifidavit are true, and I sides in this County. Given under my off	upport himself by his own exertion or labor, and herein applied for. the benefits of the Act, approved December 15th, and makes application for the pension to which he herectore as a resident of The pension to which he here to be a serious and a seal of the statements with Substitute and am well satisfied that the statements made by know he is the individual he represents himself to ficial signature and seal, this

NAME PLANEY, Sephen

YEAR 1901 COUNTY FALLOR

deinesville, Co. August 64th. 1686.

ENLISTED WHEN ALL WHERE?

ALL ALLESSEE

RANK.

COMPANY AND REGIMENT?

August 1861

WHEN AND WHERE BORN? Resident of Georgia since birth.

NAME OF CAPTAIN AND COLONEL?

6

CAPTURED, WHEN AND WHENE?

. RELEASED.

WOUNDED?

WHEN AND WHERE SURRENDERED?

IF NOT PRINCIP AT PURCONDAR, WHERE WERE YOU?

DIED, WHEN AND WHERE'T

BURIED.

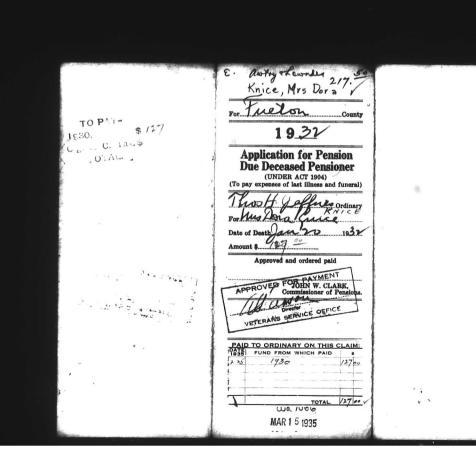
J.S. Brazile, some command--No date

WITNESSKS.

WITNESSES.

J.S. Brazile, some command--Ho date.

BURIED.



JOS.	w.	AWI	RY.	Pres.	& Trees.	

PRONES: WALNUT TO

ATLANTA, GA. Jan/20/32/

AWTRY & LOWNDES COMPANY FUNERAL DIRECTORS

AMBULANCE SERVICE

21 Cain Street, N. W.

IN ACCOUNT WITH Mrs. T.J. Whitley,

No. 4ISI Allendale,

Detroit, Mich.

For the funeral of Mrs.Dora Knice. Jan/13/39/ One complete Funeral.---- 210.0

\$ 917.50

Ja Fultonbounty appeared HB.
Banglaton who dwars the above bill
trus and was for funeral expense
of mis Bora Khild & HB. Bankston
buroun to obsessible lefore
my four Misself affore

A Certificate

STATE OF GEORGIA, County of

IN RE: Expenses last illness and funeral Mrs. Lora Knice

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

- 1. Died inside of the State of Georgia;
- 2. Left no estate of any kind or value, sufficient to pay these expenses.

This the 10 day of any

1933. Ordina

(SEAL)

Ordinary will please complete and return immediately to A. L. Henson, Director, Veterans Service Office, State Capitol, Atlanta, Ca

March 15 193

Received of Thos. E. Jeffries, Ordinary, \$127.00, to apply on funeral expense of Mrs. Doral Maice. This account has not previously been paid and is now owing to me.

by Mix Belyen

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)

\sim	
GEORGIA, Lulton	County.
Personally before me, the Ordinary	of said County, comes 14 B. Baustalon wi
autystounde	of said County, who, after being sworn, on oath
says that he knew Mus Wer	of said County, who, after being sworn, on oath
was on the Pension Roll of said County	at the time of death, which occurred in Tullou
County, in this State, on the	O day of 201. 1932
and that pensioner left no widow survexpenses, which amounted to the sum of	riving, and no estate of any value sufficient to pay these funeral
ITEMIZED hereto attached.	,
Sworn to and subscribed before me, William Walland ord	inary NBBankston
(Seal of Ordinary)	<u>'</u>

CERTIFICATE OF ORDINARY

	GEORGIA County. I. Ordinary of said County, do certify that I personally know the said county are said on the said county.
	citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew where the county is the county of the county
).	the same person whose name appears on the Pension Roll of
7	in said County 10, 19.3. A., 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 day of 1997 (Seal of Ordinary)

INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

os) or. — who died without owning suntient 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 property completed as indicated.

4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no say must be paid out until it is returned to you as your authority to make the payment.

St. 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.

March _15 1935.

Received of Thos. B. Jeffries, Ordinary, \$127.00, to apply on funeral expense of Mrs. Doral Maice. This account has not previously been paid and is now owing to me.

INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemised 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, 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.

Widow's Pension UNDER ACT 1910. County Fulter Naw May Eduigs 18 May Lugis J. W. LINDSEY,

THE PARTY OF THE P

Application for Pension by a Widow Under Act of 1910 .-- Questions for Applicant. STATE OF GEORGIA. fulla County. Colling to Asaid State and County, and after being duly sworn, on oath says that she defires to apply for a pension allowed under the Act lowing questions to wit: 1. What is your name, and where do you reside? My Muy 2. How long and since when have you been a continuing resident in the State of Georgia? Was you husband personally present at the time of the surrender or discharge of this Command? 7. If he was not present state clearly where he was? & luson S. Where was his Command when he left? Captured a. For what cause did he leave his command? Captured By whose authority did he leave his Command? Coffine by the ween, c. For how long was he granted leave of absence? . T. e. What was his physical condition when he left his Command? f. What effort did he make to return to his command? Notes he could did he make to return to his command? Notes he could did he make to return to his command? Notes he captured by the enemy at any time? No 1908. (State same by itams,) willing Court in a range off at, a with when 200 & I have wolf 90 \$ 10. What property of any kind have you sold or given away since Nov. 4, 4908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.)

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

11. What property of any description of any value have you'now? A.C. / Com.

Give list and cash value? W. W. a.C. A. B. O. S.

12. What are your annual earnings or income and their value? Must from the affire & a.c. of 3.5 W. man telling in h my thickness. I will know he for

retofore been paid a pension by the State? were you struck from the Roll?

..County. Personally before me comes. being duly sworn true answers to make, to the following questions, asswers as follows:

1. What is your name and where do you reside? Im Marine	actanto &
	applicant?
2. How long and since when have you known. 3. How long and since when has she confuguously resided in this State?	(Give date.)
3. How long and since when has she continuously regarded in this state?	(Give date.)
	~
4. When and to whom was she married? How do you know?	7, 7
5. How long and since when did you know Wish husband? When 50 gear Luck 1 260	her
The 1862 - When, where and in what Company and Regiment did 1	enlist?
Leiden arlitten	
7. Were you a member of the same Company?	
8. How long within your personal knowledge did he perform actual milit pany and Regiment?	ary artvice with his Com-
When, and where did his Command suprender, and was discharged?	
10. Where you personally present when it was surrendered?	If not where
were you was un prison and how came you	0.0
Captures orkeles as pursue until end of co	ar 1
11. Was the husband of applicant personally present at surrender?	If not
	en, where and for what
authority did he leave his Command? Confidence held in free	By whose
long was he granted leave? How do you	know all this Levas free
Do you state if of your own personal knowledge? (State all you know fully, a 12. For what cause, if You/know of your own knowledge was he prevent	nd how you know it.)
Command? ACLAN W FORM 13. What effort did he make to return to his Command and how do y	py-know this? Of you
own knowledge or how way westle fort for the book swort to and subscribed before me this the	h in presentlant a great
o W sugar own sugar suga	oper
MACOLLUS MONDELS Colonary	
of Guller County.	
AFFIDAVIT OF TWO FREEHOLDER	2.5
STATE OF GEORGIA,	,
Tilly County.	
Personally before me comes It Harvally Deturned	on oath says that they
are freeholders of said County and that they know how hour	\
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 & a cre & land in Julia Com. New Mule Personal property.	240.00
Personal property.	1 90.00
Notes and accounts due	8
Total	:30.00
Schedule (B).	
We know the property sold or given away since Nov. 4th 1908, its cash value	
Mule Personal property	3 90-00
Money, Notes and accounts	\$
Schedule (C).	
We also know what property she has now in her possession, use and control	to wit
	And
Horses and Mules	8
Cows and Hogs	8
Other property	\$. 100
income and earnings Aut on fallowing to tracked access	300
Sween and subscribed before me this the	8 300
30 Manes	m'
hacelly to rate ger 66 Ordinary 2 1554	100000

ORDINARY'S CERTIFICATE

			CAUCACITA A M.	
STATE OF	GEORGIA,	1.		
Bl	m P. W	County.	Crdina Ordina	ary of said County do certi
hat, know	m many .	Might	the	applicant for pension. Si
	in the 4th Nov.		a bonande continu	ing resident citizen of sa
That I al	of husband, and	W. Damman	At Harrie	the witness who swea
he foregoing aff	idavits and that th	ey all, are truthful, tr	ustworthy, and the	ir statements are entitled t
			Unight	Returned for Tax is for
		for 1910 \$	3 miles	/len/
910^	der my hand and of	fficial seal of office this	2 / 1	day &
SEAL.		grup	Weraus	Ordinary.
(SEAL.)		0		Tulton Count

NOTES 1. Befor 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 but you do.d.".

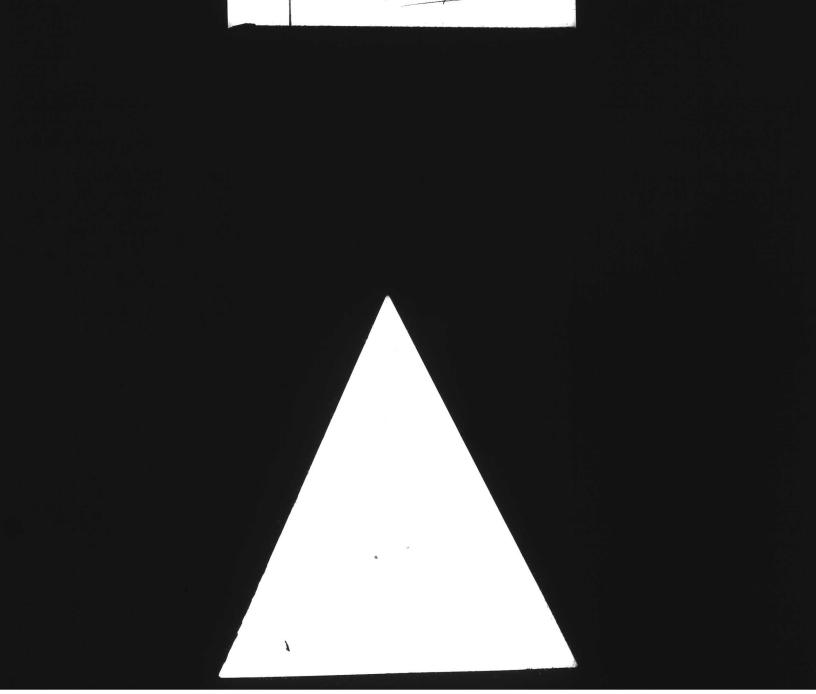
So but you do.d." All affidavits must be made before the Ordinary.

All affidavits must be made before the Ordinary.

Only wildows who married price the first January 1870, are entitled.

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

Other property
Income and earnings Must on the State S tale I Georgial Fulta Count / Cermally appeared before the andersyned IX Harvell Who say That le Kuker Wa Kkinghid uning hi life true & Kugars of hi om xuavalathe he + May & Nance of were Jums on Jany ox id 1869 in Fellow County take for present at the marriage & the also dulnes that they lived by the a Jum or cope antil the date of he heath Sept 19th 1902 in Feelth Count or the she now he wordow, having not pleanance Quio her diath_ 195 Harwell Koon to also Subscubed before me Oct 31st 1910 Uncellio Manderson. Clerk Coms Ordinag



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No.	Mulm off
usphone SHOY	Aft was a South
NDIGENT PENSION.	Howy becom a
190	De Sur 19- 1904
am Obersham Smort	Kut by Baldun of
ounty Fulton	Man de les de la constante de
pproved 190	The Contract Porce
JOHN W. LINDSEY,	entertial
Commissioner of Penalona.	Complemen
WARRANT HANDED TO	
ordinary will write name of Applicant, Company I Regiment on back as indicated above.	

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

to receive and receipt for the pension allowed and request that he remit same to day of - by 190_

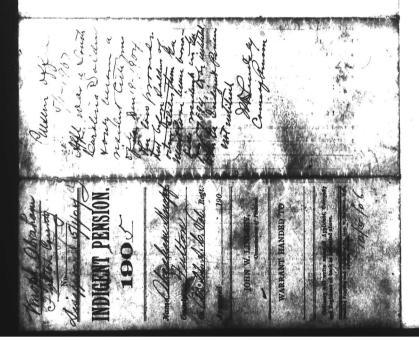
[L s.]

hereby authorize

Witness my hand and seal, this

POWER OF ATTORNEY.

	COUNTY.	
I		bereby authorize
	of	
(
to receive and receipt for the pensi	ion allowed and request that he remit same to	
the second secon	at by	
the second secon	nt by	
_ ` }	at by by	



OUESTIONS FOR APPLICANT.

OTHER OF OPODGIA
STATE OF GEORGIA, ' (
Fullon COUNTY.
7)
abraham tropp of said State and County, desiring
to small bimost of the Pansian Aut (Section 1954 Code), hereby submits his proofs and after being duly sworn
true answers to make to the following questions, depores and answers as follows:
1. What is your name and where do you reside? (Give, State, County and Postoffice.)
abraham Knopf. altante Felton County Years in
2. How long and since when have you been a resident of this State? I have have
Issident of Fully County Georgia Dince Dec 23 7/904
Issedent of fully County Georgia Since Die 23 1904
8. When and where were you born? In Portant - September 1834
4. When and where and in what company and regiment did you enlist or serve? Mr Company and regiment did you enlist or serve? Mr Company and Page Company and South a rolling to the Company and Page Company and P
a" 22 " Required South wroters total acco-
Isvined in august 1863 and way captured on Berundand
the de control of the country to point torrent - and
5. How long did you remain in such company and regiment?
Confined as a misour of moretis- o cons finally
Confinel as a minus of Mitter - was finally
bringht back to Richmond offaroles
6. When and where was your company and regiment surrendered and discharged?
In 1865 When sent Joseph E
77 7
Johnson Durindera -
7. Were you present with your company and regiment when it was surrendered?
8. If not present, state specifically and clearly where you were, when you left year command, for what cause
and by whose authority? I was not product - I had live
prioner + wat failed
The court of the c
9. How much can you earn (gross) per annum by your own exertions or labor? Very lettle Carel- will
10. What has been your occupation since 1865? Mirrary Court the & store
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
12. If apple the list ground, state now bug you have been in such continue that you
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 given been
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state ybether you are totally blind and when and where you lost your sight? I have gurned balance of a committed for property of forming a distribution of a committed balance. It was property, real and personal, or income, do you possess, and its gross value? I have leave the what property, real and personal, did you possess in 1891, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or eith have you made of same?
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state whether you are totally blind and when and where you lost your sight? A Commission of the property of the commission of the commiss

JULISTIONS FOR WITNESS.
STATE OF OFOROTS, Maura
ONTHINEL - COUNTY.) Scenar of said State and County having been properted
as a witness in support of the application of A Rusofest for pension
under section 1254, Code, and after being duly sworn true auswers to make to the following questions, deposes and
1. What is your name and where do you reside? Liman Bracon
I live in Blackwille & Cy
2 Are you acquainted with Abraham Stropy the applicant: If so how long have you known him? Forty Six years
3. Where does he results, and how long and since when has he been a resident of this State?
Atlanty La. Meanly Lovo Gean
1863. Charleston & Er. Company A 22 SC,
5. Were you a member of the same company and regiment?
6. How long did he petrorm regular military duty? 10 months, and Then continued
Whey and where was his command surrendered? beging Captured, he was
8. Were you present when it surrendered?
9. Was applicant present 2
10. If he was not present, where was he' for farious Wasn did he leve his commany! When did he leve his commany! When Captions For what cause! for ling Captions
By what authority he left " & (11' / Cepture) How do you know all of this?
Exeruse I was coptured, and in same
1. What property effects or income has the applicant? (Give your means of knowledge.)
nothing
12 What property, eller's or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? He did own a small house kut
solt it to obtain meaner for support
13. Has be 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? Auch Ruaw.
Lee The Physician States on reverse side
15 Is the applicant unable to suggest himself by labor of any sort; if so, why? durch Know
but think him too old
16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? Clerked in
a store
17. What perion of his support for these four years was derived from his own labor or income? Aanh / Know
18. Give a full and complete statement applicant's physical condition that entitles him to a pension under
Section 1254, Code Nat abla To woods, Too ols
19. Who composes family? What property have thay? Children's ages and their earning capacity?
Seven, worthler children.
20. What interest have you in the recovery of a pension by this applicant? More whatever
Sworn to and subscribed before me, this the
1 7 play of July 1904) Witness.
Church Statelling and and Brown A Rough to
mayer want bu a confident solding

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

111-11	7
Personally came before me	Carce Zued and
CAR AK	
/	, both known to me as reputable physicians
of said County, who, being severally sworn, say on oath that they by	examined carefully
braham 11 note moft	pension under Section 1254, Code, and after
uch personal examination say that his precise physical condition is a	
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case of Gy a dight . 40 &	cock ylandhal
of rendered from unable	to reach. Weeks
ige) 2) ald age has	cial loss of he con
y served tolats	days Change
17:1. 40. 7. 9.7	
y Stilis & Constanal	
and that we have no interest in said pension being allowed.	office oce mis
Sworn to and subscribed before me, this the	R. Ilima M. D.
day of College 190	, , , , , , , , , , , , , , , , , , , ,
John Ordinary.	
ODDINADVIC CERT	TECATE
ORDINARY'S CERT	IFICATE.
STATE OF GEORGIA,	
7.101	
A / A	
I Must William on a	rdinary, in and for said County, hereby certify
hat the applicant Worth any rucks	resides in said County, and has
(10)	resides in said County, and has
been a bona fide resident of this State since the	resides in said County, and has
een a bona fide resident of this State since the	
seen a bona fide resident of this State since the d	ay of1ND
seen a bona fide resident of this State since the d and that the witnesses, viz.:	ay of 189 full faith and credit.
seen a bona fide resident of this State since the dand that the witnesses, viz.: dand that their statements are entitled to I further certify that before answering the foregoing question	ay of 189 full faith and credit. Is the applicant and each witness took the oath
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een a bona fide resident of this State since the d nd that the witnesses, viz.: re of trustworthy character, and that their statements are entitled to I further certify that before answering the foregoing question ereon prescribed, and that the full text of the affidavits was read to the	ay of 189 full faith and credit. Is the applicant and each witness took the oath
oven a bona fide resident of this State since the	full faith and credit. s the applicant and each witness took the oath e applicant and witness before same was signed. County shows that applicant
oven a bona fide resident of this State since the	full faith and credit. s the applicant and each witness took the oath expelicant and witness before same was signed. County shows that applicant Dollars of
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Notice any questions are answered, the Ordinary main search applicants 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 afflication 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.

& C Ryment I

ELLIS.WIMBISH & ELLIS

\$23.4-6-6 PRODENTA EULDING.

ATLANTA GEORGIA.

September 12th, 1906.

Hon.J.W.Lindsay,

Commissioner of Pensions,

Atlanta, Ga.

My Dear Sir:-

Some time last year I prepared for Mr.Abraham Knopf an application for a pension and at the same time I wrote you a letter, which you may have preserved, but in case you cannot conveniently lay your hands on it, I beg to repeat in substance what I then wrote and add a little addition thereto.

I know nothing personally of Mr.Knopf's connection with the Confederate Army but I was a member of Hagood's South Carolina Brigade and Mr.Knopf has related to me his experiences in the war and his knowledge of officers and men, all of which I do not think he could know unless he had been actually in the service. I have no doubt whatever that he was a soldier in the Confederate Army and that he was in the Army from South Carolina.

I have examined the statements of his witnesses and man beg to say that Simon Brown of Barnwell, S.C. was a man of considerable property and that the Hagood who signs as a witness is a member of the same family as was our Brigadier General Johnson

ELLIS, WIMBISH & ELLIS 523-4-5-6 PRUDENTIAL BUILDING, ATLANTA.GEORGIA.

W.O.ELLIS. W.A.WIMBISH W.D.ELLIS.JP

September 12th, 1906.

Hon.J.W.L.#2.

Hagood, who after the war ,became Goyernor.

I regret that I do not know more of Mr.Knopf's personal history but I write this letter because I an satisfied that he has truly stated the facts and that he is entitled to a pension.

Yours Very Truly,

Dic-W.D.E.

WI Ellis

Carolina. I have examined the statements of his witnesses and im beg to say that Simon Brown of Barnwell, S.C. was a man of considerable property and that the Hagood who signs as a witness is a member of the same family as was our Brigadier General Johnson

Widow's Application

ames J. Knott enlisted as a

Tate Dept. Public Welfars, Itlanta, Sept. 11, 1937.

Lillian Chilana Records Div.

rivate in tat Co. D, lat Con-ederate Regt: Ga. Inf. Mch.25, 1661. Discharged by request of lovernor of Ga. Nov. 4, 1861. Under Act of 1910-As Amended by Act of overnor of Ga. Nov. 4, 1861.

ppointed Asst. Surgeon, 53d

agt. Ga. Inf. June 4, 1862;

argeon, July 19, 1864. Absent

tith leave by order of Gen. Lee

pon recommendation of Medical

card, Dec. 31, 1864. Absent,

tick leave expired, Feb. 15,

1865. 1919, and Constitutional Amendments

of 1920 and 1937. County FULTON

Name MRS. W. M. KHOTT. Widow of DR. J. J. KNOTT,

Date of Marriage Nov. 7, 1885 1

Date of Husband's Death uly 12, 1914.

Company . D. Regiment 1st Conf.
DEC 27 1937 Approved

W.M. Knott

OF

Ordinary's

Certificate

Ful ton GEORGIA

COUNTY.

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the applicant for

H. W. Gilbert of them

(SEAL OF

ORDINARY

the Ordinary shall swear applic ers make to each of the question

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which the marriage, by some person.

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INSTRUCTIONS

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AUG 19 1937

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Confederate Records Div. State Dept. Public Welfars Atlanta, Sept. 11, 1937. Jemes J. Knott emlist pedrate in lat (co. p) federate Regt. (a. in 1861. Discharged by Governor of Ga. Nov. Appointed Asst. Surge Agt. (a. Inf. June & Rugeon, July 19, 186 full leave by order of the leave by order of upon recom...endati.in.

> Widow's Application Under Act of 1910 - As Amended by 1919, and Constitutional Amendm of 1920 and 1937.

Date of Husband's Deathfuly 12, 11914 Date of Marriage Nov. 7, 18831 J. KHOTT, MRS. W. M. KNOTT. 1st Conf. 1937 DR. J. FULTON

Ordinary's Certificate

Director.

AUG 19 1937

Z. 193.

STATE OF GEORGIA,
Fulton COUNTY.
1,, Ordinary of said County, do certify
that 1 know. Mrs. W.M.Knott the applicant for pension; that
she is the person she represents herself to be, and that she has been, continuously, a bona fide resident
citizen of said State since January 1st, 1920; that I also know H. W. Gilbert
the witness who swears to the same at the companion of them are now residents
of said County and were duly sworn by me before signing the foregoing affidavits, and that they are
truthful and trustworthy and their statements are entitled to full-faith and credit.
Given under my hand and seal of office this
(SEAL OF ORDINARY) , Ordinary.
To Pulton County.
INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall swars applicant and the witness in the following words: "You do celemnly swear that you will true answers make to each of the questions saked you and the evidence you shall give will be the whole truth. So bely you God."

2. Only widows who married prior to January 1st, 1920, are entitled.

3. Only widows who married prior to January 1st, 1920, are entitled.

4. All afficiants must be made before the Ordinary of the County in which the applicant or witness resides and must be certified copy of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

5. Fill out the back of the application carefully.

7. Don't use the bully form of Marriage Certificate in vogues throughout the State. A short, simple form is easier to handle.

8. Do not take an application from any widow who is already receiving persistion.

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

FULTON COUNTY,
Personally appears before me, Mrs. W. M. Knott of said State and County
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the
Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after
being duly sworn, true answers to make to the questions propounded, answers as follow, to wit:
SECTION I.
1. What is your name, and where do you reside? (Give Post Office and County). Mrs. W. M. Knott,
1.302. H. Main St., East Point, Oa. 2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia? All my 1110
Give date, or year, of your birth. May 12, 1862 Age? 75.
3. (1) When, (2) where and (3) to whom were you married? Nov. 7, 1885, Fulton Co.
Georgia, Dr. J. Knott
a. Have you married since the death of first and soldier husband?
b. When and where did your first husband die? July 18, 1914, Fulton Co., Qa.
c. Were you residing together when he died?
d. If not, how long had you resided apart?
e. Are you now a widow?
f. Have you or your husband heretofore been paid a pension by the State?
g. If so, when and for what cause were you or your husband placed on the roll?
SECTION II.
Answer the following questions if your husband was not a pensioner:
1. When, where and in what Company and Regiment did your husband enlist as a soldier in
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-
try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
Co. D., Priv. lst Conf. Regt. also known Ga. lst Conf. Ga. Vol.
Mar. 15, 1861.
Mar. 15, 1861.
When and where did the Commands of your husband surrender or discharge from the Service? Was your husband personally present with his Command when it was surrendered or discharged?
When and where dld the Commands of your husband surrender or discharge from the Service?
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When and where did the Commands of your husband surrender or discharge from the Service? Was your husband personally present with his Command when it was surrendered or discharged?
2. When and where did the Commands of your husband surrender or discharge from the Service? 3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was?
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2. When and where did the Commands of your husband surrender or discharge from the Service? 3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command? a. For what cause did he leave? b. By whose authority did he leave? c. For how long was his leave of absence granted? d. In what way?
2. When and where did the Commands of your husband surrender or discharge from the Service? 3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command? a. For what cause did he leave? b. By whose authority did he leave? c. For how long was his leave of absence granted? d. In what way? e. What was his physical condition when he left his Command?
2. When and where did the Commands of your husband surrender or discharge from the Service? 3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command? 6. For what cause did he leave? 7. By whose authority did he leave? 8. For how long was his leave of absence granted? 8. Un what was his physical condition when he left his Command? 8. What was his physical condition when he left his Command?
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2. When and where did the Commands of your husband surrender or discharge from the Service? 3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command? a. For what cause did he leave? b. By whose authority did he leave? c. For how long was his leave of absence granted? d. In what way? e. What was his physical condition when he left his Command? f. What effort did he make to return to his Command? g. In what way was he prevented from going back to his Command? h. Was he captured by the enemy at any time? If so, when and where? In what prison was he held and when was he released? Sworn to and subscribed before me, this the

An Affidavit

(Read carefully before making this affidavit.)

. . .

State of Georgia.	of said State and County is hereby presented
County of Fulton	as a witness in support of the application of for the pension
The state of the s	provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920
Before me, the Ordinary of said County, comes Mrs. W. M. Knott who, after being duly sworn, deposes and says:	and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:
1. That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers;	1. What is your name and where do you reside? (Give Post Office and County)
That her deceased husband was not a pensioner of the State of Georgia at the time of his death, and, therefore, his Confederate military service has not heretofore been proven in connection with an application for pension;	How iong and since when have you knownapplicant
 That she is unable to obtain from any person or source evidence as to the Confederate mili- tary service of her deceased soldier husband; 	 Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State?
4. That this affidavit is being made to authorize the use, as evidence, of any official record of/said	4. When and to whom was she married?
Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of	How long and since when <u>did you know.</u> her husband?her
the Adjutant-General, Washington, D. C.	
Mrs W. M. Horney	6. When and where did
	the husband of applicant, die?
Sworn to and subscribed before me, this the	7. Were the applicant and her husband living together as husband and wife at the date of his death?
2nd day of	in a factor of the contract of
H.J. Kingo, Ordinary,	
6.c.	8. If not, how long did they live apart before his death?
Fulton County.	Were they divorced?
	If the husband of the applicant was a pensioner, DO NOT answer the following questions.
	9. When, where and in what Company and regiment didenlist? Company and regiment didenlist?
	(Give date and place)
	10. How did you obtain your information of this service?
	11. How long within your personal knowledge did he perform actual military service with this Com-
1,	pany and Regiment? (Give dates.)
	12. When and where was his Command surrendered or discharged? (Give date and place.)
	13. Were you personally present with this Command when it was surrendered?
	If not, where were you and how came you there?
	14. Was the husband of applicant personally present with his Command at its surrender?
	If not where was he?
	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 speci-
	fically)

Questions for Witness as to Marriage and Service of Husband.

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

16. What effort did he make to return to his Command and how do you know this?

17. Was he captured as a prisoner?

18 o, when and where?

19 In what prison was he held?

19 and when released?

(Witness)

Sworn to and subscribed before me, this the

of..., County. (SEAL OF ORDINARY)

STATE OF GEORGIA,

......COUNTY.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS :

MRS. W. M. KNOTT, WIDOW OF DR. J. J. KNOTT,

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

ORDERED:

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

This, the 27th day of December 19 37 .

State Department of Public Wolfare

Court of Ordinary

FULTON COUNTY STATE OF GEORGIA

CERTIFIED COPY OF

MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

OF

DR. J. J. KNOTT

MISS WILLIE JOSEPHINE McCOOL.

Recorded in Book B Page 532

W. L. CALBOUN.

Ordinary.

State of Georgia County of Fulton.

Personally before the undersigned authority now H. W. Gilbert, who upon oath

says that he knows Mrs. W. M. Enott,

knows that she was living with her husband Dr. J. J. Knott at the time of his death, that she has not remarried since his

lot this

death and is now his dependent widow. Sworn to and subscribed before me

MARRIAGE LICENSE

State of Georgia--Fulton County

To any Minister of the Conpel, Judge of Superior Court, Instice of the Peace, or other Berson aufhorized to Solemnize,

You are hereby authorized and permitted to join in the honorable state of Matrimony DR. J. J. KNOTT

MISS WILLIE JOSEPHINE McCOOL According to the Rites of your Church, Provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

RETURN THIS LICENSE. WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 7th day of November 1883 19 W. L. CALHOUN, Crdinary

I hereby certify that DR. J. J. KHOTT MISS WILLIE JOSEPHINE MCCOOL

and were joined together in the HOLY BANS OF MATRIMONY

on the 7th ... day of Movember 1885 19 ... , by me.

THOS. R. KENDALL,

ORDINARY'S OFFICE

State of Georgia,

Fulton County. ATLANTA, GA.: August 2nd 19 37

I, B. T. KERP. Clerk Court of Ordinary of said County, hereby certify

that the foregoing is a true copy of the Marriage License and Certificate of Marriage of DR. J. J. KNOTT

and MISS WILLIE JOSEPHINE McCOOL as the same appears of record in this office. Given under my official Signature and Seal of the Court of Ordinary, the

MARRIAGE LICENSE

State of Georgia--Kulton County

To any Minister of the Convel. Judge of Superior Court. Justice of the Beace, or other Person authorized to Bolemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony DR. J. J. KNOTT and MISS WILLIE JOSEPHINE McCOOL

According to the Rites of your Church, Provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your suffi-cient License.

RETURN THIS LICENSE. WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 7th day of November 1883 19 W. L. CALHOUN, L. S.

I hereby certify that DR. J. J. KHOTT

MISS WILLIE JOSEPHINE McCOOL and

were joined together in the HOLY BANS OF MATRIMONY

on the 7th day of Movember 1883 19 by me.

State of Georgia, Fulton County. ORDINARY'S OFFICE

THOS. R. KENDALL,

ATLANTA, GA.: August 2nd 19 57

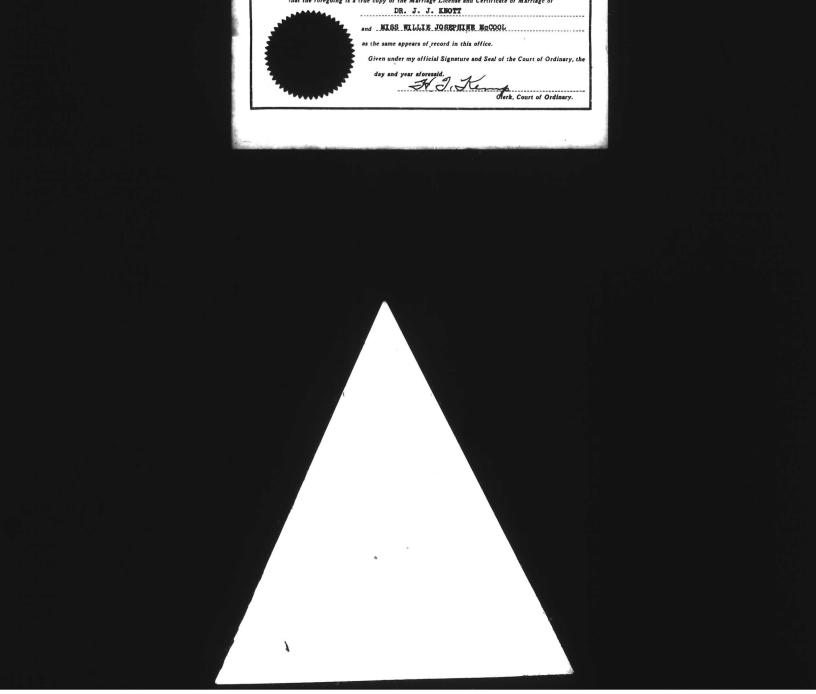
I, B. T. KBIP. Clerk Court of Ordinary of said County, hereby certify

that the foregoing is a true copy of the Marriage License and Certificate of Marriage of DR. J. J. KNOTT

B. B.

and MISS WILLIE JOSEPHINE McCOOL as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the



Elix record weland.

Widow's Application

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

County Fulton NameWrs. Lillie T. Knox Widow of David C. Knox Date of Marriage. Deg . 13, 1891

Date of Husband's Death Qot . 18,0906. Regiment and South Coast
Approved DEC 27-1937 Director.

Ordinary's Certificate

THOMAS H. JEFFRIES

Ordinary of said Co.

unty,

the applicant for pension; that

YINDOO

STATE OF GEORGIA, Ful ton

she is the person she represents herself to be; and that she has citizen of said State since January 1st, Mrs-Lillie T. Knox

truthful and trustworthy ars to the sames and their statements are entitled to full faith and credit. duly sworn by

before signing the

foregoing affidavits, ige; that both of them Mrs.E.I. Cooledge

1920; that I also know

(SEAL OF ORDINARY) Given under my hand

s are answered the Ordinary shall swear applicant and the will true answers make to each of the questions asked you in God." and the

you keel.

18 may be attached if blank spaces are unsufficient.

married prior to January 1st, 1820, are estitled.

t be made before the (brimary of the County in which the applicant or witness

yof maringe license if obtainable. If not, prove maringe, if the application carefully.

Tom of Maringe Certificate in vogue throughout the State, application from any widow who is already receiving thle. If not, prove marriage, by some person, a pension. or by general reputation resides and must be

Fulton August Ordinary.

... County.

and that they 1937

AUG 26 1937

Widow's Application of 1910 - As Ame Pul ton L1111e of David

Ordinary's Certificate

STATE OF GEORGIA, Fulton THOMAS H. JEFFRIES, Ordinary of said County, do certify 1, . . Mrs_Lillie T. Knox the applicant for pension; that that I know she is the person she represents herself to be; and that she has been, continuously, a bona fide resident citizen of said State since January 1st, 1920; that ! also know. Mrs.E.I.Cooledge the witness who swears to the sauce at two marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit. 23. day of August 1937 Given under my hand and seal of office this. (SEAL OF ORDINARY), Ordinary# FultonCounty. INSTRUCTIONS:

Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You softenally swear that you will true answers make to each of the questions asked you and the evidence you shall give will be 2. Additional saffdarists may be attached if blank spaces are insufficient.
 Only widness who married prior to January 1st, 1970, are entitled.
 All afflactive must be made before the Ordinary of the County in which the applicant or witness resides and must be 4. All afflactive must be made before the Ordinary of the County in which the applicant or witness resides and must be 4. All afflactive must be made before the Ordinary of the County in which the applicant or witness resides and must be 4. All afflactive must be a supplied to the state of the ordinary of the County of the ordinary of the County of the ordinary of the County of the ordinary of the ordinary of the Ordinary of the

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA

on bottom,	
FULTON COUNTY.	
Personally appears before me, Mrs. Lillie T. Knox of said State and County	
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the	
Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after	
being duly sworn, true answers to make to the questions propounded, answers as follow, to wit:	
SECTION I.	
1. What is your name, and where do you reside? (Give Post Office and County). Mrs. Lills T.	
Knox, 335 Forrest Ave. NE., Atlanta, Fulton Go., Ra.	
2. How long and since when have you been, continuously, a bona fide resident citizen of the State	
of Georgia? All my life	
Give date, or year, of your birth. Mar. 3, 1869 Age? 68	
3. (1) When, (2) where and (3) to whom were you married? Dec. 13, 1891, Fulton Co.,	
Georgia, David C. Knox	
a. Have you married since the death of first and soldier husband? . No	
b. When and where did your first husband die? Oct. 12, 1908, Ful ton. Go., Ga.	
c. Were you residing together when he died? Yes	
Throughout long than you restrate apartition	
e. Are you now a widow?	
g. If so, when and for what cause were you or your husband placed on the roll?	
SECTION II.	
Answer the following questions if your husband was not a pensioner:	
1. When, where and in what Company and Regiment did your husband enlist as a soldier in	
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-	
try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.	
Enlisted Oct. 22, 1861, at Abbeville Court House, S.C. Co. A, 2nd Regt.	
S.C.Rifles, Conf. States Army.	
2. When and where did the Commands of your husband surrender or discharge from the Service?	
He was sur endered Apr. 9,1865, Appointtox Court House, Virginia by	
3. Was your husband personally present with his Command when it was surrendered or discharged?	
Bee No. 2	
4. If he was not present, state specifically and clearly where he was?	
5. When did he leave the Command? No. 2, Apr. 9, 1865.	
a. For what cause did he leave? Gen. Robert E, Lee	
b. By whose authority did he leave? !!	
c. For how long was his leave of absence granted? d. In what way?	
e. What was his physical condition when he left his Command? Was shot, but suffering no	pain.
f. What effort did he make to return to his Command?	
g. In what way was he prevented from going back to his Command?	
h. Was he captured by the enemy at any time?	
i. If so, when and where? In what prison was he held and when was he released?	
7	
Sworn to and subscribed before me, this the	
18th dayof August 1937 Uno Lillie J. Struct	
Applicant.	
of Fulton County.)	

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,	of said State and County is nereby presente
	as a witness in support of the application of
County of Fulton	provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 197
Before me, the Ordinary of said County, comes Mrs. L1111e T. Knox.	and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answer
who, after being duly sworn, deposes and says:	as follows, to-wit:
 That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers; 	What is your name and where do you reside? (Give Post Office and County).
2. That her deceased husband was not a pensioner of the State of Georgia at the time of his	2. How long and since when have you known
death, and, therefore, his Confederate military service has not heretofore been proven in connection with an application for pension;	application of the state of the
	3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citize
 That she is unable to obtain from any person or source evidence as to the Confederate mili- tary service of her deceased soldier husband; 	of this State?
	4. When and to whom was she married?
 That this affidavit is being made to authorize the use, as evidence, of any official record of said Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of 	5. How long and since when did you know
the Adjutant-General, Washington, D. C.	husband?
11/20 Silling. Strong	6. When and where did
11120 Biller Story	the husband of applicant, die?
Sworn to and subscribed before me, this the	7. Were the applicant and her husband living together as husband and wife at the date of his death
18th day of August , 193 7	
of second and the sec	8. If not, how long did they live apart before his death?
Fulton County.	Were they divorced?
County.	If the husband of the applicant was a pensioner, DO NOT answer the following question
	9. When, where and in what Company and regiment did enlis
	(Give date and place)
	10. How did you obtain your information of this service?
	11. How long within your personal knowledge did he perform actual military service with this Con
	pany and Regiment? (Give dates)
1	12. When and where was his Command surrendered or discharged? (Give date and place.)
	13. Were you personally present with this Command when it was surrendered?
	If not, where were you and how came you there?
	······
	14. Was the husband of applicant personally present with his Command at its surrender?
	If not where was he? and how came him there?
· ·	When, where and for what cause did he leave his Command? (Give date.)
	By whose authority did he leave his Command?
	and how long was he granted leave?
	How do you know all that you have stated to be true? (If of your own knowledge, state clearly and spec
	fically)
	15. For what cause, if you know of your own knowledge, was he prevented from returning to his Cor
	mand?

Questions for Witness as to Marriage and Service of Husband.

16. What effort did he make to return to his Command and how do you know this?

17. Was he captured as a prisoner?

In what prison was he held?

18. One when and where?

19. One when released?

, 101 ...

(Witness)

Sworn to and subscribed before me, this the

of ..., County. (SEAL OF ORDINARY)

day of

STATE OF GEORGIA,

WAR DEPARTMENT

THE ADJUTANT GENERAL'S OFFICE

ORD WASHINGTON

August 13, 1937.

Respectfully returned to

Mrs. David C. Knox. 335 Forrest Avenue, N.W. Apt. 4, Atlanta, Georgia.

The records show that David C. Knox, not found as David Crawford Knox, a private of Company A, 2nd Regiment South Carolina Rifles, Confederate States Army, enlisted October 22, 1861, at Abbeville Court House, South Carolina, age 18 years.

The company muster roll for January and February, 1865, last on file, shows him present. He was surrendered by General Robert E. Lee and paroled at Appomattox Court House, Virginia April 9, 1865.

> The Adjutant General. Byme.

Stamped envelope returned herewith. 1 inclosure.

State of Georgia, Fulton County.

Personally before the undersigned authority now

MRS. E. I. COOLEDGE, who upon oath

says that he knows Mrs. Lil ie T. Knox and

knows that she was living with her husband David C. Knox, at the time of his death, that she has not remarried since his

death and is now his dependent widow. Sworn to and subscribed before me

day of August

m l. J. Cookdal

COURT OF COMMON PLEAS 4TH MONDAY IN MARCH 18T MONDAY IN JUNE 2ND MONDAY IN OCTOBER
2ND MONDAY IN DECEMBER

OFFICE OF

COURT OF GRABBAL SESSIONS 4TH MONDAY IN PRESUMET 16T MONDAY IN JUNE 18T MONDAY IN SEPTEMBER

CLERK OF COURT

ABBEVILLE COUNTY

J. L. PERRIN CLERK

ABBEVILLE, S. C.

"ugust 10th 1937

To whom it may concern-

This is to state, that the undersigned

is Clerk of Court for abbeville county, couth Caroling,

That I as such Clerk of Qurt, has charge of the "ecords of the Office of Clerk of Yourt.

That the Mecords of the office show that the names of the Confederate Vetersh who entered the war between the States ere on file in said office.

T'et said "ecord shows that "avid Knox, late of abbeville South Carolina entered the service at the age of 21.

That hew was a private in Company "A" 2nd Rifles"

this list was made up from the "ecords on file in Solumbic, S.C. P Only two (2) Veterans now living in County Respectfully

J.L. Perrin

Clerk Court abbeville County, o.C.

Sworn to before me this Wth

August 1937

Court of Ordinary

FULTON COUNTY

STATE OF GEORGIA

CERTIFIED COPY OF

MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

OF

MR. D. C. KNOX

MISS LILLIE BRIZBER

Recorded in Book G Page 582

W. L. CALBOUN,

Ordinary.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA.

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

WHEREAS:

MRS. LILLIE T. KNOX, WIDOW OF DAVID C. KNOX,

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

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of January , 19 38 , and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 19 37 .

State Department of Public Wolfaro

MARRIAGE LICENSE

State of Georgia--Fulton County

To any Minister of the Compel, Judge of Superior Court, Justice of the Peace, or other Berson authorized to Bolemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony MR. D. C. KNOX MISS LILLIR BRIZER

According to the Rites of your Church. Provided there be no lawful cause to obstruct the same. according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

RETURN THIS LICENSE. WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD

Given under my Hand and Seal this 12th day of December, 1891 19 W. L. CALHQUN, Ordinary

I hereby certify that MR. D. C. KNOX

MISS LILLIE BRIZBEE

and were joined together in the HOLY BANS OF MATRIMONY

on the_lath__day of_Dacember_189119___, by me. S. H. LANDRIM. J. P.

State of Georgia, Fulton County. ORDINARY'S OFFICE

ATLANTA, GA. August 18th 1937

I, CLAUDE C. MASON, Clerk Court of Ordinary of said County, hereby certify that the foregoing is a true copy of the Marriage License and Certificate of Marriage of

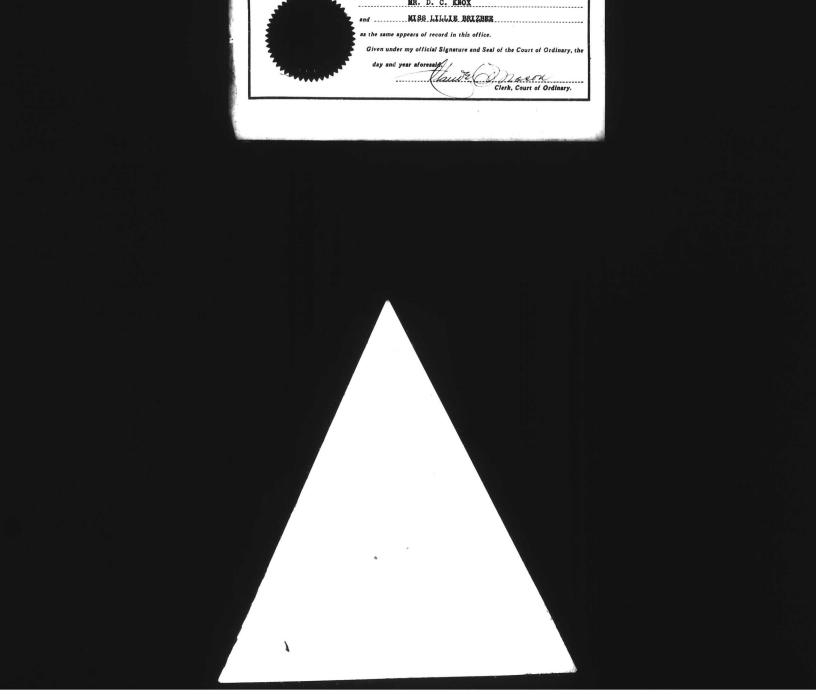
MR. D. C. KNOX and MISS LILLIE BRIZBER

as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the

day and year aforesaid.

Maron Clerk, Court of Ordinary.



Confederate
Soldier's Application
Under Act 1910—As Amended by Act of 1918.

County Feddan, Gas.

Name Marcachert, C. Kollack.

Company "E"

Regiment C. S. Marcine, Corpas.

Approved.

Ordinary's Certificate

re my questions are answered the Ordinary shall sevent applicant and witnesses in the following words:
a do nedembly never that you will true answers make to sake of the questions saked you and the ordinary shall be the whole truth. So hely you (bod.)*

witness resides and

es resides and

rd Printing Co., State Printers, Atlant

J. W. LINDSEY,

'.	·) .		Ordina	ry's Certi	ficate		
	the applicant resides in said service; that the ing affidavit as credit.	county. That I all ey are both residen	so know.	for pension is $f(x) = f(x)$ unty and were ustworthy and	the person he	County, certify that I I represents himself to bethe witness swearing to be before signing the for are entitled to full faith	and o the rego-
	of £ (SEAL) NOTES 1 Before 'You you give all	my hand, and of fire e any questions are a do solemnly sewar th all be the whole truth fifthistic must be made be certified by such Or	nswered the O	ounty.	or applicant and o	vitnesses in the following w vitnesses in the following and the evi- applicant or witness resides	ords: deace
Hollook Madentin Co	Confederate	Soldier's Application Under Ast 1910—As Amended by Act of 1919.	Name Merzerdert C.Kollack	Beginnes L.S.Maréra Coopes		J. W. LINDSEY. Commissioner of Pensions.	Byrt Printing O., Blab Printers, Atlanta.
		i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de	4				

Application for Soldier's Pension Under Act 1910 Amended by Act 1919

Questions For Applicants to Answer

	STATE OF GEORGIA,
	Fultan county.
	Maccartan C. Kallack, Covered des Compto Missid State and County, hereby applies
	for the pension provided by Act of 1910, as amended by Act of 1919, to Confederate Soldiers, and aubmits
	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) Full ton to.
	Attanta Georgia (38 Bonaventure Americe)
	2. How long and since when have you been a continuous resident citizen of this State! 30 years
	Barn and raised in Sarth See Stevious to 1890 was on RR work in Candida Flas So. Car
	3. Did you enlist in the Army of the Confederate States or in the organized militia of this State from
	1861 to 18651 Etilisted in Ca'E' Constederate States Maxine Corps.
	4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of
	Service) 1863, at Savannah Gu Co. E. C.S. Marine Corps, Indicall's Comsegned
	5. How long did you remain in the actual military service with said Company and Regiment? (Give
	date of discharge) 2 year's paraled April 26th 1865, at Greenshorn, N. Grolina
	6. When and where was your Company and Regiment surrendered or discharged from the Service!
	April 26th 1865, Greensboro, North Gardina.
	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
	a. Where was your command when you left it! Greenshara, N. Carolined
	b. When did you leave the command 1 May 15-1865
	c. For what cause did you leave! Paroled by Geril Jos. E. Johnston.
	d. By whose authority did you leave! Cocht. John R. F. Tatt wall
	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. Are you drawing a pension of any amount from this State or the United States? None at all.
	10. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was
	not allowed! Never applied witil this alate, January 1921.
	Sworn to and subscribed before me, this the
	Sworn to and subscribed before me, this the nacarton to Kallock
0	,
(Church Malbury Ordinary
•	of tulkon County
	(SEAL)

Questions for Witness as to Service

STATE OF GEORGIA,

Fullion COUNTY.
J J. Terrick Hollock of said State and County is hereby presented
as a witness in support of the application of Massian & Hallack for the pension provided
by the Act of 1910, as amended by the Act of 1919 in said State, and, after being sworn true answers to
make to the questions propounded, answers as follows:
1. What is your name and where do you reside I of turnish Kollock of
2. How long and since when have you known . Masseston & Mallord the applicant!
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!
since about 1990. I know because most of the time I have find with
4. When, where and in what Company and Regiment did M. & Kolleck
war from 1861 to 18651 (Give date and place.) in Savarral to 1843 both -6 S. Marines
5. How did you obtain your information of this Service! Lawns in Savannals when he miliated
6. How long within your own personal knowledge did he perform actual military service with this
Company and Regiment ! (Give date) from his entistoriet in 1 to 1 to 1 to 1 fortetons surrende
7. When and where was his command surrendered or discharged (give date and place)
in chrunston It april 24th 5665
8. Were you personally present at the surrender !
9. If not, where were you and how came you there?
10. Was the applicant personally present with his command at surrender! - 44.
11. If not where was he and how came him there†
12. When did he leave his command 1. 2 1. 1. 1855 Where was his command when he left it 1. alt sures paroles
when he left it 1 at lemestre to For what cause did he leave 1 because he was paroled
By whose authority did he leave and how
long was he granted leave?
all that you have stated to be true! If of your own knowledge, tell clearly and specifically
I was at Savamah Ba when he welested ratherwooders to when he was probed
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?
<u> </u>
15. Was applicant captured as a prisoner. MQ
In what prison was he heldfand
when released
Sworn to and subscribed before me, this the
arthur Rucarlust Ordinary)
of Fullar County
(SEAL)

	14. What effort did he make to return to his command and how do you know! 15. Was applicant captured as a prisoner FRC
1	

Krouse Harry The witness submitte furnish some testimony to prove his statements make as he states it to be type. The withers sui Confederate Soldier's Application. UNDER ACT 1910. Applicant must furnish some testimony vice and surrender as he states it to

Pension office 10/20/1910 APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910. Applicant must furnish some testimony to prove his statements of his vice and surrender as he states it to be true. The witness submitted Questions for Applicants to Answer. knows nothing of the service in last command. J. W. Lindsey. Com. Of F STATE OF GEORGIA. Tulton Gounty. Harry Krown 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: Harry Storm 321 Earles ave, attanta, Button Country 2/ How long and since when have you been a continuous resident citizen of this State? 55 years, from 1855 to 1910 3. Did/you enlist in the Army of the Confederate States or of the Organized Mihjia of this State from 1861 to 1863? The Army of the Confederate State
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service) April 1861, Atlanta, East, Co t. (at Organ Law Sept., then show the of Service) Lagrence I Far, considering the parties of the Constant of the Con Application 8. If you were not actually present, state specifically and clearly where you were allowed one a. Where was your Command when you left it?. as stated in # b. When did you leave the Command? as stated about c. For what cause did you leave? to joing feel Johnston.
d. By whose authority did you leave? Level Okalker 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?.... Were you captured during the war? No, but was on apr 12th, 1165 j. It so, when, and where? In what prison were you held and when were you released? against 1865 at June obstory Mr.C., & Jaroles 9. What property of every description was owned, in the use, possession and control of yourself 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? Mone-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). 12. What annual or monthly income or earnings of yourself and wife and the source derived have no regular income 13. Are you drawing a pension of any amount from this State or the United States? 22 14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,
Julton County.
Joseph Thompson , of said State and County is hereby presented
as a witness in support of the application of Harry Moure for the pension provided
by the Act of 1910, in said State, and after being sworn rue answers to make to the questions propounded,
1. What is your name and where do you reside? Joseph Thompson allanta, la
2. How long and since when have you known. It has been the applicant?
53 years, from 1855 to present time.
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. attenter lar, meeting him from
4. When, where and in what Company and Regiment did Hany Course enlist during
war from 1861 to 1865? (Give date and place) of flast to fall of the form of the flast of the fl
5. How did you obtain your information of this Service? It as well him fruit year of about the other from the little information
6. How long within your own personal knowledge did he perform actual military service with
this Company and Regiment? (give date) framahist 1861 to ah 1st 1862
7. When and where was his Command surrendered or discharged (give date and place)
apr 12/1865, Captured & faroled stating ofnton me
8. Were you personally present at the Surrender? 20.
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender? ho, Ohas Ausbander
11. If not where was he and how came him there?
12. When did he leave his Command? At along of Man. Where was his Command
when he left it? Mean affrom tol Va for what cause did he leave? Command ordered
whose By whose authority did he leave. Gent Walker at 116 and how
ong was he granted leave? A Okan was over How do you know
all that you have stated to be true? If of your own knowledge (Tell clearly and specifically). From
Whatle information of themed fine his Commanding Offices
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 Lt. If so, when and where.
In what prison was he held?and when released?
Sworn to and subscribed before me, this the Locality Completes 9.20
day of Decar Manager 1910.
AND CARLOS AND CARLO Ordinary
of County

AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA. County,
7 20 20
Personally before me comes Internal M. Muyeus who on oat
says that they are freeholders residing in said County and we know Harry Krouse
the applicant for pension and we know the property that is now in the use, possession and control of himse
and wife and of its cash value to wit: (Make List by items and value.)
Harris Market
The no grouping
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.)
2. When and to whom was it sold or given to? Muss to All
3. What was the price paid or stated to be paid?
3. What was the price paid or stated to be paid to be the state of th
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?
Swan is and subscribed before me, this the JM My Eight 1910 In My Eight 1910 Ce Ordinary,
of
ORDINARY'S CERTIFICATE.
STATH OF GEORGIA,
Junelly County. Ordinary of said County, certify that I know
the applicant sure for Pension is the person he represents himself to be and resides i
Tensor is the person he represents masser to be and resides i
said County. That also know the witness swearing to the
service and who are freeholders, that
they are all residents of said County and were duly sworn by me before signing the foregoing affidavit an
that are all truthful and trustworthy and their statements are entitled to full faith and and it must be at

All efficient must be made before the Ordinary and societed by him.
 If applicant may no property as all in he possession, were country of soil and wife, afficiavite of tresheld manufactures.

QUESTIONS FOR WITNESS AS TO SERVICE.

as a witness in support of the application of Atmay Samuel for the pension provided

by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded,

1. What is your name and where do you reside? John Tyler Compres allanla Ga

..........of said State and County is hereby presented

	Comme 72
	2. How long and since when have you known Aluny Moure the applicant?
	Fortzight Jean
	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 that all and and mention from
	from time to time in done of and war
	4. When, where and in what Company and Regiment did Music Music enlist during
	war from 1861 to 1865? (Give date and place) April 1st 1862 Co & gray
4.5	5. How did you obtain your information of this Service? Men with him
	from apliat 1862 to close of the limit and
	6. How long within your own personal knowledge did he perform actual military service with
	this Company and Regiment? (give date) from age 1 241862 to age 9 57865
	7. When and where was his Command surrendered or discharged (give date and place)
	Upl 127865 was captioned, Paroled at hiscolution is C
	8. Were you personally present at the Surrender? Yet
	9. If not, where were you and how came you there?
	**
	10. Was the applicant personally present with his Command at surrender?
	11. If not where was he and how came him there? Mus cufatures as
	stated in no 7. alon
	12. When did he leave his Command? at close of there. Where was his Command
	when he left it? here left mental Da for what cause did he leave? Commented adult
de	By whose authority did he leave French Walker all 865 and how
	long was he granted leave? How do you know
14 1 17	all that you have stated to be true? If of your own knowledge (Tell clearly and specifically).
A CONTRACTOR OF THE PARTY OF TH	with him when captured
	13. In what way was he prevented from returning to his Command? Mun pour
	How do you know?
	14. What effort did he make to return to his Command and how do you know?
1.77	
	15. Was applicant captured as a prisoner
me	A. C. In what prison was he held?
	4 4
	Sworn to and subscribed before me, this the
	day of the little
h	welling the Britain Condinary
	of 9 County.
ather Water and a second	The state of the s

STATE OF GEORGIA,

answers as follows:

John Tyler Cooper

of County.

MANUE Krouse Harry YEAR 1911 COUNTY Pulses

WINDLE AND WHERE BORN? Resident of Georgia 56 years-from 1866 to 1810.

Name of the American April 100 1001; Atlanta, Georgia, April 100 1008;

PAIK

COMMINY AND REGIMENT? Co. F, let Regiment Georgie Vol. Infantry.-let en-/

" NO CF SAFTAIN AND COLONEL? General Welker.

T.FD?

Control when and where? Captured April 18th 1886, at Lincolnton, N. C. and perclad.

LIMSED.

ADOUT ONE MILE SURRENDERED?

About one mile of Appenation, Va. Command disbanded, applicant was ordered by General walker to join General Johnston, in H. G.

LE MOST DEFENDED AT SHIRPENDER. WHERE WERE YOUY April 18th 1868 captured

DE NOT PRESENT AT SURGENDER, WHERE WERE YOU? April 18th 1868 captured at Lincolnton, morth Carolina, and paroled.

DIED, WHEN AND WHERE?

EURIED.

Fig. 7000ph Thompson - Was with applicant lat year of war.

John Tyler Gooper - With applicant in service.

o data

WI INESSES. Joseph Thompson - Was with applicant, lat year of war. John Tyler Cooper - With applicant in service. No data

Lester Giran W.			5	· S1
INDIGENT PENSION,		Executed in presence of	to receive and receipt for the pension of the pensi	STATE OF GEORGIA
Name ho W. Lackley County Tr. Clan		ace of	nsion allowed, and request that he at this at this at this at this	Power of Attorney
JOHN W. LINDSEY, Commissioner of Pensions.			hat he remit same to	ittorney.
WARRANT HANDED TO Geo. W. Harrison, Base Frinter, Alanta.			1900 [L. S.]	hereby authorize
2/2-1921				

Power of Attorney. STATE OF GEORGIA. County. hereby authorize of. to receive and receipt for the pension allowed, and request that he remit same to Witness my hand and seal, this 1900 __[L. 8.] Executed in presence of LINDSEY × JOHN

Questions for Applicant. STATE OF GEORGIA. Fulton County. to avail himselt of the Tension Act (Section 1264, Code), hereby submits his proofs, and after being duly aworn true answers to make to the following questions, deposes and answers as follows: 1. What is your name and where do you resider give State, Country and post office of IN Stacking Junices in Sulform Costac at 300 December it Actions 2. How long and since when have you began a resident of this State? Since In Ing. white in 180 3. When and where were you horn? Lis walton Go ga When and where and in what company and regiment did you enlist or serve? Comform Hillyens therttallen in Attente 5. How long did you remain in such company and regiment?__ Confey coup and oude laid in Attenta the me how surrended 6. When and where was your company and regiment surrendered and discharged? Substituted of the Letter a Kneet hu Lot of their as The Charges of may 1865 = a feet of my confined mass surrendered? The were you present with your company and regiment, when it was surrendered? I save miles the first much 8. If not present, state specifically and glearly where you were, when you left your command, for what 500 Functioned with the orlenged to the to. cause and by whose authority? 9. How much can you earn (gross) per annum by your own exertions or labor ? Mortuing 10. What has been your occupation since 1865? & have mer dell short the oblid 11. Upon which of the following grounds do you have your application for pension, viz itrat, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty" the Tu 2 fresh. 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 ? / and hardly able to work are juba 13. What property, real or personal, or income, do you possess, and its gross value . I have nothing of any and value. 14. What property, read or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same? I have owned nothing of value, Dave distored of 15. In what County did you reside during those years, and what property did you then return for taxation? In Gillow 16. How were you supported during the years 1898 and 1899? I mark a Titte. After increasing through the Deline. 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? Gout truin in money. Hothing or and 18. What was your epipopenet during 1898 and 1899? What pay did you regeive 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 a single accel a son what sicket The House no survey except sahed me son con carn as many and 20. Are you receiving any pension? If so, what amount and for what disability? worl 21. Have you ever made an application for pension before? Yes Must it got Last and f men Hung 22. How many applications have you ever made and under what class? all for Reval work to when fordeyed that and it is look Sworp to and subscribed before me this the | Sworge alug of Tel my 1908 Solver Williams,

QUESTIONS FOR WITNESS.

STATE OF GEORGIA, Pulline COUNTY) Milliane A factles of said State and County, having been presented as a witness in support of the application of Girn ve W factley for pension	
/F 1 4 F 1/1.	
Jillian . 1 240 CC of said State and County, having been presented	
as a witness in support of the application of Gense W fackey for pension	
mader Section 1254, Code, and after being duly sworn true answers to make to the following questions,	
A STATE OF THE STA	
L. What is your name and where do you reside? Milliam . & Buller	
transfer bil thataingline ak 11:33) Illante (Ejn	
2. Are you asquainted with the opplicant; if si,	
how long have you known him ? Het; north gray or near	
3. Where does he reside, and how long and since when has he been a resident of this State?	
Or lesidy in Allanta Que in that he seder Continuous in	4
1. When, where and in what company and regiment did be enlist, and how do you know?	×.
De June 1863 he drived my Company no Allanta pourse	$^{\prime})$
Were conseminated of the same company and regiment " Jet Ju us Capitain	
How begold be perform regular inditing daty " Per gray	
What and where wer her command secrembered he Macon Ga and Sulant	.41
. Here you prount when it superidered yes I Surrendered u failer it.	
Was applicant present Care Hel Here William	
10 To he was not present, who re was he I varietied in Aclanto, He may	. %
10 13 he was not present, where was he	
When did he leave his command " // Cor what causes for the delication of the leave his command o	
By what muthority he left 759 the system of the first flow do you know any of this	
When did be leave his command "Mever only For what cause" the Chitached period is the what authority by bette By the Governor, order How do you know all of this of a new Califacian I) the Court of and Carles Cacoguetty after such with anti-	
11. What property effects or income has the applicant." (Give your means of knowledge.)	
I de true to here to out the head all the true	٤.
12. What recovers after the recovery delictor angligant passess in 1896, 1897, 1898 and 1899, and what	
deposition, it any, did be make of some Youllet believe he had very.	
13. Has be conveyed away any of his property in the last four years, it so, what was it, and to whom?	
Hill that I know by the has had ning	
11. What is the applicant's occupation and physical condition? He were to be a	
maisona hand non be is uproble he with this	
To It the applicant mable to support hingself by labor of any set, if so, why " He is Arrable.	
Gueral che cepitade de la ull broken at	
Can be areily walk	
16 How was be supported during the years 1808 and 1899 & think he fed aled	
Muc o worked dorne at the track.	
17, What portion of his support for these two years has derived from his own lebor or income?	-
Attent Milm hilly he lived	
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension	
under Section 1254, Code? Ale w Vla and lineable he work. Me Ca	
To poor he care not line on wheat he has be care	
11. What interest have you in the recovery of a pension by this applicant?	
Swarn ward subscribed before me, this A. Fieller Witness.	
the day of Febry 1908.	
- John R Welkerson Ordinary.	
_ v	
15. How was be supported during the years 1898 and 1899: I think he field abled 17. What portion of his support for shees two years may derived from his own labor or income? 17. What portion of his support for shees two years may derived from his own labor or income? 18. Given hall and complete statement of the applicant's physical condition that entitles him to a pension number section 1234. Cabo Ale State of August Lineath to work. He is	-d

AFFIDAVIT OF PHYSICIANS.
STATE OF GEORGIA, JULICANA COUNTY.
Personally came before me 2000 (rice () 100 cm time test & and Ithu N. Viring 200, (), both known to me as reputable physicians
of said County, who, being severally sworn, say on oath that they have examined car fully A c v, LO. Lie Care y 6 Lie 2 and after such personal examination say that his precise physical condition is as follows:
Rhener lace so had it has monthed in
Correspondent . Groping so seems left inter limb
His health it such promised to will the
They further say on outh that the physical condition of applicant renders him anable 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 Rachicles on Colinary.
ORDINARY'S CERTIFICATE.
SPATE OF GEORGIA, SOUNTY. John Rewithinson Ordinary in and for said County, hereby certify that the applicant set to Lac stery resides in said County, and has been a boun fide resident of this State since the and that the witnesses, viz: W. a. Farellon MP. 711 Clary
been a bonn fide resident of this State since the
and that the witnesses, viz: W. a. Jan Clen PMT. In County
are of trustworthy character, and that their statements are entitled to tull faith and credit.
I further certify that before answering the foregoing questions the applicant and each witness took
the oath herein prescribed, and that the full text of the affidavits was read to the applicant and witness
before same was signed.
I further certify that the tax digests of 2.1116 cm. County show that applicant

returned for taxation in his name in 1898. of property, and in 1899 Dollars of property.

In my opinion the foregoing claim is Witness my hand and seal of offin, this County.

NOTE.

1. Before any questions are answered, the Ordinary shall awar applicant and the witnesser in the following words: "You you find," Additional affiliarite answer make to each of the questions asked of you, and the evidence you shall give will be the whole truin, so help you find," Additional affiliarite may be attached if blank spaces are insofficient.

1. In every case the Unioney must certify to the character of the winners, and as to the execution of the proof as above

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,	1
- Fultan COUNTY.)	
Marshu T Materiary of said State and County, having been presented	
as a witness in support of the application of Jenye in Lucky, 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 ? Mustin Pelle Conory	
Othlande ga But office telduce & gg3 ellow retter & break?	
2. Are you acquainted with the straight The Southery , the applicant; if so,	
how long have you known him? Jes for 1. 45- years	
3. Where does he reside, and how long and since when has he been a resident of this State?	
In Falton count &a line 1855	
4. When, where and in what company and regiment did he enlist, and how do you know "June 1863	
4. When, where and in what company and regiment did he enlist, and how do you know "furne 1863 - Allere to gave company the Cartel Fielden Hower Along Georgian the Cartel Fielden Howard My George Hilly Rettalian ferrain	\mathcal{X}
5. Were you a member of the same company and regiment?	
6. How long did be perform regular military duty? Till The furnisher in 1865	
7. When and where was his command surrendered? Just, 1865 - Just is diagon	
obeline in Attenta Lecter & of in Attente	
2 2 2	

gus

11. What property, effects or income has the applicant? (Give your means of knowledge.) Method exect a few eletter and a few old shot tills 12. What property, effects or income did the applicant possess in 1896, 1897, 1898 and 1899, and what disposition if any, this he make of same? Nothing except as arrange in the I will and the Arrively che problem on the Atherite 13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? No The dint show my 14. What is the applicant's occupation and physical condition? I say nettrice He is just all thatten up with their time and only,

ges - decement of this ophysical mentioned as set -16. How was he supported during the years 1898 and 1899 By this titlle i headdhing and chemity of this of minds 17. What portion of his support for these two years was derived from his own labor or income?

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1264, Code " Shall as of theme sound the is of your and the construct and to surface this strake and the world and just much out the Rhusseling & Drupy

19. What interest have you in the recovery of a pension by this applicant? Swore that one supplies the Swore to and subscribed before me, this Mount of Crary Witness.

I claim thous of much say not own one from

15. Is the applicant unable to support himself by labor of any sort, if so, why? ___

day of Februs 1900) and

8. Were you present when it surrendered? 9. Was applicant present?.

10. Whe was not present, where was he? When did he leave his command?

By what a thority he left?

I was in attenta

For what cause?

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1204, Code? Mill Cut of Areas social She is of war and Che Civil and the world and put the Market and the world and put market was Reducented by the state and the world and 19. What interest have you in the recovery of a pension by this applicant? Soon that one completes Swore to and subscribed before me, this Market Orang Witness.

The She applicant of the subscribed before me, this market of the She are the subscribed before me, this market of the She are the subscribed before me, this market of the She are the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, this market of the subscribed before me, th

LAINS, HATTIE B. CMISS tueton County 19250 Application for Pension

Due Deceased Pensioner (UNDER ACT 1919)

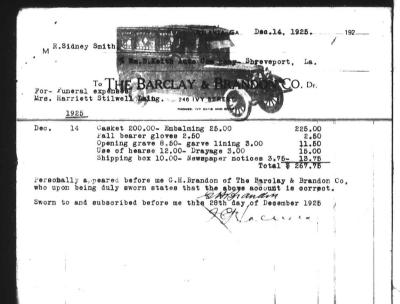
(To pay expenses of last illness and funeral)

Amount \$ 100 00

Approved and ordered paid John W Clark 1925

JAN 2 1926 Commissioner of Pensions.

Ordinary: Fill out above in full and send this blank to Pension Department for approvable to 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 Adean. Do not keep this application filed with Adean. Do not keep this application in your office.



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)

(BEORGIA Tuellon County.
	Personally before me, the Ordinary of said County, comes.
88	of said County, who, after being sworn, on oath ye that he knowledge that the County and that said Pensioner
Co	as on the Pension Roll of said County at the time of death, which occurred in full of 5 ounty, in this State, on the 14 day of Dec 1925, and that
	Pension of
	upsid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$767.
pe	r sworn statements fully and completely ITEMIZEI) hereto attached.
avi	Sworn to and subscribed before me is 15 day of 21 1925 W. R. Wallet & Ordinary Lullon County
-	(Seal of Ordinary)
G	CERTIFICATE OF ORDINARY
	I, Throat fulfiles , Ordinary of said County, do certify

GEORGIA.

County.

I. County.

I. County.

I. County.

I. County.

I. County.

I. County.

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I. County.

I. County.

I. County.

I. County.

I. County.

I. County.

I. While in life and that this was the same person whose name appears on the Pension Roll of

County. and

Was paid a Pension of.

I. County.

(Seal or Ordinary)

IMSTRUCTIONS

- 1st. For use in all cases where pensioner died after January 1st, had not been out of State longer than twelve months, and did not leave sufficient property to pay such espenses. THE WIDOW OF A SOLDHER, IF SHE IS LIVING, MAS PRIOR CLAIM OVER THESE EXPENSES, AND MUST SHAR APPLICATION ON TELLOW BLANK.
- Bid. Require those classing appears of last illness and renersa, to many out their accounts in fully itemized form, giving each item and the cales of it, and each dafe.

 3rd. Running accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew weres to die.
- sh. The Ordinary must not be I had such hill is presently not to the overgrouped, and properly to pay this bill."

 sh this black hat he was properly completed to infection the overgrouped, and properly wrome, he, and all attached seating this black hat he has properly completed to infection the black of
- past out usual is a spanned to you so your existency to make the payment.

 The The Ordinary spins go you, the Ordinary, for the pastion and then disburere the monty binard and taken receipts.

 The Accept no bills for nursing until you write the Fundan Department, stalling the circumstances in very great death. Fundance's children, or children-laws, must not design the Brists. He diske, and you had be low and conneces beamany winning of them.

 The Return the application, and state-the Ullis, yelly your that institutions, in the Tundan Department.

 10th. Ordinary shippid was that be back of this billsh, yellow fields, Wilde etc...

Ordinary, County (Seal or Ordinary) IMSTRUCTIONS: IMPURDUPLONES:

Int. For use in all cases where pendance died after Jeanny Inh. See the best cut of State image: then twelve markets, and did not leave sufficient property to got such expenses. THE WINDOW OF A SOLDIER, IF SHE IS LAVISO, HAR PRIOR CLAIM OVER THESE TRYSHER, Also DUET RAILS PATOLOGICOUS OF INJLIVED BLAKE.

124. Require those delaining expenses of that librars and fasters, to make such their accounts in fully immined form, giving cond. incent. and it is paid—out it can connected with the last librars, less before death when pendance grav weres to dis.

124. Reach account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "just, true, due, unpid," etc.) poid. "An ob"The above and foregoing account is rendered for services in the last library care from the mean may be of"The above and foregoing account in rendered for services in the last library care from the mean may be ofthe Ordinary many one to it has each till in present... "Who find without swring satisfacts repostry to capable to
to this blank has been properly completed to indicated. The completed vertical blank and the bills—must be unable to serve properly completed as and in its services... As an add all stated assists
ofth. The completed vertical—this blank and the bills—must be unable to the Panelson Department for approval and no smooty must be
poid out until it is returned to prove a substitute to hash the approach
and the surface of the present to the present of the present to the present of the pr

Widow's Pension

UNDER ACT 1910.

County Lullan

Name amin Elizabeth Lairal

Widow of L. Lairal

Li & What ala might

Widow's Pension

Widow's Pension

UNDER ACT 1910.

County Hellan

Widow old J. Levod

Widow old J. Levod

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

STATE	OF GEORGIA,
VICE	County.
	resonally before me comes 12. Lunce Circlesh Raid of said State and County, being duly sworn, on oath says that she desires to apply for a pension allowed under the Act
	estions to wit:
1.	What is your name, and where do you reside? Ture all about Tured
38 4C	How long and since when have you been a continuing resident in the State of Georgia?
[/] 3.	When, where and to whom were you married? Willing Guily, La liev 21,15 7 to 24. When, where and in what Company and Regiment did your husband enlist as a soldier in Con-
federate A	Army or Georgia Militia? (State the arms and class of Service)
al or	When and where did the Commands of your husband surrender or discharge from the army?
71 6.	Was your husband personally present at the time of the surrender or discharge of this Command?
16,	*
7.	If he was not present state clearly where he was?
8.	Where was his Command when he left? Hew Hope Church (Lorgia)
a.	For what cause did he leave his command? his granualed as
ъ. 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? A sollsaded from 114
g.	In what way was he prevented from going back to Command?
h.	Was he captured by the enemy at any time?
leased?	If so, when and where captured and where held as a prisoner, and when and for what cause re-
C. S. Washing	Che manage application of the
	When and where did your husband die? 110 Capital loz., all aula, ta.
	Were you residing together when he died?
1.	If not, how long had you resided apart?
May	What property of any description did you own, hold or soutrol for your use and its cash value, 1908. (State same by items.) 1909 to 19230 to 19230
	L 1230
	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.)
11.	What property of any description of any value have you now? Jame on alorr's
Give list	and cash value? Same or above?
12.	What are your annual earnings or income and their value?
	/
13.	Have you heretofore been paid a pension by the State? %.
	n and for what cause were you struck from the Roll?
***************************************	orn to and subscribed before me this the Mrs. I will " legal the air
	day of 19/P
****	John William Ordinary

Questions for the Witnesses as to Service of Husband and Marriage.	
STATE OF GEORGIA, Fullan Country Personally before me comes W. Munford who after	STATE OF
being duly sworn true answers to make, to the following questions, answers as follows: 1. What is your name and where do you reside	are freeholders of said County
2. How long and since when have you known New All Marie applicant? 3. How long and since when have you known resided in this State? (Give date.)	Schedule (A) a
When and to whom was she married? Bear fifther Bear How do you know for Munch livered &	***************************************
5. How long and since when tijd you know the first that her her husband Horr Museum from 49 for June Colored 1861	We know
the husband of Applicant die 2th 100 Copic last 1000, Ull cutte far, June 13, 1902 7. Where the Aplicant and her husband living together as husband and wife at the date of his	***************************************
death" GCQ 8. If not, how ong did they live apart before his death?	A . We also
Were they divorced?	Cugu !
9. When where and in what simpany and Regiment distributed Jefferson Facration 18. Colores 1866 Confacila, ala, E. E. 18. alla or Jenn. Again Upon Jamatan J. 34 th	***************************************
Na Regt in 1962, Ten alphous Bokers Brigale, letter of that regt or Cofting & D	
10. Were you a member of the same Company? 226.	Sworn a
11. How long within your personal knowledge did be perform actual military service with his Company and Regiment. He time ty the Bulle of Mess There Church 12. When, and where did his Command surrender, and was discharged. Ut the Close of	Jø.
The Wax	
13. Were you personally present when it was surrendered? The If not where were you a Pris auer of the z of Count Pros Dand how came you there? Hos wanded	STATE OF
in Baule of Allanta, Coptured 2mit pely 69 and held or Presource Wer	021
011.4	hat, I know
where was he the Man name to rendered when where and for what cause did he leave Command? (Give date Lalle of Mer / Hepe Cherch - Faunded By whose	is the person
authority did he leave his Command? The Hegineental Durglan and how	County and wa That I
long was he granted leave? Dadlfurlel How do you know all this?	to the service
Personal Knawledge	freeholders. T
	full faith and
15. For what cause, if you know of your own knowledge was he prevented from returning to his	That th
Command? Theo disabled from brosile by baccade	1908 \$ Sworn u
16. What effort did he make to return to his Command and how do you know this? Obyour	191
own knowledge or how? He wor dis abled form traumal	SEAL.
(Howern to and subspecies before me this the	(SEAL.)
Marchen Worker Col	NOTES 1. Befor
Ordinary,	4 All af 3 Only 5 Attan
of Jounty.	o Attac

AFFIDA-VIT	OF TWO FRE	EHOLDER	S.
STATE OF GEORGIA.	1		
Fullan Con	inty.		.0 /
	0	4 8.C.	Land
	m. myew }		on oath paya hat they
are freeholders of said County and that the	ney know. Ilra. au	une Gliz	obeth fairy
of said County and know what property s	he owned on 4th Nov. 190	08, and its cashov	alue to be as set out by
Schedule (A) as follows	Hausehald et	heel-	95719
Personal property		7	8-7-20-
Notes and accounts	due		8
Total			:250
	Schedule (B).		
We know the property sold or give		08, itε cash value	to be as follows:
Personal property	~ .	····	3
Money, Notes an	accounts Ran		S
	Schedule (C).		
We also know what property she is	es now in her possession,	, use and control	to wit:
Light Funkeres of land wor	11/100		\$200 -
Horses and Mules	have		5
Cows and Hogs	nane		\$
Other property	nan	*	\$
income and earning	of all property and effect		.5000
Sworn and subscribed before me	2 214	. myci	she c
LJ day of My	L		
Oal & Wrest	7 ,	,	7
7	Ordinary,		
of	meun	Cou	nty.
ORDINA	RY'S CERTIF	ICATE.	
STATE OF GEORGIA.)		
Fultan Coi			
01/ (h. 1)	_ ,		
John T. Will	inam	Ordinary of	said County do certify
trat, I know annie 6. La			cant for pension. She
s the person she represents herself t	be and she is a bona	fide continuing	resident citizen of said
County and was in the 4th Nov. 1908.77	9		
That I also know	unfora	- P t	he witness who swears
o the service of husband, and		Bacino	
reeholders. That all of them are now re			
the foregoing affidavits and that they all	, are truthiui, trustwort	ny, and their st	atements are entitled to
That the Tax Returns July	us and a	lairel Roll	turned for Tax is for
~	for 1910 8	ine	
Sworn under my hand and official		15	day of Hor
91		01.	
SEAL.	John	1 was	Ordinary Ord
			Bullan County
(SEAL)			, /

or any questions are answered the Ordinary shall swear applicant and the witness in the following words:

no do solominly swear that you will true nanwers make to each of the questions saked you and the evidence
you shall give will be the truth. So bably not 00.1";

Illional salidavits may be stacked if blank spaces are insufficient.

y window who married prior to first January 1870, are entitled,
she certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

OVALL for 1910 8 Wave day of 2cor Command? How disabled from brisice by Gard 1908 \$..... Sworn under my hand and official seal of office this..... 16. What effort did he make to return to his Command and how do you know this? Obyour own knowledge or how? He wood disabled from fround SEAL. Bullan County (SEAL.) HOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:

"You do selemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be that truth. So beal you do.d.!

All affidavits must be made before the Ordinary.

Only widows who married prior to first January 1870, are entitled.

Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputations.County.

15. For what cause, if you know of your own knowledge was he prevented from returning to his

That the Tax Returns AND That is for

WIDOW'S
Indigent Pension.

1901.

Name Mark Market or Pension.

Wildow of Paragram

Wildow of Paragram

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In the state of Paragram

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Warrant Handed to

In the state Paragram

Warrant Handed to

POWER OF ATTORNEY

	remit the same to m Witness my Execu	jakokar H. Soir Ton	County. A hereby an County, to receive the in Allontu day of Sen	thorize WJ and receipt for the pe	ension allowed and the tered mail. OGCOL	k in hus
	PAAL (13	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
				-i 5		
Luth mas . C.	WIDOW'S	Indigent Pension	Name Mrs & Cofficial Country Fuller	Approved 72. 1901 Approved 72. 1901 JOHN W. LINDSEY, Commissions of Pension	WARRANT HANDED TO	Gen. W. Marriero, franc. 7 thurs., 2 thurs., C.C.

*
Questions for Applicant.
STATE OF GEORGIA,
Fullow County.
Mars & G faind
avail herself of the Pension allowed to Indigent Widows of Confederate Moidlers, 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:
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.) Uses Lile Lord are Astante Fullon so ga 68 Haylen of
2. How long and since when have you been a resident of this State? Since & Mass Plats
3. When and where were you born? In March 1840 in Herry Co ga.
4. When and where was your husband born-state his full name, and when were you and he married?
Menist 30 1830 in Merchant of Court, gul Richard & Sard - Murrical Aug 30 185 9 5. When and where, and in what Company and Regiment did your bushand enlist or serve during the
5. When and where, and in what Company and Regiment did your husband enlist or serve during the
war between the Blates for Herry curacy Cl mary 3 1862 in company B.
6. How long did your husband serve in said Company and Regiment?
man execut whereoff duty from moude to it kneed and while explain
Man Steel Ather of duly from mount of carle and will confirm of the confirmation of th
8. Was your husband present at the time and place when his Company and Regiment surrendered?
9. If not with his command at surrender, state clearly and specifically where he was, when he left command, for what cause, and by what authority? I them stolked the thirty through
He mad, a frusner of Toint Level out at the funder
and may Manulled and some Love in lune 1866
10. When and where did your husband die? In Allanda Su Dec 27 1848
11. Which of the following grounds do you base your application for Pension, viz: First-Age and
Poverty; Second-Infimity and Poverty, or Third-Blindness and Poverty?
12. If upon the first ground, state dow long you have been in such a condition that you cannot earn your support. If upon the second, give a full and complete bisory of the infirmity and its extent. If upon
the whird, state whether you are totally blind, and, when and where you lost your eight. I should below the formand from the formal the first and rinky of the
in the heid ifm to giver, never while to work once in had for 16 months was to
13. What has been your occupation since your husband's death? I Chon will then able
10 do ary trust not oblit trup bran the tills at all.
14. How much can you carn gross, by your own exertion or labor? I suffice if could get turne things 15. What property, real or personal, or income do you have or posses, and its gross value to the transfer of the country.
Michael ruther, that my clothest torne HH woods of me other 30 army the 40 dather. 18. What property, real or personal, did you peaces at death of bushand 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? Wil Raul Citaly,
17. In what counties did you reside in 1899 and 1900, and what property did you return for taxation?
18. How have you been supported since death of husband, and especially for 1899 and 1900?
Touch by Security the holdered my massed drughter give milgry approx
19. How much did your support cost for each of those years, and boy much did you contribute by your
19. How much did your support cost for each of those year and how much did you contribute by your own labor or income? Level The 250 Trule of the form
ill 18 18 When able I down my hour towek tell thurbond died since there found go all the sold as the sold must at all there is several for all 18 Have no a family I no who composes such family I to Give their means of support. Have they
any lands or other property? I Howe only must be flower mosticed dissipling they begin to much
22. Have you ever made an application for pension before 1944 goldled out out condend to the condend of the con
22. Tow many applications have you made for a reason, and under was clear 1 to indeed at a feet the strength of the strength o
Sworn to and subscribed before me this 1991 Straft & Link
day of Jehnung 1901 } Alis & Lical

John R Wilking orordinary,

Secondly on hys whenter Questions for Witnesses. 26. Is applicant able to ears a support at labor of any sort, if not why? seld therethe Can to down gupping mete what STATE OF GEORGIA. 27. How was she supported for +0000 and 1900? By the morning duruphling the may met a suidous in 155 3 County. William and Welffelins of said State and County, having 28. How much did applicant contribute to her support for last two years? Wintwell Worthing been presented as a witness in support of the Application of Mrs. L. To Louis 29. Give a full and complete statement of applicant's physical condition 1900 and after having been duly sworn true answers to make to the The one net Doctors of it me throw show Knowing and hat? following questions, deposes and answers as follows: 1. What is your name and where do you reside? Pleasant Im Mernit? 30. What interest have you in the recovery of this pension by the applicant? When it is a complete to the control of the pension of the pensi 2. Are you acquainted with the applicant. Mrs.

2. Are you acquainted with the applicant. Mrs.

30, how long have you known her

Species - Linew 1855 Merrith (1940) Sworn to and subscribed before me this 20 Febru Joy Speains & If so, how long have you known her ! 3. Where does she reside, and how long and since when has she been a resident Heth-fn Fullon every gu listed merfust firew ter
When and where was she born for Henry every gu
Were you ever acquainted with her hu-band Where did be reside in 1861 An Heret En . 3 & Survelate bow Then on they so Affidavits of Physicians. When and where was he born . ALL130 1830 STATE OF GEORGIA, 9. How long have you known him? species = 42 years murrett since 1560 Tulloni 10. When and where did 12 In Luind County. culist in the war between Personally before me comes JV m Vain the States, and in what Company and Regiment did be ealist and how do you know this " 4 1: 1104 1562 in coft ches Luching co in Herry co go offerends 60 B 53 go Key m Alay The action of said county, who, being severally sworn, say on each that they have examined carefully Mrs. Mrs. Alay The special toral Person under Act of 1996, and after Weithen Ill and of the months Preplant the section to such personal examination say that her physical condition is this surroduce the three her for the form of the physical condition is this surroduce the three her for her three her for the form of the physical harden of glassociety of the form of t 13. When and where was his Company and Regiment surrendered and discharged from service? In 1865 forme where in Pa = Rue Lund from Joint Letowat The 14. Were you with the command when it surrendered? 00 and we have no interest in said pension if allowed. Ran Lond the husband of applicant present Sworn to and subscrited before me this 19 No the mos in Fruson. 17ebin 16. It not present, where was be? In Trison

17. When and where stil be leave his Command? Continued in 1864 nuon helpow and captumil gut captured by 213 H soldiers By whose authority he left? How do you know all the " (State fully and clearly) Mrs (Keroto it Theore the Service According to the formal According the start present when ORDINARY'S CERTIFICATE STATE OF GEORGIA, he entertue the going Letters and or fact of his explaine of deving seen his Toral Tropage 18 When and where did In Attention go Del 27 1898 Fullon. County. RW Low Chief In Allanti ful Dec 29 15 9 5.
19. Where did he reside at his death and how long had he been a resident of Georgia at his death? 1. John Rameron , Ordinary in and for said county, hereby certify that the applicant, Mrs. of CRand In Fulton ecunt & a had lived in genzie all tichife county, and has been a bona fide resident of this State since day of

18 FP and that the witnesses, Mr. CV Spanson to Petrology

are of trustworthy character, and that their s 20. Do you of your own knowledge know that applicant is the lawful widow of RM Lond me centainly do are of trustworthy character, and that their statements 21 Has she remained unmarried since her soldier husband's death, and is now his widow? She has and is now his midon I do further certify that before answering the foregoing questions, the applicant and said witnesses took the 22. What property, effects or income has the applicant, if any, and how do you know this of your own knowledge? Nothing obsert then cleether and a little HA goods oath herein prescribed, and the full text of the affidavits was read to the applicant and witnesses before the same was signed and subscribed tellon county shows that applicant suy \$ 50 co musti. In Know of om our formal organiture and obsenting I further certify that the tax digest of 23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she returned for taxation is her own name in 1899. Non Exect as about of property, and in 1900__ dollars worth of property. Witness my hand and official seal, this_ 76 by 190/ 24. Has applicant conveyed any property in last two years or given any away, if so what was it and to SEAL whom? None = Execut species That she let the on is some Ave Those a free for Expense of Hushar lost eretimes Notes—I. 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.

2. Additional saffdavits may be attached, it blank spaces are insufficient.

3. All affdavits 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 sudows. Those married since 20th April, 1805, not entitled.

5. Witnesses and two Aprilosses are necessary to make out claims. 25. What is applicant's physical condition and her chances and ability to earn a support? Word

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POWER OF ATTORNEY.

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FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, PRIMER AND COUNTY OF FUITON.	-
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am satisfied that the facts therein stated are true, and I know she is the individual she represents hereseif to be, and that she has continuously resided in this State since the	4
Given under my official signature and seal, this the day of JAN 31 1902 1902. Omicial County Ordinary of County.	

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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STATE OF GEORGIA,	· COUNTY.		.	J. v	ŀ
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7 6	WIDOW'S PENSION FOR YEAR EXDING DECEMBER 31, 1904 Thu & Extra Service.	Widow of Co. Co. Co.	į		1.3
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POWER OF ATTORNEY.

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To Those Herelone Paid. wing To Those Herelone Paid. No. 176	WIDOW'S PENSION, For year ending Dec. 31, 1905.	Fulton or County	Widow of Lip ha 2A Laira Co. J. Os A. M. Regiment. JOHN W. LINDSEV,	WARRANT ISSUED WARRANT ISSUED AND IL ANDREA TO	light of Care 172(U.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA, County of Fulton. Personality comes Mrs.
who, being sworn, says on oath that she is a bona fide resident of said County of
Fulton. State of Georgia, and that she has RESIDED in said State
continuously ever since Bostley . That she is the Widow of Richard Whow was a goldier in Company
B. of the 5322 Regiment of Ja
Volunteers, that he enlisted in said regiment on or about the month of
186 2, and served in the Army up to 2hr 186 5. That he died
on the 2711 day of Rece _18 99
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7 2
Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 18.5
I have been allowed an Indigent pension as a resident of Rulton.
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 day of 1904.
In AWil Kinson Ordinary Post Office
State of Georgia, I. John R. Witkinson. Ordinary of said County, certify that I am well
acquainted with Mrs. & Caircl , 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 Sixty 18
Given under my official signature and seal, this theday of!JAN 22 1904 1904.
(one Allie Kisson
Ordinary of F111011. County
NOTE.—All blanks must be filled. Youthers and Amdavis hinst bear date witer Sudusty 1st, 1904.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

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STATE OF GEORGIA, County of Fulton.
County of Fulton. \ L. C. Zaird
who, being sworn says on oath, that she is a bona fide resident of said County of
and that she has reshred in said state
continuously ever since That she is the Widow of
That she is the Widow of who was a soldier in Company
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Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
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County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the
year ending December 31, 1905
Sworn to and subscribed before me,
this day of JAN 2 1905 1905. }
Post-Office.
State of Georgia, County Ordinary of said County, certify that I am well
County Ordinary of said County certify that I am well
acquainted with Mrs J. C. Said , who made the above affidavit and
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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 of18
Given under my official signature and seal, this the day of 12 1905 1905.
Comment College Colleg
Ordinary of County.

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	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 12 N 2 1905 1905. [Official] NOTE.—All blanks must be filled. Youchers and Affidavits must bear date after January 181, 1905.

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FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

resident of Georgia, and has been continuously since the in first of the day of April 1830; that he enlisted in the military service of the Confederate States (or the State of Bridley; May 1862) during the war between the States, and served as a formal in Company B, of 33th Regiment of Volunteers & Resume Brigade; that whilst engaged in such military service, at the battle of Wildering in the State of Virginia, on the bit day of Leasy 1864, he was disabled as follows: a familie to make feating the families of the Association of the State of Windows and States of the State of Windows and States of the State of	STATE OF GEORGIA,
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 continuously since the confidence of Georgia, and has been continuously since the confidence of the Confederate States (or the State of 3rday; they 1862, during the war between the States, and served as a former in Company B, of 537th Regiment of Volunteers & Ressary Brigade; that whilst engaged in such military service, at the battle of Wilderup in the State of Vorgan, on the left day of leasy 1864, he was disabled as follows: a familie to much failed the families of the Confederate o	Vicit time County.
resident of Georgia, and has been continuously since the in first of the day of April (1830); that he enlisted in the military service of the Confederate States (or the State of Bridge; May 1862) during the war between the States, and served as a formal in Company B, of 35th Regiment of Wolunteers & Ressure Brigade; that whilst engaged in such military service, at the battle of Millerup in the State of Vergenn, on the bit day of Leasy 1864, he was disabled as follows: a family tomula feeting the formal family that districtly that left mich for it districtly that left mich for it districtly the family that a family that I show the family that a family the family that the family that a family the family that a family the family that a family that a family the family service of the Conference was stated in the miditary service of the Conference family that and the last of his miller and the family that a miller and the family that and the family that miller and the family that miller and the family that the	PERSONALLY appears dichard Workers of Allo low
1830: that he enlisted in the military service of the Confederate States (or the State of 3 and by they 1862) during the war between the States, and served as a former in Company B. of 537th Regiment of Volunteers & Resume Brigade: that whilst engaged in such military service, at the battle of Milderness in the State of Vorgen on the bit day of May 1864, he was disabled as follows: a former to make further than the first dishert. The state of the battle of the State of	County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen and
federate States (or the State of 3. day; may 1862) during the war between the States, and served as a private in Company B, of 33th Regiment of while service, at the battle of Bilderup in the State of Verginia, on the bit day of the state of Wirginia, on the bit day of the state of left have a fearful; the left mich fit desticate; the state of his destination of the state of the	resident of Georgia, and has been continuously since the
States, and served as a former in Company B, of 35th Regiment of Volunteers & Ressure Brigade; that whilst engaged in such military service, at the battle of Bilderness in the State of Vorginia, on the bit day of lucy 1864, he was disabled as follows: a former leading to the left Brick of the have a se foundating the left Brick of the district of the left Brick of the district of the left brick of the district of the left brick of the left of the laid of the military duty, love to the former to was	1830; that he enlisted in the military service of the Con-
of pin Volunteers & Resum. Brigade; that whilst engaged in such military service, at the battle of Millerness in the State of Very in on the Est day of May 1864, he was disabled as follows: a familiary to much planting to in the State of left have a se familiary into left minh for it districtly the same familiary to be formed from the familiary than I also a come a most in a most in a service of the separate of the spring was stable in the midelary service of the less familiar was stable in the midelary service of the less familiar stable and while deponent was in the ham in the laid of his millerny duty, tovit deforment was and the familiary duty, tovit deforment was	federate States (or the State of Briday of May 186 2.) during the war between the
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disabled as follows: a female, wound feeling in the left the hand a a female, into left the mich fit destact, The similar female, the female in Legal the female in Legal to the state Cambring a service of the less france was received to the defined was received to the less format was still in The miditary dervice of the less format the States and while defined was in the ham in the laid of his military duty, towit it the format was	of S Volunteers vers Brigade; that whilst engaged
disabled as follows: a few sit to tomulable of the left have a a few tilly into left the side of the s	in such military service, at the battle of Hildenich in the State
disabled as follows: a few sit to tomulable of the left have a a few tilly into left the side of the s	of Verginia, on the 6th day of May 1864, he was
mich fit distract, The series perment for a series of the series cardina a series for white Santin a series of the spine, for white social while deposed was still in the miditary service of the Cosperante States and while deposed was at the said white deposed the Cosperante States and while deposed was an the base on the laid of his military duty, towit ile prosect was	disabled as follows: a function, wound place on in
sicaling une I also access a in a most - lin degliman-1164, in worth Carolina a service This region, to the Spirit was received while defined was still in The miditary dervice of the listeriette States and while deponent was in the ham in the luce of his military duty, towit: de proment was	bull i lethe have and pentily into left
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States and while deponent was on the brain in the line of his military duty, towit i de poment was	com y The spine; for while I die helpe.
States and while definent was on the have in the line of his military duty, towit ite from to war	This infile, to the Spice was receir & while deposed
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returning to his Commans after being absent	hice of his military duty, torit: definent was
	running to his Commani after being absent
on furlingh granted because of the wrist comment	
afor is this.	

Deponent desires to participate in the benefits of the Act approved October 24th, 1887, and the Acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder, ending October 26th, 1893.

Sworn to and subscribed before me this the large Saired of Large 1893.

Note.—State fully nature of wound or character of disease which causes the disability, and emplain farticularly the extent of the disability. It 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.

Affidavit for Witnesses.

STATE OF GEORGIA. County of Juller

Personally appears before me, the undersigned, Ordinary in and for said County, I'm hunge dilla A. Our Her fr. D. Lacid cach of whom, being duly sworn according to law, severally say, under oath, that they are personally well acquainted with Nichael. Tr. whose application is herewith presented for a pension, and that they served with him in the army, and from our personal knowledge he was injuged by the service as follows: I give full statement, and tell in your own language how badly applicant is disabled from work. If he does any labor, or can do any, state what) . In a Guen that would though the left hand and wist of the lefi lim, received in May 6th 1864 in The battle of the wilderness which disable, an wester, substantrally and issentially useless his daid left am on to their a med deponents Kuth Barker Say They Kee on dit because They were serving in Thisauca ngiment with The applicant and deponent Tarker saw applicant the same in after he was so wined a and deponent Kutt was the Surgeon who first examined un broked said wor. ed. Deponent MB. fairs in the bother of applicant, was in The 3x the ga Right in The Same Command aurvair applicant after necessing the would the same day. Deport Knott har ale examuel applicants Con Thin as to The nouts of The spinal injun, alleged in The application with The noult stated in his affectant on next he a gir.

We personally know above stated facts We were with him in the army and have known him ever since. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 18 6 We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me this ! M. Y, Zur Ker 3 day of Africe 1893. The D. Jane I Thurs 100 mitoloccepma.

Note.—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 tasked to make their statements full and explicit.

PHYSICIAN'S AFFIDAVIT.

STATE OF GEORGIA, County.

Personally comes before me De La Come Ordinary of said County, Jakuns and me as reputable physicians of said County, who being severally sworn, say on oath that they have carefully examined Micham Marine and after such personal examination say that the applicant has been injured as follows:

He arcine may The Bt 1864, a greather mond The bull intering on The brok of left hand trying upming and positive The left mid friend districtly The left mint friend in a sail to frether of the Corpet trung of dring git in addit to to I from old from 1 ber 2 cen a ing september 1864 in horth Carolina on a home white my mich a server with the of the De Suffy this Capacity to unso is inder to the hot two the my this said wrist trul rance is substantially and meeterly with We have treated applicant professionally for years.

Sworn to and subscribed before me this 1 John to Sat Lite Ling 38 th AM 300 day of 1 /2 1893. 5_

Int docthing

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 — It 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. Fixellon County.

IX. L. b. celhom

Ordinary of said County,

do certify that I am well acquainted with Hickory Ir. Laire 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.

Given under my official signature and seal this 16" day of 16 and 189 M. L. 4. celhour.

Ordinary Line County.

POWER OF ATTORNEY			POWER OF ATTORNEY.			
STATE OF GEORGIA,			STATE OF GEORGIA,			
County.			County			
KNOW ALL MEN BY THESE PRESENTS, That I,			I,hereby authorize			
County, State of Georgia,	of. do hereby appoint		of.			
of.		l lawful attorney in fact, for	to receive and receipt for the pension paid hereon and request that he rer	mit same to		
me and in my name, to rec State of Georgia by reason	ceive and receipt for whatever amount of money I of an injury received as aforesaid in the military	may be entitled to from the	by			
States (or of this State) as	stated in the foregoing affidavit; hereby authorizing ant that may be issued by the Governor, or for a	r my said Attorney to receipt	at ,			
be coming to me for the rea	ason aforesaid.		IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	i		
day of	EREOF, I have hereunto set my hand and seal, th	in /	day of1896,			
Executed in prese		[1 8.]		[L. S.		
)	1	Executed in presence of us			
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	1)			
Send money to me as t	DIRECTIONS.	1				
	- to County, Georgia.	P. O.				
SION.	1865	Department.	10N, 1896			

(For Those Aiready Enro 18

SOLDIER'S PEN 1895.

Disables in onari W.Lairi - witon

For Those Already Enroller No. 995 Saira

SOLDIER'S PENS 1896.

Picheri W. Lair Dussbled 4rm Pulton Disability County Name

RICHARD JOHNSON,

[L. S.]

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,		
County.)		***
personally appears disugra #. Taira	· of	Fulton
County, State of Georgia, who being duly sworm, and resident of said State, and has resided therein day of State of States, and served as a 18 %; that he of Gederate States (or of the State of States, and served as a 18 % to the States, and served as a 18 % to the States, and served as a 18 % to the States, and served as a 18 % to the States, and served as a 18 % to the States and the states are the battle of 18 % to the States are the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States are a small of the States and the acts amendatory thereof, and makes apple entitled for the year ending October 26th, 1895.	a continuously ever sine continuously ever sine continuously ever sine continuously ever sine company. It is subject that the continuously ever sine continuousl	service of the Con- te war between the f 50 Regiment whilst engaged in in the State 186 he was the out of left the state, and deraus er 196 in North offer. This in the military servic rain in the line command after being tessaid. October 24th, 1887, the to which he is allowed a pension
day of V=12B 1895. W. L. Laller In October of October of disease which the disability, resulting from the wound or character of disease which the disability, resulting from the wound or disease.	1	ain particularly the extent
STATE OF GEORGIA, County.		
I, G.L.Calhoun	Ordina	ry of said County,
do certify that I am well acquainted with	Richari W.Lair	i the
applicant in the foregoing affidavit, and am well s in his said affidavit are true, and I know he is th		

Given under my official signature and seal, this

m. L Cach

_County.

Ordinary__ Fulton

and that he resides in this County.

day of warch

For Applicants Heretofore Allowed Pensions.

STATE OF	GEORGIA,	
Fulton	County.	

personally appears albert ". Lat.	of	7 0 1 0 0 1	
County, State of Georgia, who being duly swor	n, says on oath that l	ne is a bona fide ci	tizen
and resident of said State, and has resided then			7th
day of April 18 30; that he	enlisted in the milita	ry service of the	Con-
federate States (or of the State of		ing the war betwee	
States, and served as a private	in Company	, of 33rth Regi	ment
of Georgia Volunteers, Gents	_'s Brigado	e; that whilst eng	gaged
in such military service in the State of "1	rginia , o	on the ett	day
of vev 186, he was wounded	l, injured or diseased	as follows:	un shot
slocating the same, and permanently lisabl			
r 1984 in Worth Caroline a severe injury			
jury to the scine was received while sope	gent was still in	i the military	service
e Confederate States and while decoment w			
tv,to wit= decoment was returning to his		ing absent on	furlous
anted because of the wrist mound aforess	11.		
Deponent desires to participate in the bene			
and the acts amendatory thereof, and makes a			
entitled for the year ending October 26th, Fulton eounty been allowed a p		ofore as a reside	ent of
dollars, for the year 189 5 .		131	
Sworn to and subscribed before me, this, the	10 \ R. 110	Leise	
26 day of Paby 1899	B. \	7.0.0	
M. L. Calhan, Cod			
NOTE State fully the nature of wound or character of disease.		explain pa Rentarly the	extent
of the distantly, resulting from the would or disease.			
STATE OF GEORGIA,	120		
Pulton County.			
I,_ #.ICalhoun	Or	dinary of said Co	ounty,
do certify that I am well acquainted with_	Richard M.Lai	ird	the
applicant in the foregoing affidavit, and am wel	l satisfied that the st	atements made by	y him
in his said affidavit are true, and I know he is	the individual he re	presents himself	to be

and that he resides in this County.

day of_.

mx back

Given under my official signature and seal, this

Ordinary_

County.

	TOWER OF ALTORINE	1.	
STATE OF GEO	RGIA,		
ia.	County.		
I,	hereby author	ize	
	of		
to receive and receip	t for the pension paid hereon and reques	t 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	n presence of		
	/		
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<i>M</i> .	S ~ S	t t	100
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For Applicants Heretofore Allowed Pensions.

Lot uhhugung tigracolota unoated rangions.
STATE OF GEORGIA,
Naiton County.
personally appears techardth xuit of Sultan
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 'Angle 18.30; that he enlisted in the military service of the Con-
federate States for of the State of) during the war between the
States, and served as a free of in Company , of 33 Att Regiment
of Volunteers, School 's Brigade; that whilst engaged
in such military service in the State of Personer, on the 6 cm day
of 11/22 1864, he was wounded, injured or diseased as follows:
Sun shot wound on icht
Dan Orak Sitement Sign after
hand, alle manden Spine Spine
I rail rond much while in sivier,
* *
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 Accident county been allowed an invalid pension of
\(\frac{1}{1}\)
Sworn to and subscribed before me, this, the
2 3 day of 1897. POST OFFICE
200 Treeting
Norg-State fully the nature of wound or character of distance which causes the disability, and explain particularly the extent
of the disability, resulting from the wound or disease.
STATE OF GEORGIA,
Quettous County.
ISIA Gueldey Ordinary of said County
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County. Given under my official signature and seel this
order and signature and sear, this
day of
Alls Millians Millians
here.

For Applicants Heretofore Allowed Pensions.

STATE OF GI	
	Long County. I openishicker IV. Lair Jos Fulkon
	orgia, who being duly sworn, says on oath that he is a bona fide citizen
	State, and has resided therein continuously ever since the
federate States (or o	
States, and served	as a create in Company , of the Regiment
of Sa.	vice in the State of Wrginia, on the 67t day
of may	1864, he was wounded, injured or diseased as follows:
4	of a monton life hand
1	Diversión Carional
must in	face course of receptor
while	while in Revoca.
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Sworn to and s	country been allowed an invalid pension of Dollars, for the year 1897. Dollars, for the year 1897. R M Living Lines 1898. 1898. FOST-OFFICE Auture of wound or character of these which causes the disability, and explain particularly the extent on the wound or disease.
STATE OF GE	EORGIA,
tulk	County,
I. 37	Ordinary of said County
-	well acquainted with Richard M. Kaird, the
	going affidavit, and am well satisfied that the statements made by him
	are true, and I know he is the individual he represents himself to be
and that he resides	
	Given under my official signature and seal, this
da	y of
Affix Your	morones
here.	1 1 1
~~	Ordinary of celetz County.
	Craime,

to receive and to receive and the state of t	Countreceipt for the	he slade of pension paid he by- a avenu 1899.	hans alla	st that he	remit sam	e to	
(For Those Aiready Enrolled.) No. / 206. 3	INVALID SOLDIER'S PENSION.	1899. Ame 27 Sand Source State Level.	Disability and with the second	RICHARD JOHNSON, Communications of Practices	WARRANT HANDED TO	GEO, W HARMSON, STATE PRINTER, ATLANTA	16 15 cin

Jaind, S.C. Mrs. 1900 FultonG.

APPLICATION FOR PENSION DUE DECEASED SOLDIER

UNDER ACT 1891.

Mrs In C. Laird
Widow of R W Eated
Country Fulton
Station Ga
Approved and Paid

May 190 180

See Executive Depart

Geo. W. Harrison, State Printer, Atlanta,

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

- CCK M

personally appears 12. 11. Lacre of the Korn
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 IR 17 [18 30; that he enlisted in the military service of the Con.
federate States (or of the State of) during the war between the
States, and served as a Received in Company of 33th Regiment
of Volunteers, Security's Brigade; that whilst engaged
in such military service in the State of , on the 6 day
of That 186 &, he was wounded, injured or diseased as follows:
of Bay 1864, he was wounded, injured or diseased as follows:
theine hast in R.1? - wrech while in
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dirrel.
Deponent makes application for the pension to which he is entitled for the year end-
ing October 20th, 1899. I have heretofore under said law as a resident of
- County been allowed an invalid pension of
Dollars, for the year 189 8.
Swern to and subscribed before me, this, the
14th day of February 1889. Prost OFFICE allauta Mu
M. Meddle bown not Pul Fulling & Ger. Note State tally the nature of wound or difficult of disease which causes the disability, and explain particularly the extent of the clouding resulting from the wound or disease.
Note: State fully the nature of wound or character of disease which causes the disability, and evaluin norticularly the
extent of the abability resulting from the wound or disease.
STATE OF GEORGIA.
Tickon County.
9-11-11-0
1. V. V. Valley Ordinary of said County,
do certify that I am well acquainted with 1. If Rain the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 2-45 1899.
with a source of the source of
Ordinary County.
Ordinary County.

APPLICATIONS FOR PENSIONS DUE DECEASED SOLDIERS.

Under Act Approved October 9, 1891.

STATE OF GEORGIA, COUNTY OF Fultar Personally appears before me Mrs. of said County of Fullow R. M. Lainel sworn, says on oath that she is the widow of who was a disabled Confederate soldier, and whose name had been duly enrolled as entitled to a pension Fifty of Sound the State of Georgia. That said died on the Teneral senith day of Sceenher County and that at his death, his right to said pension for the year ending October 26, had accrued, but had not been paid to him for the said pension year. Applicant, as his widow, applies for the amount which would have been paid him had he lived to this time. Sworn to and subscribed before me, this day of many for

If allowed, I authorize to receive and receipt for the amount.

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

STATE OF GEORGIA,	
Fulton - County.	
1. M. H. Mulsey 30 hat I am personally acquainted with Mrs. Lot La	rdinary of said County, do certify
hat I know personally, or from sworn testimony of witnesses before R 2 Luird , a decensed Confede	
a pension under the law on account of disability proven, and that at the	e date of his death his right to a
pension had accrued but had not been paid for the current pension year	<u>-</u>
Given under my official signature and seal, this	day of
- Man	4
{SEAL.}	Ordinary.

Given under my official signature and seal, this 14 much Williamy. mitthe enga Ordinary Z County. Leongia (Personally appeared before the undersigned Ordinary of the two Co. Ga, L.P. Saphered who are out pays has he is a regular fracticing physician in said county and has he has examined it applicant, Richard Whaird, and finds That he has a deforming of the left hand and wrish joint apparently Said injury randors the arm practicalez modes & Stephens m. J. Sumilo and mt. Screbed before me March 26, 1894. W.L. Calhom

NAME, Laird, Richard W

WHEN AND WHERE BORN? Resident Ga. since April 7, 1830

ENLISTED .. HEN AND .. THERE?

COMPANY AND REGIMENT? Private, Go B 55rd Regt. Ga. Vols Semms' Brigade

NAME OF CAPTAIN AND COLOURL?

MOUNDED? silderness, Va. - May 6th, 1864 - shot in back of left hand, penetrating into left wrist joint dislocating it and permanently disabling applicant. Also in train wreck in N C and received a severe spinal injury - was returning to his command CAPTURED, MEN AND SHERES?

WHEN AND WHERE CURRENDERED?

IF NOT PRESENT AT SUMMENDER, JULIE LERE YOUT

DIED, WHEN AND WHERE?

BURIED.

RELEASED.

WITNESSES. none

1895 COUNTY. Fulton P.O.

1895 COUNTY. Fulton P.O. mh

STATE OF GEORGIA,

- COUNTY.

Laine Winfield D.				1.	C. State of the St	og-strone :-	in an an admitted
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INDIGENT PENSION					scuted in the pr	ess my hand and	nd receipt for the
1903.		4.	*		esence of	at and seal, this	pension
Name W D Laised County Festion	T						allowed and request
Co. B 35th Gu Rogs. Approved 1908.						day of_	est that he rem
JOHN W. LINDSEY, Commissioner of Panelons.						by	it same to-
WARRANT HANDED TO					,		W. P
Ordinary will write Name of Applicant, Company, and Regiment on back as indicated above.					TF. 8	1908.	
9/3/03	T		× 13		<u>.</u>		1 1

					OF A	TTORI	NEY.			
	STATE	OF GE	CORGIA		NTY.					
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	26	No.			Rogit.	1905.	á		Oompany	
#	arg.	NOISN.	•		C. Rogi.	1	á	or of	ileast, Company bove: Afterin.	
enter	No.	PENSION.	Ö	Pairel	J. 2008.	1	á	OT GROWING	of Appleant, Oempary tasked aboves.	
County	33	T PENSION.	03.	3 Lailel	don	1	á	L HANDKD TO	Name of Appleant, Oumpary as indipated above.	
m county	No	ENT PENSION.	.808.	1 Staile	Tellore 35th Gal 2001.	1	á	RANT HANDED TO	Marie Stans of Appleant Company in back in Missens above. Bayloo, stan Prises, Alberts A.	
tion county	No.	HGENT PENSION.	1903.	W. D. Lailel	3 35th gad Ross.	JOHN W. LINDSEY,	á	WARRANT HANDED TO	and will write State of Applicant, Company and the State of Applicant above.	

QUESTIONS FOR APPLICANT.	
STATE OF GEORGIA,	
Fullar COUNTY.	
Mintfield & Law 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)	
Musteld D. Lair, allaule, Fellow Jonuty, Georgia.	
2. How long and since when have you been a resident of this State? May 31211839 to 1903	
3. When and where were you born ? In Newton now North dale west, Tresso, May 31 183	9.
When and where and in what company and regiment did you entiat or serve? Le Angust 1861 in	•
5. How long did you remain in such company and regiment? Muthle Jeneral Sees Surva	w
The state of the s	
6. When and where was your company and regiment surrendered and discharged? April ; 16. 5 M. April ; 16. 5 7. Were you present with your company and regiment when it was surrendered?	
7. Were you present with your company and regiment when it was surrendered? 8. If not present, state specifically and clearly where you were, when you left your command, for what cause	
and by whose authority?	
9. How much can you earn (gross) per annum by your own exertions or labor? Not more Those after Will	4
	-
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, 12. If upon the first, and the second, give a full and complete history of the infirmity and its extent? If upon the third, 13. It is not the second of the sec	ie.
D state whether you are totally blind and when and where you lost your signt?	
Ä	3
13. What property, real and personal, or income, do you possess, and its gross value? To purpose y	*
4	M
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1898, 1899, 1899, 1900, 1901 and 1902, and what disposition, if any, by sale or gift, have you made of same?	1
I de 1646 bright a little farm in Sockath lively for fore hundred tollar. In 19.1. 41	1
a to well it topay debt a weamst for brokered & Orath of menthe of iny farmer	0
15. In what County did you reside during those years, and what property did you then return for taxation?	N.
of 18 g in friend 18 the state of the state	1
10. How were you supported during the years 1800, 1900, 1800 and 1802? The land 1802? The land they desired hery desired and	C
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? + tout me hours and dollars a gran and reaches about about the support of the suppo	_
your own labor or income? About our traces and dollars a grant said said said said said said said said	A
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? No garrily Non two brights	,
Mr. Mune of having a produce got 3 children 14 years any mugar. As hasped with about from Mes Many J. Just mar not har no see 1 1/1 1/14. Have no see	1
20. Are you receiving any pension? If so, what amount and for what disability?	
21. Have you ever made an application for pension before?	
22. How many applications have you ever made and under what class? Moral.	
Singer to and subscribed before me this the	
Applicant.	
or Textoric County	

QUESTIONS FOR WITNESS.

the state of the s
STATE OF GEORGIA,
Fullow County
0 0 0 1 1/20
Tharles / Mi Calla of said State and County, having been presented
as a witness in support of the application of Willfuld Daniel for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and
auswers as follows:
. * 00' / 177 7
2. Are you acquainted with The Affect a Down the applicant; if so, how to long have you known him? US nave Known line all say life of
3. Where does he reside, and how long and since when has he been a resident of this State?
1 320 Luckey Stiwas born in Sa and lived all his
When, where and in wast company and regiment did he enlist, and how do you know?
Aug 1861, in Newton, bo, Sa. Enlisted in Co, B. 35 Sa Regt. Explished
5. Were you a member of the same company and regiment?
6 How long did he perform regular military duty from the 1865. 7. When and where was his command surrenglered from the 195 965.
Approvation Cuti, Vas muchillow
8. Were you present when it surrendered dwas not was wounded April 50 (8)
10. If he was not present, where was be? Wos present
When did he leave his command? April 965 For what cause & surrendered
By what authority he left 2 / aroled How do you know all of this?
by seeing him soon after surrenden and du-
my his porole I did not us his puroly)
The property, effects or locome has the applicant? (Give your means of knowledge.)
12. What property, effects or income did the applicant possess in 1806, 1897, 1898, 1899, 1900, 1901 and 1902,
and what disposition, if any, did he make of same? 1896 to 1901 owned a small form m
ehalb 60/90/ sold it to pay his deble from 190/ to 19021 Nothing
13. Has be conveyed away any of his property in the last four years, if so, what was it, and to whom? Sold his form /901 sold to Dawson Forded to hay dub
14. What is the applicant's occupation and physical gondition? Carfeeller,
Survay disability he is not able to do
manuel Labon
15. Is the applicant unable to support himself by labor of any sort of so, why? he is not able
to support himself by labor on account
of his Physical Condition
16. How was he supported during the years 1899, 1899, 1900, 1901 and 1902?
1898/0/807 lived on form 1901 and 1902 find with Daught
17. What portion of his support for these four years was derived from his own labor or income? About one half
18. Gige a fall and complete statement of the applicant's physical condition that entitles him to a pension under
Section 1254, Code? Age and bad health
19. Who composes family? What property have they? Children's age and their earning capacity?
He has no family, lives with widdowed
Doughten, Who has B that Children
20. What interest have you in the recovery of a pension by this applicant?
Sworn to and subscribed before me, this the Charles Restriction
(3 the day of July 1903.) A Melohnson Witness.
John William Ordinary. To
(answere extru by Johnson in red ink)

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA, Sullow County
and my
Personally came before me and A Comment Man both known to me as reputable physicians
of said County, who, being severally sworn, say on oath that they have examined carefully
Thurseld D. Faird, applicant for pension under Section 1254, Code, and after
such personal examination say that his precise physical condition is as follows:
His and Tring 64 years lue ful
michitability to that a gent of forallues of
whose Lystein tracking down no shring the bus
Laffering to our Mountalister
and that we have no interest in said pension being allowed.
Sworn to and subscribed before me, this the
27th day of July 1903.
John Wilkinson Ordinary.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA.
STATE OF GLORIOUS
- Futton County.
I II
Fulfor COUNTY.
Tourism County. I. John William Ordinary, in and for said County, hereby certify that the applicant Winfield & Laind resides in said County, and has been a bona fide resident of this State sipec the Hard 1839
Thutton, COUNTY. I. Johns William Ordinary, in and for said County, hereby certify that the applicant Winfield & Laind resides in said County, and has been a bona fide resident of this State sipce the 3/ day of May and that the witnessee, xis.: Johnshully McGalla
Town COUNTY. I. John William Ordinary, in and for said County, hereby certify that the applicant Winfield & Laind resides in said County, and has been a bona fide resident of this State sipece the Hard May 1839
Tentform COUNTY. 1. Johns William Ordinary, in and for said County, hereby certify that the applicant Winfield & Lained resides in said County, and has been a bona fide resident of this state since the day of May 1889 and that the witnessee, vis.: Johnshull McGalla
Touton County. 1. John William Ordinary, in and for said County, hereby certify that the applicant Winfield & Lained resides in said County, and has been a bona fide resident of this state since the day of many 1839 and that the witnesses, viz.: Charles McGallar 1839 and that the witnesses, viz.: Charles McGallar are of trustworthy character, and that their statements are entitled to full faith and credit.
Toutfor COUNTY. I. John William Ordinary, in and for said County, hereby certify that the applicant wind Advisor resides in said County, and has been a bone fide resident of this state since the day of the statements are entitled to full faith and credit. If further certify that before answering the foregoing questions the applicant and each witness took the oath
Tourism County. I. Jahren Wilson or Ordinary, in and for said County, hereby certify that the applicant with this Bigste sipes the day of the said County, and has been a bons fide resident of this Bigste sipes the day of the said County, and has been a bons fide resident of this Bigste sipes the day of the said County, and has been a bons fide resident of this Bigste sipes the day of the said County, and has been a bons fide resident of this Bigste of the said County, and has been a bons fide resident of the said County, and has are of trustworthy character, and that their statements are entitled to full faith and credit. If further certify that the full text of the affidavita was read to the applicant and witness before same was signed. If further certify that the tax digest of the affidavita was read to the applicant and witness before same was signed. County show that applicant certurned for taxation in his name in 1899.
Tourism County. I. Jahren Wilson Ordinary, in and for said County, hereby certify that the applicant Wilson Advisor Tresides in said County, and has been a bons fide resident of this styte since the Advisor Tresides in said County, and has been a bons fide resident of this styte since the Advisor Tresides in said County, and has been a bons fide resident of this styte since the Advisor Tresides in said County, and has been a bons fide resident of this styte of the Advisor Tresides in said County, and has been a bons fide resident of the said County, and has been a bons fide reside
Tourism County. I. Jahren Wilson Ordinary, in and for said County, hereby certify that the applicant Wilson Advisor Tresides in said County, and has been a bone fide resident of this styte since the Advisor Thought Though
That the applicant County, hereby certify that the applicant of this Bigste sipes the day of the witnesses, viz.: A Children's Market of the Miles of the affidavite was read to the applicant and each witness took the oath hereon prescribed, and that the full text of the affidavite was read to the applicant and witness before same was signed. If further certify that the tax digest of That the applicant and witness before same was signed. If urther certify that the tax digest of That the applicant and witness before same was signed. County show that applicant returned for taxation in his name in 1899 Dollars of property, in 1901 Dollars of property, in 1902 Dollars of property.
Tourism County. I. Jahren Wilson Ordinary, in and for said County, hereby certify that the applicant Wilson Advisor Tresides in said County, and has been a bone fide resident of this styte since the Advisor Thought Though
That the applicant County, hereby certify that the applicant County, hereby certify that the applicant County, and has been a bona fide resident of this state since the County and that the witnesses, viz.: A Charles M County and has are of trustworthy character, and that their statements are entitled to full faith and credit. If further certify that before answering the foregoing questions the applicant and each witness before same was signed. If further certify that the tax digest of County show that applicant certurated for taxation in his name in 1899 Dollars of property, in 1901 Dollars of property, in 1902 Dollars of property. In my opinion the foregoing claim is made in good faith.
Tourist County. 1. John William Ordinary, in and for said County, hereby certify that the applicant Wings since the John Mary 1889 and that the witnesses, vis.: 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 affidavite was read to the applicant and witness before same was signed. I further certify that the tax digest of County show that applicant certured for taxation in his name in 1889 County show that applicant of property, and in 1900 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 Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, this Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office, the Witness my hand and seal of office witness hand witness hand witness hand witness ha
Tuther certify that the tard digest of trutter certify that the tard is and 1 to 1899 I further certify that the tard digest of the fill text of the affidavits was read to the applicant and witness before same was signed. I further certify that the tard digest of the affidavits was read to the applicant and witness before same was signed. I further certify that the tard digest of the affidavits was read to the applicant and witness before same was signed. County show that applicant returned for taxation in his name in 1899 Dollars of property, in 1901 Dollars of property, in 1902 Dollars of property. In my opinion the foregoing claim is made in pood faith. Witness my hand and seal of office, then the fill day of the faith ordinary, of fauthory. Ordinary, of fauthory.
Tourist County. 1. John William Ordinary, in and for said County, hereby certify that the applicant William Ordinary, in and for said County, hereby certify that the applicant of this 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, in 1901 Dollars of property, in 1902 Dollars of property, in 1902 Dollars of property. In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this day of Egyt County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,	. County.	}		
I ,				hereby authorize
		of		
to receive and receipt for the	pension	allowed, and	request that	he remit same to
by			2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	
WITNESS my hand and seal,			of	1904,
	•			[L. S.]
Executed in the presence of				

Woodand

FULL C. SOLDIER'S PENSION

1BOA.

CO. 19 3 S Regiment A.C.

WARRANT ISSUED

| 2 | 180

JOHN W. LINDSEY,

Commissioner of Pensions,

WARRANT HANDED TO

nodata

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
Fulton, County.	
111-10-0	
01_	
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide of	itizen
and resident of said County and State, and has resided in said State continuously ince the 31 day of May 1839; that he is 14 years o	y ever ld and
by occupation a That he enlisted in the military service of the	Con-
ederate States (or of the State of) during the war between	en the
States, and served for the term of in Company 1, of 35 th Reg	iment
of Ifa, Negt, ; that his physical condition	
ollows:	
Frence	
hat his property consists of the following items:	
70	
	-
f the value of Dollars that human (1)	-
Donars, that by reason of his ph	ysical
endition and poverty he is unable to support himself by his own exertion or labor	, and
endition and poverty he is unable to support himself by his own exertion or labor that he receives no pension but the one herein applied for.	, and
endition and poverty he is unable to support himself by his own exertion or labor hat he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December	and
endition and poverty he is unable to support himself by his own exertion or labor hat he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 884, and the Acts amendatory thereof, and makes application for the pension to whi	t, and 15th,
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endition and poverty he is unable to support himself by his own exertion or labor that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 864, and the Acts amendatory thereof, and makes application for the pension to whi entitled for the year 1904. I have heretofore as a resident of full to the county been allowed a pension for the year 1. Sworn to and subscribed before me, this the day of 1904. Ordinary. Ordinary. Ordinary. Ordinary of said County. I, John R. Williamsen. Ordinary of said County. County that I am well acquainted with the day of the certify that I am well acquainted with the statements of the pension of the pension to a pension to who will be application to the pension to a pension to who will be a pension to who will be a pension to who will be a pension to who will be a pension to the pension to who will be a pension to who will be a pension to the pension to who will be a pension to whom the pension	15th, ch he
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					***			. 0				
	STA	FE OF	GEO	RGIA,		COUNT	Y. }					
				Ι							hereby at	thoriz e
							of					
	to rec	eive au	id rece	eipt for	the	pension	allowed	, and re	equest	that he	remit s	ame to
•							at					
	by:	WITNE	ss my	hand ar	id seal	, this		day of.			19	od.
												[L. S.]
		Execut	ed in t	he pre	sence	of						
	(FOR THOSE ALREADY EMBOLLED.)	No. Jes	INDIGENT	SOLDIER'S PENSION	1905.	Name H. D. Lind	Co. Regiments In Mr.	WARRANT ISSUED	146. Ens.	10HN W. LINDSEY, Commissioner of Process	WARRANT HANDED TO	M YOUR TOO BANKS DIE DIE BELLEN ATBORRE IN.

no data

POWER OF ALTORNE	1 Y.
STATE OF GEORGIA,	
L-was as a second	hereby authorize
to receive and receipt for the pension allowed, and request	t that he remit same to
by	
WITNESS my hand and seal, this day of	.1906,
	[L. S.
Executed in the presence of	
,	
	1
1 DIER'S PENSI 1 DOG. 1 DOG. 1 SOG. 1 SOG.	F2 5 6
Oct. Series in the Cost Series in the Cost Alfabor England in the Cost Series in the Cost	JOHN W. LINDSEN. Commissioner of J. WARRANT HANDED TO WARRANT HANDE
PETERNY ENTREMY ENTREMY ENTREMY ENTREMY ENTREMY ENTREMY ENTREMY ISSUE	T H Z
N N N N N N N N N N N N N N N N N N N	IRRAY
	W.A
Name County	1 1

m dute

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

County.

STATE OF GEORGIA,

Pearsonally appears 4.	. Laird of Cor
County. State of Georgia, who, being	duly sworn, says on oath that he is a bona fide citizen
	ite, and has resided in said State continuously ever
since the day of	18 ; that he is years old and
by occupation a	, that he collisted in the military service of the Con-
federate States or of the State of	Classes during the war between the
States, and served for the term of 4	the in Company B, of 35 th Regiment
or Ex. Begt.	The in Company of North Regiment ; that his physical condition is as
tellous: Wife with	povery
	,
that he property consists or the follo	owing items
of the value or	Dollars. I am now earning,
by my labor,	Dollars per month. That by reason of his
	unable to support himself by his own exertion or
labor, and that he receives no pension	
	e in the benefits of the Act approved December 15th,
	of, and makes application for the pension to which he
The second secon	heretofore as a resident of PULL
County been allowed a pension for th	
Sworn to and subscribed befor	
day of UNN	1905.
	Ordinary.
animo on anonai	
STATE OF GEORGIA	A. () Ordinary of said County, with T. S. Caca
Cour	ity.)
I	Ordinary of said County
	vit and am well satisfied that the statements made
	and I know he is the individual he represents himself
to be, and that he resides in this Cou	IAN 2 1900
	ial signature and seal, this
day of	2+1000.
Am.	Ordinary Fulton. County.
your year hear	Ordinary F UILOII. County.
	spaces must be filled.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Fullon, County.
Personally appears J. J. Lett 2d 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 1829; that he is 66 years old and
by occupation a, that he enlisted in the military service of the Con-
federate States (or of the State of Sta
States, and served for the term of 4 424 in Company of, of 36 th Regiment
of that his physical condition is as
follows: Le ge wild porcetty
follows:
· · · · · · · · · · · · · · · · · · ·
that his property consists of the following items:
,
of the value ofDollars, 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 Fillion
County, been allowed a pension for the year 1905.
Sworn to and subscribed before me, this the
day of 1906.
Ordinary.
State of Georgia,
Fulton County.
Old Edition of
do certify that am well arguainted with 1. Activ
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this 10N 1 1900
day of
Charles Comment
Afts your County.
Nors.—The blank spaces must be filled. Nors.—Affidavit should not be attested before January 1st. 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,	1		
	COUNTY.		
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to receive and receipt for the			emit same to
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WITNESS my hand and see	al, this	day of	1907.
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Executed in presence	of		
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9	Name County		1
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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS State of Georgia.

County.
Personally appears It. D. Sales 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 1839; that he is 8 years old
and by occupation a hat he enlisted in the military service of the Con-
federate States (or of the State of Rangla) during the war between the
States, and served for the term of 3 1 110 in Company 1, of 35 th Regiment
of that his physical condition is as
follows: (of of poricr 4)
4
20 of the Soft and desired at
that his property consists of the following items;
The second secon
of the value of Dollars I am now earning
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by my labor, Dollars per month. That by reason of his
physical condition and poverty he is unable to support himself by his own exertion or
labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1907. I have heretofore, as a resident of
County, been allowed a pension for the year 1906. Sworn to and subscribed before me, this the
day of 1907.
C. C. C.
John Sk. WillOrdinary.
State of Georgia,
}
County.)
1, John Sh Warner Ordinary of said County,
do certify that I am well acquainted with H. L. 2002
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal this
day of1907.
John Ch. Warne
Adia
ordinaryCounty.
Norz.—The blank spaces must be filled. Norz.—Affidavit should not be attested before January 1st, 1907.

Given under my official signature and seal this_____ day of______1907. John Dr. Wann Affix your real hrre Ordinary____County. Note.—The blank spaces must be filled.

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

by him in his said affidavit are true, and I know he is the individual he represents himself

to be, and that he resides in this County.

Confederate Soldier's Application. UNDER ACT 1910. ounty Liellan Nama abner M. Lamar Low Sinder J. W. LINDSEY.

25 4 50 2 4 50	
9 7 6 K S. C. S. S. S. S. S. S. S. S. S. S. S. S. S.	APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Questions for Applicants to Answer.
1262 - 232 1	STATE OF GEORGIA,
	Gounty. Gounty. Gounty. Of said State and County, hereby applies for the pension provided by Agf 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 are follows, to wit: 1. What is your name and where do you reside? (Give County and Post-office). Absura Maally Laman Waleswark a Julian Co
11/15 2 8 2 1/1 2	2. How long and since when have you been a continuous resident citizen of this State?
	3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State
Confederate Confederate Soldier's Application. UNDER ACT 1910. COMPANY THE COMPANY COMP	4. When and where, and in what Company and Regiment did you enhist? (Give the arm and class of Service) S. D. S. ale Catally County and 1864. Constraint Season of Service of Se
	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 eash value on the 4 Nov. 1908? (Make list by items and value, and where situated.) Annua except thousand goods the core of the co
	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).
	12. What annual or monthly income or earnings of yourself and the source derived have you? 13. Are you drawing a pension of any amount from this State or the United States? As a large of the Georgia Pension and had it refused? and for what cause it was not allowed?

Honer M. Lamar

.....County.

Julian Ordinary

Sworn to and substituted before me, this the

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA, Fullon County.
G. W. Howard
as a witness in support of the application of Africa Whatter Laman 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? See W. Howard
2. How long and since when have you known About Mostley Lamon the applicant?
Calligs & G. 2. How long and since when have you known that the supplicant the applicant that the supplicant that the supplic
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? Collegepark In Sure 1910
Mr are Members of same Church
4. When, where and in what Company and Regiment didenlist during
war from 1861 to 1865? (Give date and place) S.C. State Castet Corks 1864 July
5. How did you obtain your information of this Service? Personal Knowledge
6. How long within your own personal knowledge did he perform actual military service with
this Company and Regiment? (give date) Tuly 1864 Surrender 1865
7. When and where was his Command surrendered or discharged (give date and place)
Let Rurendued & Sixbanded by Foresan Bonhan of S. C
8. Were you personally present at the Surrenden
9. If not, where were you and how came you there?
10. Was the applicant personally present with his Command at surrender?
11. If not where was he and how came him there? On Junlangh.
When Summede Come
12. When did he leave his Command? Lasawarth SC Where was his Command
when he left is? East of Mench For for what cause did he leave? Tund not
By whose authority did he leave Communating of in and how
long was he granted leave? 3d dryn How do you know
all that you have stated to be true? If of your own knowledge (Tell clearly and specifically)
Near neighbor to thing all tell years after hear
13. In what way was he prevented from returning to his Command? as stated
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
In what prison was he held?and when released
Sworn to and subsoftled before me, this the grow Handles of the gr

AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA. County.
Personally before me comeswho on o
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 him
and of its cash value to wit: (Make List by items and value.)
What property, if any, has been sold or given away by the applicant since Nov. 4, 16 (State it fully by items)
(State it fully by items.).
2. When and to whom as it sold or given to?
3. What was appropriate or stated to be paid?
4. What relation is the party to applicant?
5. What disposition was made of the proceeds of the saie?
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 theday of
Ordinary,
ofCounty.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA.
Fultan County.
The state of the country.
I, That H. Suffices Ordinary of said County, certify that I kn
the applicant M. Jaman for Pension is the person he represents himself to be and resider
said County. That I also know I Haward the witness swearing to
service and who are freeholders, t
they are all residents of said County and were duly sworn by me before signing the foregoing affidavit
they are all truthful and trustworthy and their statements are entitled to full faith and credit. That
Tax Returns of Fultan Be shows that Q. W. Lanar
value for tax is in 1908 8 Mull for 1909 8 Mune for 1910 8 Mune
for 1911 \$ NMAL for 1912 \$ MANL for 1913 \$ NMML for 1914 \$ MML for 1915 \$ MML
Sworn under my hand and official seal of office this. 25th day of Oct 1916
The Approx Ordinary,
H. Ot.
of Litton Cour

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words
"You do sclemnly swear that you will true sanerer make to each question asked you and the evidence you
Additional sificative may be attached if blank spaces are insufficient.

All affidavits must be made before the Ordinary and certified by him.
If a poplicant has no property at all in his possession, use or control of self affidavits of freshelders unnecessary.

..County.

14. What effort did he make to return to his Command and how do you know?..... NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words
"You do sciently swear that you will true answers make to each question asked you and the evidence you
2. Additional affidavite may be attached if baths space are immificient.
3. All affidavite 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 freehelders unnecessary. None . War was over In what prison was he held?and when released Sworn to and subscribed before me, this the grow Amaul

Soldier's Application.
UNDER ACT 1950.

AFFIDAVIT OF TWO FREEHOLDERS.
STATE OF GEORGIA.
Google County
1 . C. A. A. P. M. Migres
Personally before me comes Attacks Company 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 usah value to wit: (Make_let by items and value)
And the state of t
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.)
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?
8. Was the disposition of this property made in good faith and full values? or was it made to obtain a pendont
Julia Cilla ham ardinary miled Amyles.
of County.
O
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,
Fulton County.
1. John A. WilliamsonOrdinary of said County, certify that I know
the applicant to the and resides in
said County. That I also know to the witness swearing to the
service and amald Samples & H. Meyess 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 Turban Con shows that 40 M. Sameto and wife
value for tax is in 1908 \$
Sweet under my hand and official seal of office this day of the day of the
thur Cells mean Ordinary;
of tricker County!
NOTES 1. Before my question are nearested the Ordinary shall awar applicant and all witnesses in the following words "One de celembry when then you will transaction to shall quintion asked you and the widesant you shall give shall be the whole truth; so help you God," Additional sidiaryte may be stacked if blink spease are significantly and All allidarits must be made before the Ordinary and certified by him. And it applicant has no property at all this passession, also we control of self- and wife, sidiarytic will resemble:
shall give shall be the whole truth; so belp you God." 2. Additional affidavits may be attached if blank spaces are insufficient.
4. All amounts must be made outer-the Ordinary and certifies by him. 4. All applicant has no property at all in his possession, the or control of self and wife, affidavits of fresholders unbecomery.
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APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.
STATE OF GEORGIA.
Cultural Country
for the pension provided by Act of 1910, to Confede ate 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: What is your name and where do you resides (Give County and Post-office).
The stay of mane and where no you make a Color County and Post-office.
2. Boy long and those when have you been a continuous resident citizen of this State?
My high grant a short games about a months in 1811
d. Did you ealer in the Army of the Confederate States or of the Francisco Militia of spins State
from 1861 to 1865 the court of the of Col line Sinter Columbus
4. When and where and in what Company and Regiment did you exast? (Give the arm and class
of Service)
5. How long did you remain in the actual Military Service with said Company and Regiment?
(Give date of discharge) (Grand School of the Company and Regiment currendered or discharged from the Service?
when and whate was your company and Regiment surremared or disenarged from the Service?
7. Were you actually present with your Command when it was surrendered or discharged?
8. If you were not actually present, state specifically and clearly where you were
Where was your Command when you left it?
the the sure decreadered
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?
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.)
January Albert Hon
Elsex
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? They existe died Jeby 1907 x Se
function de abour was sold in 1809
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).
12. What annual or monthly income or earnings of yourself and wife and the source derived have
your et hair to income how My ages prevent in for for King
13. Are you drawing a pension of any amount from this State or the United States?
14. Have you er applied for the Georgia Pension and had it refused? and for what cause it was
not allowed?
Sworn to and subscribed before me, this the
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QUESTIONS FOR WITNESS AS TO SERVICE. STATE OF GEORGIA. ames & Cartillo of said State and County is hereby presented as a witness in support of the application of Charlie of Canada 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 pame and where do, you reside? Land Obailes
247 Cast Cine Ally Stranges 2. How long and since when have you known Char Thanks the antique all the site 3. Where does he now reside, and since when has he begin a bona fide, continuing resident in this State and how do you know? HI A Millian in Should 4. When, where and in what Company and Regiment did. At callist during war from 1861 to 1865? (Give date and place) (Charles of the Service) actual Contact as I now in Seal Staff 6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date). About 1 than Some I will, Ballle 7. When and where was big Command surrendered or discharged (give date and place)... (Valerandero 8. Were you personally present at the Surrender? 1744 in the first fight of the first firs Than There in Battle & went to macon fra 10. Was the applicant personally present with his Command at surregider? I fell with the last the surregider of the window it.

when he left it? Account of the for what cause did he leave? By whose authority did he leave. long was he granted leave? all that you have stated to be true? If of your own knowledge (Tell clearly and specifically).

13. In what way was he prevented from returning to his Command?

How do you know? Confiderate States

Runender)

14. What effort did he make to return to his Command and how do you know?......

18. Was applicant captured as a prisoner Coty Children on where? Of 16 1865

Sworn to and subscribed before me, this the

The TOWN Special Continues

14. What effort did he make to return to his Command and how do you know?..... 13. Was applicant captured as a prisoner Ct. St. 1865.

In what prison was he held? and when released Sworn to and subscribed before me, this the Byon to and subscripts pends 1900.

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POWER OF ATTORNEY.

STATE OF GEORGIA, County. 1. — of to receive and receipt for the pension allowed and request that he remit same to at Witness my hand and seal this Executed in presence of 1895.						
1. — 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		STATE OF GEO		}		
to receive and receipt for the pension allowed and request that he remit same to at hy Witness my hand and seal this day of 1895. Executed in presence of 1895.			Coun	ty.)		
Witness my hand and seal this day of 1895. Executed in presence of 1898.		1,		of	. he	ereby authorize
Witness my hand and seal this Executed in presence of One of the search Danker Management of		to receive and receipt for the	e pension allowed		it sama to	
Witness my hand and seal this Executed in presence of A Solution of the seal		The receive and receipt for the				
Executed in presence of State of the State o		Witness are band on			,	
ENSION PARTY - Sec.				day of		1895.
ENSION PARTY SECOND		Executed in presence	of	L.		V
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	- and	411	N	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	PA	8

QUESTIONS FOR APPLICANT. .

STATE	OF OFO	DOLA	Ň
SIAJE	OF GEO	ITYSIA,	U
OSA.	XXXX	Fullon County.	ſ
	21	1011	7'

account of such discharge or transfer?

of said State and County, desiring to avail himself of the Pension Act approved December 19th, 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)
- Econga A Laman Allande.

 Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Allanda all my life
- M. Dononoto Georgi 3. When and where were you born? 4. Did you volunteer in the Confederate Army or in the Georgia Militia?
- 5. When and where did you enlist?
- 6. In what company and regiment did you enlist? Com &
- 7. How long did you remain in that company and regiment? untill the Surveyeder: 8. If you were discharged from same and joined another, or if you were transferred to another, give an
- 9. For how long a period did you discharge regular military duty? From 1862 will the Chee
- 10. When, where and under what circumstances were you discharged from service? Al- Hillston after the Saucerder
- Non or compation. 11. What is your present occupation?....
- 12. How much can you earn per annum by your own exertions or labor? Mothers
- 13. What has been your occupation since 1865?

 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? Am able to Constribute nothing
- 15. What is your present physical condition and how long have you been in such condition?

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"? suffice to and 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?

toral Immbility

- 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? None
- 20. In what County did you reside during those years and what property did you then return for taxation? Aulton Co. none
- 21. How were you supported during the years 1893 and 1894?
- 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? lens dollars per mouth did continher note
- 23. What was your employment during 1893 and 1894? What pay did you receive in each year? Not comployed
- 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? Not anassied-

	The second secon
25. Are you receiving a pension under any law of this State, if so what amount and for what disability?	AFFIDAVIT OF PHYSICIANS. A
Sworn to and subscribed before me this the	
33 ord day of April 1895. Applicants	STATE OF GEORGIA,
My Callina Ordinary	Julion Theory County.
9	Personally came before me I m Gadden Faston and
of Machines County.	Personally came before me J. M. Fadden Faston and J. M. Gr. Gr. Stefan, Jr both known to me as reputable physicians
QUESTIONS FOR WITNESS.	of said county, who being severally sworn, say on oath that they have examined carefully
	George & Laurn applicant for pension under the Act of 1894, and after
STATE OF GEORGIA	such personal examination, say that his precise physical condition is as follows:
Speaking County.	Partial paralyses of the legs
as a witness in support of the application of Serge A Karrar for pension	With difficulty of bocomotion
under the Act approved December 15th, 1894, and after being duly sworn true answers to make to the	Their fulle is over muety-
following questions, deposes and answers as follows: 1. What is your name and where do you reside: IMSavi macon in	showing a decordered con-
	detern of the concelation.
2. Are you nequainted with I have you known him? 36 a bound 34 years	We further say on oath that the physical condition of applicant renders him unable to labor at
3. Where these he reside, and how long has he been a resident of this State ? Wellands 4-	any work or calling sufficient to earn a support for himself, and that we have no interest in said pension being allowed.
1. Do you know of his having served in the Confederate army or the Georgia militia? How do you	Sworn to and subscribed before me, this
know this! " to because he was a member !"	Sworn to and subscribed before me, this the 23 day of April 1895.)
114 60	W. L. bockmin,
5. When, where and in what company and regiment did he enlist? Co C. Phillip Cale who will 12 1862 I think macon be	(Godeway)
6. Were you a member of the same company and regiment? 325	,
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? From the service	ORDINARY'S CERTIFICATE.
enterted lines the Close of the want of it.	
with him several years Discharged when	STATE OF GEORGIA,
8. What property, effects or income has the applicant? (Give your means of knowledge.)	Fichlin County.
to not know	1, W.L. Cellims, Ordinary in and for said County, hereby certify that
9. What property, effects or income did the applicant possess in 1893 and 1894, and what disposition,	the applicant George De Laureau resides in said County, and was a bona
if any, did he make of same " Lo Host Know	fige resident of this State on the first day of January, 1894, and that the witnesses, viz: J. M. J.
10. What is the applicant's occupation and physical condition." Lo not Know	"asling of the Farling for,
	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
11. Is the applicant unable to support himself by labor of any sort, if so, why?	the oath hereon prescribed, and that the full text of the affidavits was read to the applicant and witnesses
to be applicant unable to support minself by moor of any sort, it so, way:	before same were signed.
	I further certify that the tax digests of Arella County show that applicant
42. How was he supported during the years 1893 and 1894?	of property, and in 1894, of property, and in 1894, of property.
13. What portion of his support for these two years was derived from his own labor or income?	of property, and in 1894, Army dollars of property.
14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension	Witness my hand and seal of office, this grand day of Mare 1895.
under the Act of December 15th, 1894#	Mr. L. Collinson Ordinary
	of tomien (county.
15. What interest have you in the recovery of a pension by this applicant?	. 1
Sworn to and subscribed before me, this	NOTE.
the 24 day of gamel 1895.) Applicant.	Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You shall true answers make to each of the questions taked of you, and the evidence you shall give will be the whole truth, so help you God."
Commily	
wanay	And the second s

POWER OF ATTORNEY.

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STATE OF GEORGIA, .	l
County.	ſ
I,	hereby authorize
	_of
to receive and receipt for the pension	on paid hereon and request that he remit same to
	.by.
at .	,
IN WITNESS WHEREOF, I h	nave hereunto set my hand and seal, this
day of	1897.
	[L. S.]
Executed in presence of	1
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y Enrolled.) INT Pension	Parameter 18
INDIGERY INDIGERY INDIGERY INDIGERY INDIGERY INDIGERY INDIGERY INDIGERY INDIGERY INDIGERY INDIGERY INDIGERY INDIGERY	Character of Penal Market To Penal Market To Penal Market To Penal Market To Penal Market To Penal Market Andrews
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	County
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POWER OF ATTORNEY.

State of	Georgia,	
	@ounty.	
I.	_hereby au	thorize
	of	
to receive an	nd receipt for the pension paid hereon	and request that he remit same to
Time.	by	No.
at		
IN W	ITNESS WHEREOF, I have hereunto	set my hand and seal, this
day of	1898.	,,
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Ex	ecuted in presence of	[L. S.]
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(For Those Aiready Enrolled		WARRANT ISSUED // C. RICHARD JOHNSON WARRANT HARDED TO WARRANT HARDED TO WARRANT HARDED TO ***********************************
		RIC RIC
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For Applicants Heretofore Allowed Pensions.

11
STATE OF GEORGIA,
Rulton County.
personally appears Good Kamad of Dulton
County, State of Georgia, who being duly sworn, says on oath that he is a bona fiele citizen
and resident of said County and State, and has resided in said State continously ever since
the day of 1830; that he is 6 / _years old and
by occupation a ; that he enlisted in the military service of the Confed-
States for of the State of Mot J. W.) during the war between the States,
erate States (or of the State of Horfice) during the war between the States, and served for the term of Truce Jeace in Company , of - th Regiment of
District A State of the term of the service of that his physical condition is as
Philip & Xogione ; that his physical condition is as follows:
follows:
Marking
that his property consists of the following items Marketing
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, 1801, 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
county been allowed a pension for the year 180
Sworn to and subscribed before me, this, the
1/1te 1 1/2 1807 1.0
11th day of farmer 1897. The A Lonica
1/11 locale of Ordinary.
STATE OF GEORGIA,
Hacken, County.
1 11 11 11 2
I, St. H. Heel xey Ordinary of said County,
do certify that I am well acquainted with Lev, A Xance the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Sivey under my omenic signature and sem, this
day of de occerce 1807.
ARE MILE THE THE THE THE THE THE THE THE THE TH
Ordinary Fellings County

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fullan County.
Personally appears Goa. Lamas of Fullow
County, State of Georgia, who being duly sworn, says on oath that he is a hona fide citizen
and resident of said County and State, and has resided in said State continuously ever
rives the day of 1830: that he is 68 years old and
by occupation a that he culisted in the military service of the Confed-
erate States (or of the State of Taring the war between the States,
and served for the term of 3 9 cals in Company & of _ th Regiment of
Phillip: Legion ; that his physical condition is as
follows: Paralysin- General debilite-
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,
1804, and the acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1808. I have heretofore as a resident of Gullon
county been allowed a pension for the year 180 7
Sworu to and subscribed before me, this, the
Sworn to and subscribed before me, this, the 12 thday of Jan 1898. See Adaring
The Ordinary.
State of Commission)
State of Georgia,
Fulton County.
I, HI Vaulacy Ordinary of said County,
do certify that I am well acquainted with Heolo aanial the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County. Given under my official signature and seal, this /241-
Given under my official signature and seal, this /2001
day of 1898.
Ans my morpeulsey
Ordinary Frella County.
North - The blank spaces must be filled.
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Note-The blanks spaces must be filled.

POWER OF ATTORNEY

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CODE SEC 1254 For These Aircade Fa	1	INDIGE	2	189	136	: 1	IN	5	JOH.	WARRANT BANDED	State P		1	CODE SEC. 12 For Those Already	1
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			S		Name	County					,		10		
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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, thisday of1900.
[L. S.]
Executed in presence of
**** 1 1 101 1 1 1 1 1 1 1 1 1 1 1 1 1 1

(For Those Already Endle)
No. 3/3
INDIGENT
SOLDIER'S PENSION,

WARRANT ISSUED

Name LLO. A. Lamar

County

1900.

JOHN. W. LINDSEY,

WARRANT BANDED TO

N

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	- 1
County.	
Personally appears 200 a. Lamaz of Lice on	
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 1830; that he is 69 years old and	
by occupation a ; that he enlisted in the military service of the Confed-	
erate States (or of the State of Ga) during the war between the States,	
and served for the term of 3 flavo in Company & of — th Regiment of	
thi clib Legian ; that his physical condition is as	
full-mass	
Paralysis. General activiti	5
	_
that his property consists of the following items	
Par A	
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 1809. I have heretofore as a resident of tout tou	
county been allowed a pension for the year 189 &	
Sworn to and subscribed before me, this, the	
Sworn to and subscribed before me, this, the day of gray 1869.	
22287 Luc- 5 Ordinary.	
2297 Liver gordinary.	
State of Course	
State of Georgia,	
Gulton County.	
1. Whilese grdinary of said County,	
do certify that I am well acquainted with Sec. a. Saman the	
applicant in the foregoing affidavit, and am well satisfied that the statements made by him	
in his said affidavit are true, and I know 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 & Car., 1899.	
(ATILE TOUT)	
(here.)	-
Ordinary Gullie County.	
Note — The blank spaces must be filled.	

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, County.
personally appears Go a Lamar of FULTURE
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since theday of18.30; that he is 70 years old and
by occupation a ; that he enlisted in the military service of the Confed-
erate States (or of the State of La.) during the war between the States,
and served for the term of 3 years in Company &, of - th Regiment of Phillips - 19-on ; that his physical condition is as
Paralysis Jeneral de to tel
that his property consists of the following items
To servery the detail on local control with the detail.
of the value of . Dollars, that by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1900. I have heretofore as a resident of Fulton
Sworn to and subscribed before me, this, the
b day of John 1900.) Ordinary.
State of Georgia,
FULTON County.
I, W. 1 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
ARE JOHN day of Carry 1900.
Ordinary FULTON County.
Nors.—The blank spaces must be filled,

Norm.—The blank spaces must be filled.

Norm.—A fildavit should not be attested before January 1st.

POWER OF ATTORNEY.

STATE	OF GEO	RGIA,	1						
		_Cc	ounty.						
I,				he	reby at	ıthorize	:		
				_ of.					
to receiv	e and rece	ipt for th	e pension	allowed	and r	equest	that	he remi	t same to
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by									
Wi	itness my h	and and se	al, this.	da	ay of				1901.
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$E_{\mathbf{x}}$	ecuted in p	resence of							
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		Z		2	!	1901.	1	7	
CODE SECTION 124. (For Those Aiready Enrolled.)		133		\$		7	_	Commissioner of Pension HANDED TO	
Ella	4 E		19 1	2 2	1 6	4	SEY	ner of	Atlanta
ady S	2 1	E E	Z 13	XV	SSI	1	ND	N DEI	Tinter.
CODE SECTION 124	7 4 4 IDIGEN	S	0 13	7 ;	ż		7. LI	T HA	12 3
SODE /	No. 448	2		1111	WARRANT ISSUED	4	JOHN W. LINDSEY	Commissioner o	Ueo. W. Harrison, State Printer, Atlan
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		S	Ą	Name					
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For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Section Courty (
personally appears and received of section
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said County and State, and has resided in said State continuously ever
since theday of18-7; that he is vears old
and by occupation a that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of 16010 in Company 2, of th Regiment
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follows:
asulyon - Sent debility
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that his property consists of the following items_
· ·
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and makes application for the pension to which
he is entitled for the year 1901. I have heretofore as a resident of Lice Ton
county been allowed a pension for the year 1900
Sworn to and subscribed before me, this the
Lige day of The 1901.
day of 1901.)
John R Wilking on Ordinary.
STATE OF GEORGIA
STATE OF GEORGIA,
County.)
do certify that I am well acquainted with Jeog County, the
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 Jaug 1901.
Som Rallaneon
Seal Series
Nore—The blank spaces must be filled.
NOTE - The Diana spaces must be utled. NOTE - Affidavit should not be attested before January 1st, 1901

POWER OF ATTORNEY. STATE OF GEORGIA, Futton County.

I. Ifro a Lanuar hereby authorize

Mr. & E. Richardson of attactic Ga to receive and receipt for the pension allowed and request that he remit same to Executed in presence of Williamson. (FOR THOSE ALREADY ENROLLED.) SOLDIER'S PENSIO JOHN W. LINDSEY, G Olach ... INDIGENT 1902. no Lata No. 472.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

	STATE OF GEORGIA,
	- tully (County.)
	Personally appears Sloy & am ar of Fullow
	County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
	and resident of said County and State, and has resided in said State continuously ever
	since theday of182 if that he is 22 years old and
	by occupation a that he enlisted in the military service of the Con-
	federate States (or of the State of) desing the war between the
	States, and reved for the term of in Company, of th Regiment
	of Mulls Legion (; that his physical condition is as
	follows: Qualities Leut de bility
	g comment of the comm
	that his property consists of the following items
	and the second s
	of the value of Dollars, that by reason of his physical
	condition and poverty he is unable to support himself by his own exertion or labor, and
	that he receives no pension but the one herein applied for.
	Deponent desires to participate in the benefits of the Act, approved December 15th,
	1894, and the Acts smendatory 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 40
	Sworn to and subscribed before me, this the
	dar of JA. 1902 The Course
	Mark
	Ordinary.
	STATE OF GEORGIA.
, .	Fulton. county.
	John R. Wilhinson.
	The 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
	Affix
	seal here
	Ordinary 4 Lill (1) County

Nors.—The blank spaces must be filled.

Nors.—Affidavit should not be attested before January 1st, 1902.

John B. Daniel,
WHOLESALE DRUGGIST,
34 Wall St.

Atlanta, Ga. Nov-15th-95

Personally appeared before Jno. B. Daniel of the city of Atlants and Fulton County, Ga., who certifies that he has known George A. Lamar for about 30 years and for last 10 years he has been unable to support himself. He has no means at all. He had nothing in 1893 or 94.

His occupation was afarmer in 1865 to 1873. Since that time he has been $_{\odot}$ an invalid.

His physical condition is and has been for about 10 years a Paralylic.

He is unable to support himself by any kind of labor. He was supported in 1893 & 1894 by friends.

He did not dontribute anything to his support in 1893 & 1896.

This party is entitled to a pension because he was a faithful and true soldier of the State of georgia and is now old and destitute of the necessarys of subsistence.

I have no interest in the recovery of a pension by this applicant .

Summer and submitted for A. Scrick.

Offen me A suite that

Me orthogo is tritted

restelled to brief

Mr 15" 1895.

Mr L. Calhine

1

Nor 150 1895 - W. L. Calhina Ordinary

County and were duly sworn by ne she is the per (SEAL OF ORDINARY) ful and trustworthy and their statements are entitled to full faith as Widow's Ap Given under my hand and official seal of office this day o Under Act of 1910-1 1919, and Constitution of 1920. t the back of the application carefully use the bulky form of Marriage Certif as) questions are answered the Ordmany thail wear applicant and the witness in the following to solomily swear that you will true nursers make to each of the exertions asked you and the erimit affairst may be attacked if think years are manufacent.
Glosse who married prior to January 1-1, 1881, are entitled.
Glosse who matried prior to January 1-1, 1881, are entitled.
Only one Ordmany services are manufacent.
The order of the Ordmany of the Courty on which the applicant or wigness resides and only one Ordmany services. tuelon County .. Name Mus aususs Widow of Por Annual Date of Marriage War 31 1861 Boss before signing the foregoing affidavits, and that they are truth Company INSTRUCTIONS: Regiment Approved 1000 Ordinary of said County, do certify

Convada X Lind

the applicant for pension; that Watercousty, a bona fide resi applicant for pension 50 Ordinary. person, or by County. JOHN W. CLARK, Commissioner of Pensio

CLARK. Jo JOHN W. 1910 Widow's Art of 1 Ordinary's Certificate STATE OF GEORGIA. Ordinary of said County, do certify · amenda y unas the applicant for pension; that the person she represents herself to be, and that she has be This 1920 that I also know Wesse hales 4774 Fr. billy of the Comandon hours bosigates in the that both of them are now residents of said as shown signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and 190 4 Given under my hand and official seal of office thi (SEAL OF ORDINARY)

INSTRUCTIONS 1. Before any questions are answered the Ordinary shall swear applicant, and the witness in the following words: "You do soit mily swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."

1. Only widows who married prior to January 1st, 1881, are entitled.

2. Only widows who married prior to January 1st, 1881, are entitled.

3. Mildfairst must be made before the Ordinary of the County in which the applicant or witness resides and must be critified by such Ordinary.

1. The Ordinary of the Ordinary of Mildfairst must be of marriage license if obtainable. If not, prove marriage, by some person, or by conservations of marriage license if obtainable.

Attach cerumes copies of marriage license is obtainable. If not, prove marriage, by some person, or by the properties of

APPLICATION FOR PENSION BY A WIDOW

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA.

Fulton

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

- 1. What is your name, and where do you reside? (Give Post Office and County) Mrs. A. L. Ross, daughter of Mrs. Amanda Lamas who lives at 975 Sells Ave. S. W.,
- Atlanta, Fulton Co., Ga. Mrs. Amanda Lamas 2. How long and since when have you'been, continuously, a bona fide resident citizen of the State of Georgia? From 1919 to 1925, and from 1930 to date
- When, where and to whom were you married? March 31, 1861, centerville, County, Alabama, to Joseph L. Lumas.
 - Have you married since the death of first and soldier husband? No
- 4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Coionel and Cantain.) Sept. 15, 1861, Dragonn Camp, Ala., Co., G., 15th Regt., Confederate Calvary., Private, Capt. B. C. Yancey
- When and where did the commands of 966 husband surrender or discharge from the Service? I believe in Scranton, Miss., in 1865
- 6. Was All husband personally present with his command when it was surrendered or do
- If he was not present, state specifically and clearly where he was? Detached to work on gun boats When did he leave the Command? In April 1864
 - Detached to work on gun-b. ats For what cause did he leave?
 - By whose authority did he leave? Officer in command
 - For how long was his leave of absence granted "Indefinite In what way"
 - What was his physical condition when he left his command? Good
 - What effort did he make to return to his Command? Was on detail work
 - In what way was he prevented from going back to Command? Account detail work
 - Was he captured by the enemy at any time? No
 - If so, when and where? In what prison was he held and when was he released?
 - When and where did wour first husband die? Mobile, Ala. in 1960
 - Were you residing together when he died? Yes
 - If not, how long have you resided apart?

 - Is she
 Ara you now a widow." Yes
 Has she or her husband
 Have you or your busband heretofore been paid a pension by the State?
 - If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me, this the 192 34 Buen Buch Ordinary Fulton County. (SEAL OF ORDINARY)

for Applicant. COPY

APPLICATION

OF WIDOWS OF DECEASED SOLDIERS OR SAILORS OF THE ARMIES OF THE CON-FEDERATE STATES OR THE STATE OF ALABAMA.

STATE OF ALABAMA) JEFFERSON COUNTY)

Your petitioner, Amanda Lamas, respectfully represents to your Honorable Board that she is a citizen of Jefferson County, in the State of Alabama, and was such on the lst, day of January 1899; the State of Alabama, and was such on the lst, day of January 1899; that she is the widow of Joseph Lamas, who served as a private in Company 6, of the 15th, Alabama Cavalry Volunteers; that her husband was killed, or died, on the 31st day of October 1899; that he did not desert the service of the State of Alabama, nor of the Confederate States; that she had not since remarried; that she has no children upon whom she can depend for support; that all of her property does not exceed Four Hundred Dollars in value; and that her annual insome from all sources does not exceed Four Hundred Dollars. annual insome from all sources does not exceed four numbered believed. She therefore respectfully asks your Honorable Board to place her name upon the pension rolls of the State as a member of the fourth class, that she may participate in the division of the fund provided class, that she may participate in the civision of the fund provided for the relief of needy Confederate soldiers and sailors, and their widows, by an act of the General Assembly of Alabama, approved February 10, 1899.

Respectfully.

Mrs. Amanda Lamas

STATE OF ALABAMA) JEFFERSON COUNTY

Before me, W. J. Waldrop, a Notary Public in and for said State and County, personally appeared Amanda Lamas, whose name is signed to the foregoing application, is personally known to me, who after being first duly sworn, deposes and says that each and every statement in the foregoing application is true and correct. Amanda Lamas

Sworn to and subscribed before me this the 28th, day of June 1906.

> W. J. Waldrop Notary Public in & for said County.

> > AFFIDAVIT FOR WITNESSES TO APPLICATION OF WIDOWS.

STATE OF ALABAMA TUSCALOOSA COUNTY)

I, J. Dw Blooker, do solemnly swear that I was personally acquainted with Joseph Lames, whose widow's name is signed to the foregoing application and that I know of my own knowledge that the services set forth in the application were rendered by said Joseph Lames, and that he did not desert the service of the Confederate States or the State of Alabama.

J. D. Blocker

Sworn to and subscribed before me this the 30th, day of June 1906.

I hereby certify that the affiant is known to me, and that he is a person of integrity and verseity.

APPLICATION OF MRS. AMANDA LAMAS COUNTY OF JEFFERSON

REPORT OF COUNTY BOARD

We, the undersigned memwe, the undersigned members of the Pension Board of Examiners for the County of Jefferson hereby certify that we have examined the within application by law directed, and we find that said application should be granted, and the applicant placed in Class

R. G. Hewitt W. P. McAdory Board of Examiners for Jefferson County

FINDING OF THE STATE BOARD OF

EXAMINERS. We, the undersigned State
Board of Examiners, hereby
certify that we have examined
the within application and
recommend that said application be granted, and that the
applicant be placed in class 4,
under the act of February 10, 1899.

This the 17 day of Aug. 1906.

R. D. Jackson, M. D. R. J. Reynolds

State Board of Examiners.

AFFIDAVIT FOR WITNESSES TO APPLICATION OF WIDOWS

STATE OF ALABAMA) MOBILE COUNTY

I, John B. Davis, do solemnly swear that I was personally acquainted with Joseph Lamas, whose widow's name is signed to the foregoing application, and that I know of my own knowledge that the services set forth in the application were rendered by said Joseph Lamas and that he did not desert the service of the Confederate States of the State of Alabama.

John B. Dovis

Sworn to and subscribed before me this the 6th, day of July 1906.

I hereby certify that affiant is known to me, and that he is a person of integrity and veragity.

> Wm. M. Doyle Notary Public-Mobile County, Ala. In and for said State & Co.

*** ***

I, Walter K. MoAdory, Pension Clerk, State Auditor's Office, do hereby certify that the foregoing is a true and correct copy of the pension application of Amanda Lamas which is on file in this office. I further certify that Mrs. Amanda Lamas' name was placed on the pension roll of Jefferson County for the October quarter, 1906, and she drew a pension until her removal from the State, and the January 1933 pension warrant was returned for gancellation.

Walter K. McAdory Pension Clerk & Secretary to the Alabama Pension Commission

Sworn to and subscribed before me this the 15th, day of December 1933.

GEORGIA. FULTON COUNTY:

Personally appeared before the under signed officer Miss Katie Wood Fort who having been duly sworn deposes and says:

Early in January, 1934 Mrs. A. L. Ross asked her to make affidavit that Mrs. Amanda Lamas was mentally incapable to know her children, others and deponent knowing that to be true consented to make such an affidavit.

Deponent has since learned that the affidavit which she subscribed to contained a recital that Mrs. Lamas was a resident of Fulton County; that she had lived in Fulton County during the entire year 1980 and moved to Alabama about the year 1925 and returned to Georgia about the year 1930. Deponent inadvertently subscribed to the affidavit containing these recitals.

Deponent says that Mrs. Amanda Lamas does not reside in Filton County and that she is advised and believes that Mrs. Lamas lives in New Orleans, Lousiana. She wishes to correct the affidavit referred t

mis Kalu Nord Fo

Sworn to and subscribed before me.



STATE OF GEORGIA DEPARTMENT OF LAW ATLANTA

Januery 13, 1934.

Mr. A. L. Henson Veterans Service Office State Capitol Atlants, Georgia

My dear Mr. Henson:

Yours of the 13th instl relative to the opinion rendered your Department under date of January 12th, in response to your request of the 9th inst. has been received.

We are asking you to return the opinion dated

January 12th.

You desire to know whether the widow of a Confederate soldier, who served in the Alabama Cavalry, and who is a non compos mentis may make application for a pension through a next friend. You also desire to know whether, where the amplicant has resided during the year 1920 in Georgia, but left the State and lived in Alabama until 1930, moved bank to Georgia in 1930 and since that time has resided here, is made ineligible for a pension due to her temporary residence in Alabama. You also desire to know further whether an application submitted on the third day of January 1934, can be approved to take effect during that month, no payments having been made to other pensioners for the month of January, 1934.

I shall attempt to answer your questions in the order in which they are set out above.

In answer to the first question it is my opinion that a veteran's widow who is non compos mentis cannot make application through a next friend. It is provided in Code Section 4237 of Michie's Code of 1926 as follows:

> "An insene person cannot contract prior to commission sued out and guardianship appointed.

It is my opinion that such an application would have to be made through a duly appointed guardian in accordance with Code Section 3089, et seq.

In answer to your second question, I desire to call your attention to the provisions of Section 6551 of Michie's Code of 1926, which codifies the Act of 1920 as contained in

#2 A. L. H.

Georgia Laws, 1920, page 23. This amendment of 1920 fixes Jenuary 1, 1920, as the date upon which an applicant (who is a widow of an Ex-Confederate soldier) for a pension must have resided in Georgie, in order to be eligible from a standpoint of residence.

In view of the answers to the above stated questions, I feel that it is not necessary to enswer the third questi co.

Trusting this is the information desired by you,

I am,

Yours very truly

MJY/ne

GEORGIA. FULTON COUNTY.

Personally appeared Miss Katie Wood Fort who swears that she is personally acquainted with Mrs. Amanda Lamas, she further swears that the said Mrs. Amanda Lamas was a resident of Fulton County, State of Georgia for the entire year of 1980 and left Fulton County, Secretary for Alabama about the year 1985 and returned to Georgia about the year 1930, and that she is now a resident of Fulton County, Georgia.

She further makes affidavit that the said Mrs. Amanda Lamas does not know her own children and is not qualified to sign a paper of any kind.

Sworn to and subscribed before me this 2nd day of January, 1934.

Code of 1926, which codifies the Act of 1920 as contained in

this 2nd day of January, 1934.

Queling Runalit









THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

(COPY)

The records show that Joseph L. Lamas, private, Co. B, Murphy's Battalion Alabama Cavalry, C. S. A., was enlisted Sept. 15, 1861, at Dragoon Camp by Capt. B. C. Yancey.

Company muster roll for May and June 1865, shows him absent, detached to work on Gumboats by order of General Slaughter, December 17, 1865. This company subsequently became Co. G, 15th Regiment Confederate Cavalry.

Company muster roal of that company for December 31, 1863, to April 30, 1864, last on file, shows him absent detached to work on Gunboats. No later record of him has been found.

No record of his capture or parole has been found as of that organization. $\ensuremath{^{\alpha}}$

(Signed) James F. McKinley, Major General,

The Adjutant General.

Above is true copy of record obtained from War Department, Washington, D. C.

Assistant Director

Min. Thomas are also with Mon 111.

ner Rose



ALABAMA PENSION COMMISSION

THE STATE CAPITOL
MONTGOMERY

December 15, 1933.

Hon. A. L. Henson, Director, Veterans Service Office, State Capitol, Atlanta, Ga.

Dear Mr. Henson:

We acknowledge receipt of your telegram of even date and complying with your request we are enclosing herewith certified copy of the pension application of Mrs. Amanda Lamas, formerly on the pension roll of Jefferson County, Alabama.

Whenever we can serve you in any way please call on us.

Yours very truly,

Walter K. McAdory Secretary A. L. HENSON.

C. ARTHUR CHEATHAM.

MISS LILLIAN HENDERSON.



THE VETERANS SERVICE OFFICE

STATE CAPITOL

ATLANTA

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THE VETERANS SERVICE OFFICE

ATLANTA

Hon. M. J. Yeomans, Attorney General State Capital ATLANTA, Georgia

Dear Sir

Mrs. Amanda Lamas, through her next friend, filed her application on January 3rd, 1934 to be enrolled as a Confederate pensioner on account of the services of Joseph L. Lamas, deceased, a private in Company B, Murphy's Battalien, Alabama Cavalry, CHA. This applicant was married to her soldier husband prior to 1881; has not remayried and the evidence shows six months of homorable service on the part of the soldier conserved in the Confederate Army, and an homorable separation from said service.

It appears that the applicant is insane and is without mental capacity to make eath and that her daughter made oath as her next friend. Applicant was a benn fide resident of the State of Georgia during the whole year of 1980 but left the State of Georgia and lived in Alabama until 1980. Since 1980 abe has been a bona fide resident of the State of Georgia.

I desire your opinion as to whether application can be made by a person non compec mentic through a next friend. I desire to know also whether her temperary residence in Alabama made her incligible to be placed on the pension relie. I desire the know further whether an application submitted on the 3rd day of January, 1984 can be approved to take effect during that mentin, no payments having been made to other pensioners for the month of January, 1984.

Very truly yours,

Director.

ALHELT

ATLANTA

Jenuary 15th, 1934.

Hon. M. J. Toomans, Attorney-General, State Capitol ATLANTAL Ga.

Dear Sir:

You were kind enough to give me an epinion under date of Jamusy 9th, Last, relating to the residence requirments of applicants for Confederate pension.

It is observed that you refer to Code Sections 1408 (1), et. seq. to fix the date of such residence. This authority fixes the 4th day of Revember, 1808, as the date on which an applicants must be bonn fide residents in order to be elligible.

Kindly advise if subsequent legislation, to-wit: an Act approved August 14th, 1918 (Acts 1918, p. 96) and codified as Sec. 6581 Michie's Code, does not fix this date as January 1st, 1980 ?

Yours very truly.

Director



VETERANS SERVICE OFFICE

SUCCEEDING TO THE DUTIES FORMERLY DEVOLVING UPON

THE PENSION COMMISSION
THE ROSTER COMMISSION
THE VETERANS SERVICE OFFICE

LILLIAN HENDERSON, ASST. DIRECTOR C. M. CLARK, LIAISON OFFICES

STATE CAPITOL

ATLANTA

MEMORANDA:

A L. HENBON, DIRECTOR

C ARTHUR CHEATHAM

IN RE: Application for pension for Mrs. Amanda Lamas, widow og Joseph L. Lamas; Fulton County, Georgia:

l. In making claim for admission to the Georgia pension roll, the application, proper, is, in fact, nothing more than an identification of the applicant. Mrs. A. L. Ross, a daughter of applicant, executed the application, and swore to its contents, before Judge Thomas H. Jeffries, Ordinary. Fulton County, Georgia, for the reason that the applicant, herself, is incompetent to execute the application. Judge Jeffries certifies that Mrs. Ross is the person she repr sents herself to be, and that she is truthful and trustworthy and her statements entitled to full faith and oredit.

2. The Confederate military service upon which the granting of a pension is based, exclusively, is at least six months of actual military service, and an honorable accounting for the soldier, in his relation to the Confederacy, until the close of the War. The evidence of service on the part of the husband is: (a) A transcript of the record in the office of The Adjutant-General of the United States, of itself showing more than six months of actual military service; (b) Certified copies of affidavits of J. D. Blockerand John B. Davis, upon which Mrs. Lamas was once admitted to the Confederate pension roll of the State of Alabama, to the effect that the husband addid not desert the service of the Confederate States or the State of Alabama, they having known, of their own knowledge, that this was true; thus accounting for the husband of this applicant until the close of the War.



VETERANS SERVICE OFFICE

SUCCEEDING TO THE DUTIES FORMERLY DEVOLVING UPON

A L. HENSON, DIRECTOR THE PENSION COMMISSION
C ARTHUR CHEATHAM. THE VETERANS SERVICE OFFICE

LILLIAN HENDERSON

STATE CAPITOL

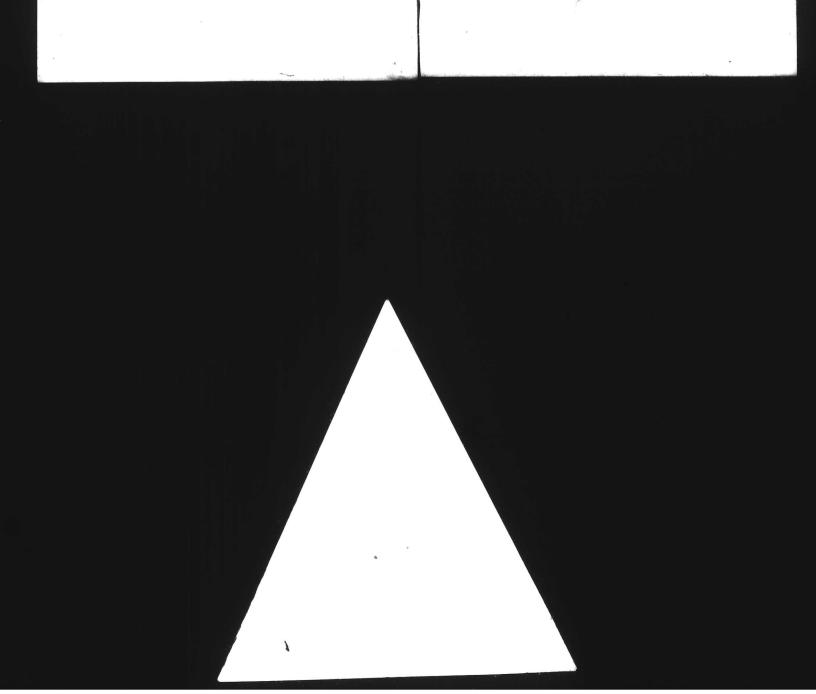
ATLANTA

IN RE: Application for pension for Mrs. Amanda Lemas, widow of Joseph L. Lemas; Fulton County, Georgia;

It appearing that the husband of applicant, Joseph L. Lamas, performed more than six months of actual service as a Confederate soldier, and that he is honorably accounted for in such service until the close of the Wer; and it further appearing that applicant was married prior to the year 1881 to said Confederate vetoran, and that she lived with her said musband to the date of his death and has not remarried, this application is approved, and it is ordered that she be enrolled as a pensioner of Fulton County, Georgia, for the month of 1931, and thereafter.

This the 6th day of January, 1934.

Allewson



POWER OF ATTORNEY, """

STATE OF GEORGIA.

Presents, That I. all Men by these

County, in said State, do hereby appoint

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 Solider, 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 ree for the reason of

my true and lawful attorney in fact, for

WITNESS WHEREOF. I have hereunto set my hand and day of N/

Executed in the presence of us:

10

270.2082

Widows' Pension

\$100.00.

Warrant Issued

AND HANDED TO

POWER OF ATTORNEY."

STATE OF GEORGIA,

County.

Know all Men by these Presents. That I,

County, in said State, do hereby appoint

of _____my true and lawful attorney in lact, 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 jeason aforesaid.

LN HTTNESS WHEREOF, I have hereunto set my hand and seal, this day of $$^{-180}$$

Executed in the presence of us

[1.. 8.]

DIBECTIONS

If allowed, send amount by

. .

me a

, and oblige,





Affidavit to be Made by the Widow.

STATE OF GEORGIA.
In person came before me, the undersigned Ordinary
County of Agellan in and for the County of Agellan
Mrs. Jane Lacyto www being sworn according to law, says under
Mrs. Helle Lacyth a wy being sworn according to law, says under onto that she is the widow of Wrish A. Lacuth, who was a soldier in
the service of the Contract of
11 lun
Regiment of Yolunteers; that he enlisted in said
service on or about the 121 day of Man 18621, and was in the
Army, he was on the 30 day of aug 1864 That while in the
Army, he was on the 30 day of aug 1864, (See Note No. 1)
Captured by the engines as the battle
as foruskaro blandanda ya and
Campind in that Camp Saucha
in the state of Allinois Johns
he died in the nor Kasy 5

Deponent further swears that she was the wife of said deceased soldier during his term of service in the Army, and that she has never married since his death; that she became his wife on the day of his hard that she has resided in Georgia continuously since the day of his hard 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 Saw Law Law of may 1891. Jan Loub Male March 1891. Jan Leauthron Male Wallary.

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 different resulted from disease, state how the disease is *how!no positively to have resulted from the service of the soldier in the Army and not from any other cause.

Affidavit for Three Witnesses.

STATE OF GEORGIA.

In person came before me, the undersigned Ordinary

County of 1012000 in and for said County, witnesses Francis Callette, sense & + Flancisan

and in Leave of - 1000 -(each known to said Attesting Officer as truthful, reliable and reputable citizens), who severally say under oath, that, from their own personal knowledge, Mrs. Lieuce Siteria , of the County of Juliance State of Georgia, is the widow of Lallex 20 7 Secretary Company . T of the 74 IT Regiment of That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or day of _ _ _ z 1862 That while in said service or by

reason of said service in the Army, he lost his life as follows: is now so towered in the enemy at the sattle I've Your some in it is an The 18th way I' stroy not the and begined a small down the the what it, Still not in the the wind

We further swear that Mrs. siece Source S was the wife of said soldier during the service, and that she has not intermirried since his death, and that she resides in Jui Tace County of the State of Georgia.

Sworn to and subscribed before me, this, the)

day of I Sic 1891. If a ren g In ith

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

STATE OF GEORGIA.

whloachnu Ordinary

County of Fullow

in and for said County of Hullan

State of Georgia, hereby certify that I am acquainted with Mrs. Jan Louis 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 tully 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

day of April 1891.

mit backum

Form No. 1.

The pension is only payable to certain classes of widows

Those whose husbands were killed in service.

Those whose husbands died in the army of wounds or disease contracted in the service,

Those whose husbands went to the army and have never been heard from since the war.

Those whose husbands were wounded in the army and have since died from the direct effects

Those whose husbands 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

The law does not provide for any one fiving 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 tull 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.

We further swear that Mrs. sietee - cece was the wife of said soldier during the service, and that she has not intermarried since his death, and that she resides in . L. C. Tarce County of the State of Georgia. Sworn to and subscribed before me, this, the 1 Harren & Din ith 1. 7 = (day of 1 / /2= C 1891.)

assaults 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

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By order of the Governor.

W. H. HARRISON

Sec. Ex. Department,

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

STATE OF GEORGIA, County of FULTON

W. L. CALHOUN Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. Jane Lamb

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

Mich J. Lound 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 day of February 1893.

ow. L. Colectional Ordinary.

POWER OF ATTORNEY.

Form No. 3.

County.

STATE OF GEORGIA,

SEAL

KNOW ALL MEN BY THESE PRESENTS, That I,

County, in said State, do hereby appoint

my true and lawful attorney in fact, for

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

STATE OF GEORGIA, County of FULTON W.L.CALHOUN Ordinary in and for said County of State of Georgia, hereby certify that I am acquainted with Mrs. Jane Lamb 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

Uniah J. Lamb 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 , day of February 1893. M.L. Chellinmy Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

KNOW ALL MEN BY THESE PRESENTS, That I,

County, in said State, do hereby appoint

my true and lawful attorney in fact, for

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

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

day of_

Executed in the presence of us:

__[L. S.]

DIRECTIONS.

Send amount by___

EMMETT F. CROOK. JUDGE OF PROBATE COURT CALHOUN COUNTY

Jacksonville, Ala. April 20th, 1891.

I. Emmett F. Creok, Judge of the Probate Court of Calhoun CO. State of Alabama, hereby certify that John M. Berge personally appeared before me, and being duly sworn, testifies that he knew one Uriah Lamb a confederate soldier, was with him in prison at Camp Douglass, eether in the year 1864 or 1865. I am not positive but think it was 1864, and 1 know that he died in said prison during said year. I do not know the Company and Regiment to which he belonged, but it was a Georgia Regiment, and I think he went from or near Atlanta Ga.

Sworn to and subscribed before me the day and date above written. Judge of Probate Calhoun County

Alabama.



For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA, Personally comes Mrs.
County of FULTON Jane Lamb
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 Jamony 1840 That she is the Widow of
Wriah F. Karrb , who was a Soldier in Company
of the 46; Regiment of Groupice
Volunteers, that he enlisted in said Regiment on or about the month of . Many
1862 and served in the Army up to Reserved 305 1864. That he lost his
life on the day of 1864 (State here
full particulars of the husband's death, when, where and from what cause.) (That-
on the 30 day of August 1864, he was
captured by the enemy at the Battle
of Jonesboro blaylon bounty , Georgia,
and was confined in bamp Donglass
in the State of Illinois where he died,
while still engaged in said service.

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 186/, ...; 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.

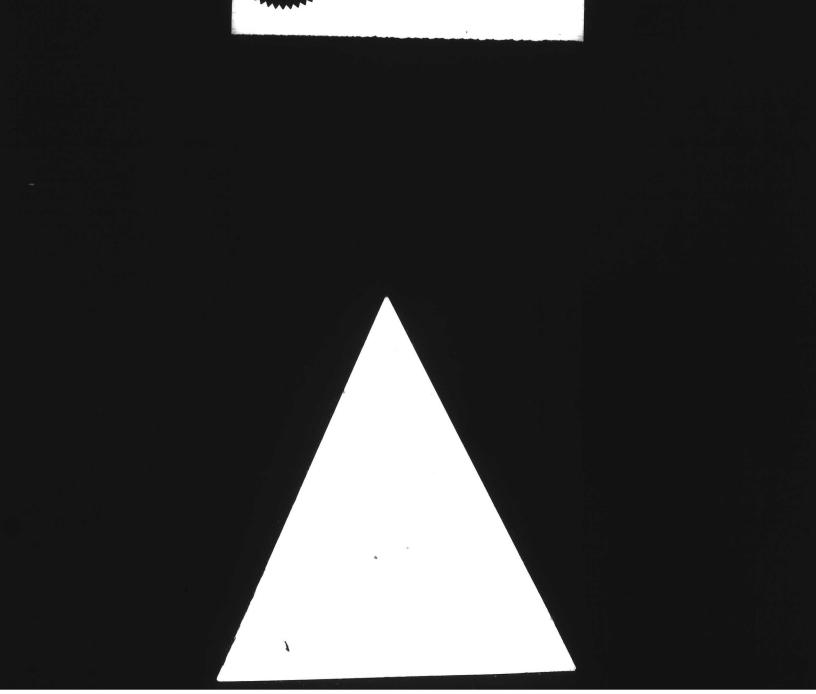
Sworn to and subscribed before me, this

2nd day of February 1893.

2nd Louisma Ordinary.

Post-office multipart

fann X dans 2nd day of February 1893. Mr. Le culm Cordinary. | Post-office modes and Fuelon less sa Ordinary's Office, Upson County. J. C. WILLIAMS, Ordinary. Thomaston, Ga., Misic 23 rd 18 2 2- 1. E. Williams Indiana ... for Raid Country of Reproce Luncky centify that harrow G. Smith June & A Mountoon and Shilliam & Land the fullnesses whose testimony Mo Jane Land Imounts to sustain her claim for removed sender The Act of the General ass embly of Get allowed december 23rd 1890. are known to one to be truthful suitnesses, entitled to full faith and credit as such. Conven under ony hand and seal of office. This the 282d day of April 189 J. 6. Milliams Drawing



Def & allanta day of 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 adoresaid in the military service of the Confederate States for 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. County, in said State, do hereby appoint of Atlante STATE In WITNESS WHEREOF, I have hereunto set my hand and seal, this KNOW ALL MEN BY THESE PRESENTS, CAREFULLY.—In order to avoid unnecessary delays to applicants, and to enable necessed to understand the laws granting allowances to disabled soldiers, as well as opped by the Governor touching the payments provided, the following suggestions OF GEORGIA, POWER ullon APPLICATION FOR ount by ounded, the description of the counts should be carefully resistant, and followed by plant transpart of facts showing the claim description description of the savices in the savices of disease should be green tracked the disability by positive of or an arthur degraphs are green tracked to the country of t NOTES. 1891. Mr. of Sam ATTORNEY. Amount, 50 an my true and lawful attorney in fact, for Entered on Record alhir for ordinary pursuits of the arm or leg, but eg has been reddered

KNOW ALL MEN BY THESE PRESENTS, That I. Mr. Id. Land

County, in said State, do hereby appoint of allanto

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 9 The

Executed in the presence of us

and oblige.

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

are submitted: are submitted:

1. If I are pleant has been wounded, the description of the counds should be carefully and fully set significant and president, and followed by a plain transpert of facts showing the view of the display. If applicant claim, displaying the decay controcted in the service, a full and carefully stated description of the disease should be given tracing the displaying to positive proofs to the service.

proofs to the service.

The law makes a profilewance for an arguer by, makes the arm or leg, has been reddered subjected and the proofs to the proofs to the profile and the proofs to the proofs to the profile and the proofs to the proofs to the profile and the proofs to the proofs to the profile and the proofs to the proof

For Use of Applicants Who Have Not Heretofore Drawn.

STATE OF GEORGIA,

PERSONALLY appears William St. Land of Hullow 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

June 1885; that he enlisted in the military service of the Con-

during the war between the

States, and served as a Private in Company & . of 43 & Regiment Volunteers Stovalls Brigade; that whilst engaged

in such military service, at the battle of Bakers - Creek

of Min on the 16 th day of May 1863, he was

disabled as follows: to Wit, by being wounded twice in the Battle of Baker's Creek one

athen wound in the left thigh the

ranging clown to the sight Knee also received, a wound

in Top of head by a price of Shell-Which wounds has caused depon

Freat Suffering, and pain. The Bullett

That made wound in right hip, remained in deportent over mino yers, which

Caused him Great Suffering & pain -The wound in head has Carred deport to loose to a great extent his Eye sight.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the Acts amendatory thereof, and makes application for the allowance to which he is entitled for the year thereunder, ending October 26, 1891.

Sworn to and subscribed before me, this, the

74. 76. Lanch

Note.—State fully pature of wound or character of disease which causes the disability, and explain particularly the extent of the disability. If claims pasted on disease, give juil and connected history of disease, tracing it directly to the service.

NOTE.—Do not fivibly to mention wounds which do not disable.

PERSONALLY appears before me, the undersigned Ordinary in and for said County, G. F. Hoolleff Link D. F. Light.

each of whom, being duly sworn according to law.

severally say, under oath, that they are personally well acquainted with Am Holant

whose application is herewith presented for a pension,

and that they served with him in the army, and from our personal knowledge he was injured by the service as follows: (Give full statement, and tell in your own language how bully applicant is disabled from work. If he does any labor, or can do any, state what.)

Rhlicanh 11", It, Land is permanently disabled from doing any hard work and is only able to super tend the work of others.

Our opportunities for knowing that his condition results from the service are as follows: that us were in server with him and saw him tally assembled in Bakis Creek fight Missippi. he was wounded in the left thigh, in The right hip and in the top of the head, Applicant is permanently disabled, and has been so to our certain knowledge ever since 1886. We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me, this) 9 day of Janua 1891. mx 6 aum

NOTE .- The Ordinary will see that the full text of the Affidavit is understood by the wilnesses, and that they are legally quali-

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA. Fulling. County.

PERSONALLY comes before me M.L. Louehm Ordinary of said County, of ICL Court and in 17th Bullack both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have carefully examined 77 H Zanck and after such examination, say that the applicant has been injured as follows:

Was shot in right tick ball concine deconvered producing serial absence our about the upper these of they's town at the course think to one below the knew where the ball finning proceed on to which was nine were after wine communed. to war also wormed in the with they it ball the wounds incapacitate him from comme a comfortable winey an one paintel oftime to such an extent that he is not ide o our We have treated applicant professionally for ...

Sworn to and subscribed before me, this] 5 m day of Janua 1891.

or. L Callin

J. M. Carter

Norg.—The physicians will state fully the extent of the wound, and then give facts to show the extent of the disability resulting therefrom. ing therefrom.

NOTE 2.—If claim is for disability resulting from disease, state δου the disease is δυούν to result from the service as a soldier. Also state how long physicians have known and treated applicant.

Form 4

Form 8.

STATE OF GEORGIA. Smilen County.

Ortloachin Ordinary of said County,

do certify that I am well acquainted with me do Land 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 S. 96 . Landiscen

before whom the foregoing affidavits were made and power of attorney was signed, is a Lender of the Proces of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 9 day of 1891.

m. L. lo cecano Ordinary Fuelen County.

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01			County, State of	or Georgia, do	nereby appo
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For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	2		
Fulton County.			
Personally appears W.H.	Jaunb drugs	of	Ful to n
County, State of Georgia, who, being duly	sworn, says on o	ath that he is a	bona fide citizen and
resident of said State, and has resided the	rein continuously e	ver since the	
day of birth 18 39	; that he enlisted	in the military	service of the Con-
federate States (or of the State of	(FECTERAL)) during	the war between the
States, and served as a Priv	Storell	ompany 5,	of 43 th Regiment
such military service at the battle of	Buy Crook	s Brigade ; t	hat whilst engaged in
of Mississippi . , on the	1 fieh day	of 400	in the State
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Deponent desires to praticipate in the acts amendatory thereof, and makes at the year ending October 26, 1893. I have	pplication for the a e heretofore been	allowance to wi allowed a pens	nich he is entitled for
Fifty	dollars, for	1893	5
Sworn to and subscribed before me, the	is, the	, H. Ja	2
m. L. le auch	un au	may	
Norz-State fully nature of wound or character of disability, resulting from the wound or disease.	sease which causes the di-	ability, and enplain	particularly the extent of the
STATE OF GEORGIA,)			
Ful ton County.	施		
I, Wall	Calhoun	Ordi	nary of said County
do certify that I am well acquainted with			
applicant in the foregoing affidavit, and an			
said affidavit are true, and that he is disable			
dividual he represents himselfito be, and ti		5	know he is the in-
I further certify that			
the second secon			
belore whom the foregoing affidavits wer	e made and pov	County, and	y was signed, is a the said affidavits and
signatures theneso are genuine.			
Given under my official signature and	seal, this /J.	day of	Hareh1893.
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Karallan market in	Ordinary	Fu	2 ton County.
Caun	,		,

210. LG	JER'S PENSION.	E VEAR ENDING OF TORER 26, 1892.	rx. Lund,	Jullin.	Bus, mond	50	Net 1 1842.	W. H. HARRISON. Secretary of Breative Professions	Meen.	W. Rarrieso, State Printer, Atlants, Ga.

STATE OF GEORGIA. Freelin-

County.

individual he repesents himself to be, and that he resides in this county.

1. M. L. achound Ordinary of said county,

do certify that I am well acquainted with M. M. Laub 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

V.L. backom

Given under my official signature and seal, this 1st day of Manch 1892

Ordinary Frulton

POWER OF ATTORNEY.

TOWER	OI	111	1	OIL
STATE OF GEORGIA,	1			

Know all Men by these Presents. That I,

County, State of Georgia, do hereby appoint

my true and lawful attorney in fact, for

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

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

day of

Executed in the presence of us

Send money to me as follows, by

Soldier's Pension

County, Georgia.

For Applicants Heretofore	Allowed Pensions
STATE OF GEORGIA,	Allowed Fortsloridi
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	of Georgia, who, being duly sworn, says
on oath that he is a bona fide citizen and resident of G	eorgia, and has been such continuously
since the day of B H	1839; that he enlisted
in the military service of the Confederate States (or of	the State of Leaster)
during the war between the States, and served as a of 43 th Regiment of Sur spring.	face in Company L.
of 43 th Regiment of Sie of 6	Volunteers Stavally 's
Brigade ; that whilst engaged in such military service at	t the battle of Sing Once
in the State of Aliendific , on the	day of
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Deponent desires to participate in the benefits of t	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 to	
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day of Mark 1892.	
W. Lo backen brdinary.	
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POWER OF A	TTOENEY.
STATE OF GEORGIA.	
County.	
Know all Men by these Presents, That I,	*
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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 whate	ver amount of money I may be entitled to
from the State of Georgia by reason of the injury rece	ived as aforesaid in the military service of
the Confederate States (or of this State), as stated in my said attorney to receipt in my name for any Warra or for any sum of money which may be coming to me	int that may be issued by the Governor,
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IN WITNESS WHEREOF, I have hereunto se	et my hand, and, seal this
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4	County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORG	GIA,)		
Filten	County.		
PERSONALLY appears	drus, T. H. W	of	Thilt on
County, State of Georgia, wh and resident of said State, an day of birth	d has resided therein	continuously ev	
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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 Clarky dollars, for the year 189 .

Sworn to and subscribed before me, this, the 17/076 Sazult

Mr. L. Colhow Onung

Norz-State fully the nature of wound or character of disease which causes the stability, and ceptain particularly the extent of the disability, resulting from the wound or disease.

STATE OF GEORGIA, County.

day of

I, W.LtOn them. Ordinary of said County.

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

Given under my official signature and seal, this

Affix | jour seal | here.

March 1894.

Or. L. Calhoun

Ordinary Ful to

County.

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	STA	TE OF	GEORGI	Α,	1						
				Coun	ty.∫						
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	County	, State of	Georgia, do	hereby s	appoint						
	of.							_my true and	lawful a	ttorney in fact, f	or
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For Applicants Heretofore Allowed Pensions.

Fulton

County.

STATE OF GEORGIA,

personally appears . F. Land

and resident of said State, and has resided therein continuously ever since the
day of pirtr 18 30; that he enlisted in the military service of the Con-
federate States (or of the State of "corei;) during the war between the
States, and served as a in Company, of 43 th Regiment
of Brigade; that whilst engaged in
such military service at the battle of FeV Trial in the State
of 1.1 ittl , on the lott day of 186 , he was
wounded as follows: not tirough laft thigh and right arm also wounded
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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 this dollars, for the year 189 sown to and subscribed before me, this, the dollars, for the year 189 sown to and subscribed before me, this, the dollars, for the year 189 sown to and subscribed before me, this, the dollars, for the year 189 sown to and subscribed before me, this, the dollars is the disability, and explain perticularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA,
County.
I, S.I. Calboun Ordinary of said County,
do certify that I am well acquainted with #.Hbamb the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
1.1. 1il in this County

Given under my official signature and seal, this

M.L. backnew

Ordinary____ Fulton ___County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

. u.	e din	County.			
Persona	illy appears	W.H.Lamb	of	pulton	
		o being duly sworn,	says on oath that	he is a bona fi	de citizen
		d has resided there			
day of b	irth	18 30; that he en	listed in the mili	ary service of	the Con-
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Deponer	it desires to par	ticipate in the benefi	ts of the Act, app	roved October 2	4th, 1887,
		reof, and makes ap			
		ig October 26th, 1			esident of
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of the disability, r	fully the nature of wour esulting from the wound	nd or character of disease whi d or disease.	off cartiers the disability, s	nd ecplain particula	riw the extent
STATE	OF GEO	, ,			
Fulto	n(County. J			
Ι.	T.I. modler.I.F			Ordinary of sai	d County,
do certify th	at I am well acqu	ainted with			the
		fidavit, and am well		statements ma	de by him
in his said a	ffidavit are true,	and I know he is t	he individual he	represents his	nself to be
and that he	resides in this C			4.	A
		under my official si		this 26	
140	day of_	. 501	_1896.		
Affix (my	bace	6	
here.		11.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	70.6.1.1.	· · · · · · · · · · · · · · · · · · ·
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County.

POWER OF ATTORNEY.

OTATE OF SEC.			P	OWER OF ATTORNEY.	
STATE OF GEORGIA	}		STATE OF GEORGIA	Α,)	
	County.)			County.	
I,	hereby authorize		I,	hereby authorize	
	of		A management of the second		
to receive and receipt for t	the pension paid hereon and request t	that he remit same to		r the pension paid hereon and request that	he manife
	by			by	ne remit same to
at			at_	by	
IN WITNESS WHER	EOF, I have bereunto set my hand an	rd seal, this		EREOF, I have hereunto set my hand and sea	
lay of	1897.	/			al, this
		[L. S]	day of	1898.	
Executed in preser	nce of				[L. S.]
)		Executed in prese	ence of	
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SOLDIER'S	= #3	WARRINT ON STATE	Fer These All No. Z INV.	8 2 50 E	WARRANT HANDED Apply C. RENEWED, STATE PRINTER.
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92	Name County Disabili Amount	, in the second second	-g =	Name County Disability Amount, 1	1 1.
	2 2 1	1		Coo Coo	
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For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Luction County.
County, State of Georgia, who being duly sworn, says on oath that he is a hona fide citizen and resident of said State, and has resided therein continuously ever since the day of Della 1839; that he enlisted in the military service of the Confederate States (or of the State of Service) during the war between the States, and served as a hour field in Company of 600 th Regiment of Longia Volunteers, Storall 's Brigade; that whilst engaged in such military service in the State of Merch, on the 1600 day of May 1861, he was wounded, injured or diseased as follows:
Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts ameadatory 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 county been allowed an invalid pension of Dollars, for the year 189. Sworn to find subscribed before me, this, the find the find the first of the disability, remine from the wound or character of these which causes the disability, and explane particularly the extent of the disability, remining from the wound or disease.
STATE OF GEORGIA,
do certify that I am well acquainted with
Affire State County.

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,
Fullan County.
personally appears B. L. Laub of Fullow
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of Dirth 1837; that he enlisted in the military service of the Con-
federate States (or of the State of Language) during the war between the
States, and served as ain Company 5 , of 67th Regiment
of Language Volunteers, Alas Brigade; that whilst engaged
in such military service in the State of Missippi, on the 6 day
of
Shat through left thingh, right
arm, and head, distablinghin
/
<u> </u>
December 10 1 10 1 10 1 10 1 10 1 10 1 10 1 10
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 7 a Chon county been allowed an invalid pension of
Tiply Dollars, for 189_7.
Sworn to and subscribed before me, this, the
17 day of the 1898. POST-OFFICE. HR. CULL
and some
Norm-State fully the nature of wound or character of disease which delines the disability, and explain particularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA,
+ alkan County.
I, Fr. Townselver 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
man miner

POWER OF ATTORNEY.

ST	ATE 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 1800.

Executed in presence of

SOLDIER'S PENSION.

INVALID

(For Those Aiready Enrolled.)

No. 57/4

Name W. th. Larrh RICHARD JOHNSON, WARBANT HANDED TO 1899. Amount, \$ 50 Disability

[L. S.]

POWER OF ATTORNEY.	
STATE OF GEORGIA, Hereby authorize M Callawry of Sulten Concells to receive and receipt for the pension paid hereon and request that he remit anne to	
Those Hereby brausferry tope said perision & the sa theren. CM Callans	te.
ay of A Coccub a 1890. Executed in presence of Executed in 25 (1800) The angle of 1890 and	,

INVALID

CORE SECTION 120. (For These Aircady Enrolled.)

No. 563

SOLDIER'S PENSION.

Disability Nichel's of Amount, \$ 50 County Z

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
cccione County.
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the day of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States, and served as a 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States, and served as a 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the State of 18 ; that he enlisted in the military service of the Confederate States (or of the States of the Confederate States (or of the States of the Confederate States of the Confederate States of the Confederate States of the Confederate States (or of the States of the Confederate States of the Confederate States of the Confederate States of the Confederate States of the Confederate States of the Confederate States of the Confederate States of the Confederate States of the Confederate States of
carm a suffer
Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1800. I have heretofore under said law as a resident of County been allowed an invalid pension of Dollars, for the year 189. Sworn to and subscribed before me, this, the M. H. H. Langle L
Note State only 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, County.
I. Ordinary of said County, do certify that I am well acquainted with. Ordinary of said County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this
and the state of t

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

personally appears 21 11 Ville
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 Ale 2 1833; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a 2000 of in Company 6, of 43 th Regiment
of fler (ca Volunteers, Movally 's Brigade; that whilst engaged
in such military service in the State of eleccenthic, on the 16 day
of Mary 1863, he was wounded, injured or diseased as follows:
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thigh dendering log substanting and
le seutially mileer, ale mounded
in night leg, weigning hip I love hail
of same leg.
Deponent makes application for the pension to which he is entitled for the year end-
ing October 20th, is. I have heretofore under said law, as a resident of
/) h 4
Sworn to and subscribed before me, this, the W. H. Land
28 / day of Dec 1899. POST OFFICE & Vilacela
There ce a comment described
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,
Steller County.
1. Comp / Hulley Dordinary of said County,
I. CC / / / Tech ley Ordinary of said County,
do certify that I am well acquainted with 10. H, Lee as 5 the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 de cececo = 1890.
Sitts 2 7 - 76 76 - 6 - 6 - 6 - 6 - 6 - 6 - 6 -
line)
Ordinary Fiel I en County.

POWER OF ATTORNEY.

STATE OF GEORGIA,	R OF ATTORNEY.		POWER OF ATTORNEY.	
	nty:		STATE OF GEORGIA,	
I,	hereby authorize		County,	
	of		I, hereby authorize	
to receive and receipt for the pe	ension paid hereon and request that	he remit same to		
	by		to receive and receipt for the pension paid hereon and request that he remit same	e to
at .		1	by.	
IN WITNESS WHEREON	, I have hereunto set my hand and se	eal this	at	
day of	_1901.	/	IN WITNESS WHEREOF, I have hereunto set my hand and seal this	
		[L. S.]	day of1902.	
			_ (L	s.]
Executed in presence of			Executed in presence of	
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Cfor Those Already Enr. No. ACC DISABLED SOLDIER'S PENS	1 2 3 1 3 1 SQ	E T		V.
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S	Name County Disabili Amount		Name (FOR Name Coounty Name (Name Coounty Name Coope Coounty Name Coope	
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FOR APPLICANTS HERETOFOREA

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For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Jullan County.
Personally appears A Ho Struck of Gullon
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 XII e 1833; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a form of the in Company 6, of & 3th Registrent
of Volunteers, Horall 's Brigade; that whilst engaged in such military service in the State of His , on the 16 day
of. May 186 3, he was wounded, injured or diseased as follows:
of. 77773 J, he was wounded, injured or diseased as follows:
Fredering log 2 utstantially and so
sombath useless also war de
in right les, injuries lis & laws
in right leg, myinger lup & laws
/ -
Deponent makes application for the pension to which he is entitled for year end-
ing October 26th, 1901. I have heretofore under said law as a resident of
County been allowed an invalid pension of
Dollars, for the year 1900. find
Sworn to and subscribed before me, this the W.X. Laurel
Sh 25 day of Strong 1901. Postoffice (titanto les
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, - 1200 R. Wilkinson Grain of said County,
do certify that I am well acquinted with Misderink the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 1901/
John R William
Affix Just Hard Hard Hard Hard Hard Hard Hard Hard
Ordinary County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.
Personally appears W. C. Lamb of TON
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 18.33; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the States, and served as a friendly in Company & , of \(\frac{\mathcal{H}}{3} \). th Regiment
of Ya Volunteers, Stoyall 's Brigade; that whilst engaged
in such military service in the State of Mill , on the 16 day
of Muy 1863, he was wounded, injured or diseased as follows:
<i>f</i> .
Wounded in Seft thigh + right leg
,
The same are a second of the same and the sa
AND AND AND AND AND AND AND AND AND AND
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
FULTONCounty, been allowed an invalid pension of
Dollars, for the year 1901. Sworn to and subscribed before me, this the
day of JAN 16. 1902 1902 Post-office
Nork. State fully the nature of the wound or character of disease which causes the disability, and explain
STATE OF GEORGIA,
FULTON County.
I Ordinary of said County,
do certify that I am well acquainted with / W 16 Land
the applicant in the foregoing affidevit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know 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 JAN 13 1902 1902.
(and) County County County County
Nora.—Fill all highes and of Company and Regiment. Nora.—All rouchers and affidavits must bear date after January 1, 1902.

POWER OF ATTORNEY.

STAT	EOF	GEOR	GIA,)					
			Co	únty.	}					
I,_						hereb	y author	ize		
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to rece							and requ		at he re	mit same
at						_by				_
IN	WITN	ESS V	VHERE	OF, I	have he	reunto se	et my han	nd and	seal thi	5
day of_				190			,		sear thi	
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CODE SECTION 125.	10	BL.	_		1/2	Regiment	-30	(7	LIN	WARRANT HANDED TO
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<u>e</u>					Name	County.	Disabilit Amount			
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State of Georgia

He the undersigned examing physician of the 11. 16. I am desire to muchas a more explicit statement. The Same's Shull wound and frequent spells of unconciousness lastons from 12 19 36 hours will relieved by medicine. "te has had two spells of in hird since tomorny last. They come when him without towning, and Sometimes when he is great Hor likely to ceres of he deers in a see week which requires effect or produces hend of How. His Shall around free titally renden bon unable to felicio any fasiness assention to perform any regular lato; Complet with his disalled leg ux would suy he is is notered incompetent for humand later. He news, goed without a Stick, as very land and the limb oftentimes become sire and more or less inflamed

June 1871

Trix de achon

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA

County.)
Personally appears WK Land 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 22
day of
federate States (or of the State of) during the war between the
States, and served as a furiate , in Company &, of 43 th Regiment
of ya Volunteers, Stovall 's Brigade; that whilst engaged
in such military service in the State of Mire, on the day
of May 1863, he was wounded, injured or diseased as follows:
Wound in left thigh + right lig
coma sic igg faight ight eg
AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
ending October 26th, 1903. I have heretofore, under said law, as a resident ofCounty, been allowed an invalid pension of
Dollars, for the year 1902.
Sworn to and subscribed before me, this the
day of JAN 1903. Post-office
112 11111111111111111111111111111111111
day of lettinon 1903. Post-office
Norm.—State fully the nature of the wound or character of disease which causes the disability and explain procedure by the verten'd the disability resulting from the wound or disease.
Norz.—State vally the nature of the wound or character of disease which causes the disability, and explain previously the extent of the disability resulting from the wound or disease.
Norm.—State fully the nature of the wound or character of disease which causes the disability, and explain precultify the extent of the disability resulting from the wound or disease. STATE OF GEORGIA,
Norm.—State fully the nature of the wound or character of disease which causes the disability, and explain precultify the extent of the disability resulting from the wound or disease. STATE OF GEORGIA,
NOTE.—State vally the nature of the wound or character of disease which causes the disability, and explain procedure by the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, \{
Norm.—State fully the nature of the wound or character of disease which causes the disability, and explain proceeding the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. July Cordinary of said County,
Norm.—State fully the nature of the wound or character of disease which causes the disability, and explain proceedings 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
Norm.—State fully the nature of the wound or character of disease which causes the disability, and explain prescularly the resent of the disability resulting from the wound or disease. STATE OF GEORGIA, County, John Drdinary of said County, do certify that I am well acquainted with WHO Launts the applicant in the foregoing affidavit, and am well satisfied that the statements made by
Norm.—State fully the nature of the wound or character of disease which causes the disability, and explain prescularly the retent of the disability resulting from the wound or disease. STATE OF GEORGIA, County, John Pordinary of said County, do certify that I am well acquainted with Who Laure the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to
State fully the nature of the wound or character of disease which causes the disability, and explain preventing the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County, John Printer County, do certify that I am well acquainted with WHA County the applicant in the foregoing affidavit, and am well satisfied that the statements made by
Norm.—State fully the nature of the wound or character of disease which causes the disability, and explain precluinly the extend of the disability resulting from the wound or disease. STATE OF GEORGIA, County, John County, Ordinary of said County, do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.
Sora.—State fully the nature of the wound or character of disease which causes the disability, and ceptain personal to the disability resulting from the wound or disease. STATE OF GEORGIA, County, John County, do certify that I am well acquainted with County, the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this day of 1903.
Sora.—State fully the nature of the wound or character of disease which causes the disability, and explain percuisity the rates) of the disability resulting from the wound or disease. STATE OF GEORGIA, County, J. 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 American American State Foreign County (1903).
Sora.—State (ully the nature of the wound or character of disease which causes the disability, and ceptain procedurity the extent of the disability resulting from the wound or disease. STATE OF GEORGIA, County. John Pordinary 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 1903.

state of Georgia 3 County of Foray the 3. De wohally appeared before me the undersigned Ordinary in and for said County John & Goolshy, who being duly sion. according to Law se go that he is personally will acgranted with William He Lamb, who now reside in Atlanta Georgia, whose application is herewith presented for a pension, and that he served with him in Company, & 13d Regiment of Ga Vol. in the Western army. and from his own personal knowled. edge. The said William He Land was wounded, by a minice ball, in one bey or knew and that the ball remained in his flesh for several years after the war terminated and caused him a great deal of trouble and suffering. This wound was sufficient upon him in the battle of Bakers lesule in Mersies spir. I have not been with him much since he removed to Allanda buch for . Eight or ten years after the war ended of was with him often and know that his

suffering was caused in a great

measure by the wound and other inglesial occains by him in the Levice It has been a long time vate in Company to. 43. Reg. Su since the event and I am not able Vol. and that while engaged in to state particularly the nature and such service the said William 26. I wound I have Lamb was wounded in the legs or no interest in the neavery of hips at the Battle of Nake in Creek his kension Mesuphippin . Deponent has been Sworn to and Subscriber personally acquainted with the Conbefore me this Fifteenth goin is yo dition of said Lamb for the last ten or twelve years but for ser ende of 10 Latour Jus County 3 the said William He Lamb resided in Frayth County not far from Depor menh dul Complainer. of outing from his wounder It has been so long since the occurrance that Georgia Bersonally appeared deforigh does not recollect the For sight County before me the undernature or otenh of said wounder Depought further says that he will County And 1010 & Gennett who being du-John & broker were both privales in by swori according to law. says that said Company, and thut he had no the is personally will arguans but interest in the recovery of applicants with William He Lamb. who applicatim for pension accompanies this Swon to and Subscriber A. J. Bonnett affillavik and that the said William before me this 18th day In Lamb entisted in the Confederate of April 1891 Ho & Harthus Brainary States service and served as a pri

NAME, Lamb, William H

YER 1891 COUNTY Fulton

WHEN AND WHERE BORN? Resident Ga. since June 27, 1885

SEARCH COLOR METALINE

RACK. Private

CONTANY AND KI SIMSHIT? Co E 43rd Regt. Ga. Vols Stovall's Brigade

NAME OF CAPTAIN AND COLOMEL? O P Woodliff, Lieut.

ACUNDED? Bakers Creek, Miss., May 16, 1863 - wounded twice - left thigh; right hip, ranging down the leg to knee; also received wound in top of head. Hip bullet remained in hip for plus, years, gausing great suffering and pain, also suffers greatly from head wound.

RELEASED.

WHEN IN PLANTS N. N. 2112?

IF NO. IT as at it takes been, we are each took

DULY, Park Att Audio?

NURGED.

WITNESSES. G F Woodliff, Lieut; D F Light; John L Goolsby, Andrew J Bennett

do dot

	Maimed Soldiers.
<u>i</u> '	1891.
	· Julia
	Lamb, William H.

COMPTROLLER GENERAL

Audited

Voucher No. 3/05

Amount \$ 50

For De's by body

Jame 13

Included in warrant No .__

issued to Treasurer.

1801

1891.

WARRANT-CLERK

Geo. W. Harrison, State Printer, Atlanta

applicant

STATE OF GEORGIA, Allanta, Ba MM 13 1891 EXECUTIVE DEPARTMENT. Mr. William H. Laub of the County 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 for such disability, the same being the allowance due for the year ending October 24, 1891. The Treasurer will pay the same and hold his receipt on this voucher and return same to

Executive Department for warrant.

By the Governor

SEC'Y EXECUTIVE DEPARTMENT.

Dollars,

Dellars, per above youcher, this 13 of 1891. 1 4. 76, Samb

State Dept. Public Welfare, Atlanta, Nov. 27, 1937. Samuel H. Lambert enlisted as a private in Co. A, 39th Regt. Widow's Application for Co. I, same regiment, dated Jan.-Feb. 1864, show him "Present, temporarily attached from Co. A." No later record. Under Act of 1910-As Amended by Act of 1919, and Constitutional Amendments of 1920 and 1937. Fulton County, 1895, pension application, shows he was wounded, date and place not stated, County Fulton and was on wounded furlough Name Mrs.Mattie L. Lambert close of war. Widow of ... Samuel Lambart. Date of Marriage Dec. 18, 1885

Date of Husband's Death April 26, 1898

Regiment 394 Ceft Month Curding Jug

(Washington record) .

Div.

CONFEDERATE DIVISION

STATE DEPARTMENT OF PUBLIC WELFARE

J KFFRI ES

Ordinary's

Certificate

THOMAS H Lambert

Mattie L.

of said State she represents herself to be,

1920; that I also

and that

Given under and their

of

by

before

8 5

(SEAL OF ORDINARY my hand and

INSTRUCTIONS

Certificate in vogue throughout the State any widow who is already receiving

is may be attached if blank spaces are insufficient, matried prior to January 1st, 1920, are entitled the made before the Ordinary of the County in which the ()rdinary shall swear applic nake to each of the question If not, prove you

and the

of them

AUG 19 1937

ne was wou e not state furkough Director Confederate Geoords olication, shows he blace not date and place not was on wounded fuse of war. Fublic . 27, 1 1895, Widow's Application OF PUBLIC WELFAR Dec, 18, 1883 t of 1910 -As Amended b d Constitutional Amend of 1920 and 1937. Semuel Lembert. CONFEDERATE DIVISION Wrs.Mattie L. Ful ton Date of Husba

Ordinary's Certificate

CTATE	OF	GEORGIA.
SIAIL	Or	GEORGIA.

Fulton THOMAS H. JEFFRIES, Ordinary of said County, do certify that I know Mattie L. Lambert the applicant for pension; that she is the person she represents herself to be, and that she has been, continuously, a bona fide resident Homer M. Cheshire citizen of said State since January 1st. 1920: that I also know the witness who swears to the same and the marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits, and that they are truthful and trustworthy and their statements are entitled to full faith and credit Given under my hand and seal of office this . 4 (SEAL OF ORDINARY) Fulton

INSTRUCTIONS:

- 1. Before any questions are answered%he Ordinary shall swear applicant and the witness in the following words: "You do rolemnly wrear that you will tree answere make to each of the questions asked you and the evidence you shall give will be the the property of the prop

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA

Fulton COUNTY

Personally appears before me, Mrs. Mattie L. Lambert of said State and County	8
and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the	
Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after	
being duly sworn, true answers to make to the questions propounded, answers as follow, to wit:	
SECTION I.	
1. What is your name, and where do you reside? (Give Post Office and County)	
Ars. Mattie L. Lambert, Rt. 5, Box 332, Center Hill, Atlanta, Ga. Fulton	•
2. How long and since when have you been, continuously, a bona fide resident citizen of the State	
of Georgia? come to Georgia during Civil war	
Give date, or year, of your birth Feb. 26, 1848	
3. (1) When, (2) where and (3) to whom were you married?	
Dec. 18, 1883, Atlanta, Ga. Samuel H. Lambert	
a. Have you married since the death of first and soldier husband?	
b. When and where did your first husband die? April 26, 1898, Atlanta, Ga.	,
c. Were you residing together when he died? Yes	
d. If not, how long had you resided apart?	
e. Are you now a widow?	
f. Have you or your husband heretofore been paid a pension by the State? Fulton County, Ga,	į
g. If so, when and for what cause were you or your husband placed on the roll?	
SECTION II.	
Answer the following questions if your husband was not a pensioner:	
1. When, where and in what Company and Regiment did your husband enlist as a soldier in	
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-	
try Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.	
THE PART OF A STANFARD OF THE PROPERTY OF THE PART OF	

2. When and where did the Commands of your husband surrender or discharge from the Service?	
3. Was your husband personally present with his Command when it was surrendered or discharged?	
Was your husband personally present with his Command when it was surrendered or discharged? He was not present, state specifically and clearly where he was?	
3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command?	
3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command? a. For what cause did he leave?	
3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command? a. For what cause did he leave? b. By whose authority did he leave?	
3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command? 6. For what cause did he leave? 7. By whose authority did he leave? 8. For how long was his leave of absence granted? 8. In what way?	
3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command? a. For what cause did he leave? b. By whose authority did he leave? c. For how long was his leave of absence granted? d. In what way?	
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3. Was your husband personally present with his Command when it was surrendered or discharged? 4. If he was not present, state specifically and clearly where he was? 5. When did he leave the Command? a. For what cause did he leave? b. By whose authority did he leave? c. For how long was his leave of absence granted? e. What was his ph-sical condition when he left his Command? f. What effort did he make to return to his Command? g. In what way was he prevented from going back to his Command? h. Was he captured by the enemy at any time?	

....County.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLAPTA

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

WHEREAS:

MATTIE L. LAMBERT, WIDOW OF SAMUEL LAMBERT,

has filed in this office an application for the Georgia pension allowed to widows of Confederate veterans; and it appearing that the late husband of this applicant performed actual militury corvice as a Confederate soldier and was homorably separated from much sorvice; and that applicant was merried to said soldier prior to January let, 1920, and that she was not remarried; it is, therefore,

ORDERED:

That said applicant be admitted to the pension roll of the State of Georgia for the month of Jenuary , 19 38, and thereafter; and that a copy of this order be sent to the Ordinary of said County.

This, the 27th day of December 1937

S. This "Pat" Giolen

Director, Confederate Division State Department of Public Welfare Court of Ordinary

FULTON COUNTY

STATE OF GEORGIA

CERTIFIED COPY OF

MARRIAGE LICENSE

AND

CERTIFICATE OF MARRIAGE

OF

MR. SAMUEL LAMBERT

AND

MISS MATTIE GUESS

Recorded in Book Recorded in Book Page 555

THOS. H. JEFFRIES

Ordinary.

State of Georgia

Fersonally before the undereigned authority now

says that he knows Mall. L Annbest and

knows that she was living with her husband Samuel H Kambert at the time of his death, that she has not remarried since his

House M Chelin

death and is now his dependent widow.

this 2.9 day of fully 1987

0.0 Ordinary, Fulton po. Ga.

MARRIAGE LICENSE

State of Georgia-Fulton County

To any Minister of the Coapel, Iudge of Dupertor Coart, Instice of the Peace, or other Bergon authorized to Dolemnite.

You are hereby authorized and permitted to join in the honorable state of Matrimony MR. SAMUEL LAMBERT and MISS MATTIE GUESS

According to the Rites of your Church, Provided there be no lawful cause to obstruct the same, according to the Constitution and Laws of this State; and for so doing this shall be your sufficient License.

RETURN THIS LICENSE, WITH YOUR CERTIFICATE THEREON TO MY OFFICE FOR RECORD

I hereby certify that MR. SAMUEL LAMBERT

and MISS MATTIE GUESS

were joined together in the HOLY BANS OF MATRIMONY

on the 18th day of December: 19 by me.

N. KEFF SMITH, Minister

State of Georgia,

ORDINARY'S OFFICE

Fulton County. B, B. ATLANTA, GA., July 29th, 1937 19

that the foregoing is a true copy of the Marriage License and Certificate of Marriage of
MR. SAMUEL LAMBERT

and MISS MATTIE GUESS
as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary, the

Given under my official Signature and Seal of the Court of Ordinary, the

A J King

POWER OF ATTORNEY.

STATE OF GEORGIA,

1895. . po : 1198 Samuel Landae

County

Geo W Harrison, State Printer, Atlanta.

POWER OF ATTORNEY

CTATE	OF	OFODOLA
SIAIE	\cup F	GEORGIA.

County.

hereby anthorize

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

Witness my band and seal this

Executed in presence of

OUESTIONS FOR APPLICANT

STATE OF GEORGIA.

Jule 1 County.

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) /2
- 2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? Gara, but there beggin berrie de 1111
- 3. When and where were you born? Sell it fill in the child.
- 4. Did you volunteer in the Confederate Army or in the Georgia Militin ? Control of the
- 6. In what company and regiment did you enlist?
- 7. How long did you remain in that company and regiment?
- 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 27 11 11 11 11
- 9. For how long a period did you discharge regular military duty?
- 10. When, where and under what circumstances were you discharged from service
- apy Dischare, lia at here or liameded the nonell
- of the Source days that they all have I got withthe.

 11. What is your present occupation? The source I got got got the source the source of t
- 12. How much can you earn per annum by your own exertions or labor? Ir I -
- 13. What has been your occupation since 1865 of mallion of the good to the
- 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? A Property of the second of the secon
- 15. What is your present physical condition and how long have you been in such condition? The second tion of the second tion of with behoumation of the weekless of in a to be and were
- to aliver sor b'art bucky dail de 120 hora . Liver how her and it in onthe 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"
- 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? It is the count.
- Mass Hanneled in list un plear He rilia. Miss, Rhow alise and let that ley soon men for vivolune, and smed, and feeled my this from
- untill o more there is a Thing to a truck and thentill as some inte
- 18. What property, effects or income do you possess? t'al Hould amount and that to more thanket it
- 19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any, did you make of same?
- 20. , In what County did you reside during those years and what property did you then return for taxation?
- 21. How were you supported during the years 1803 and 1804 2 1/4 1/4 1/4/ 1 Sounde Lin 1893 22. How much did your support cost for each of those years, and what perion did you contribute thereto
- by your own labor or income? level 8 . . work, partiale it in it wetters is in 23. What was your employment during 1893 and 1894? What pay did you receive in each year? Congrelietes in Southern agricultural here is Section in 1872
- about 8/2000 and in 1:14 about \$ 10:10 of an not will be well the 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? Home a line Given Home with The I doughter Morine 16 dears old, and I dan of reddie I dears old, - o hears a or feet int their own both at home

POWER OF ATTORNEY.

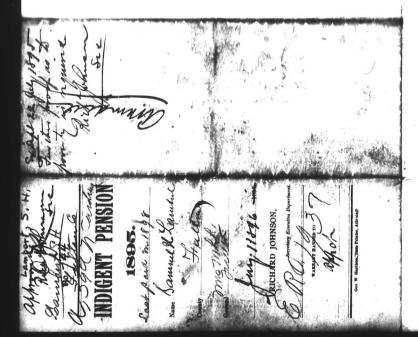
STATE OF GEORGIA.

County.

hereby anthorize

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

Witness my hand and seal this Executed in presence of



OUESTIONS FOR APPLICANT

STATE OF GEORGIA.

Julto:

of said State and County, desiring to avail bimself of the Pension Act approved December 15th, 1804, 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)
- 2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? 4. When and where were you born? bette to file to be of Contract
- 4. Did you volunteer in the Confederate Army or in the Georgia Militia? Constant to the Confederate Army or in the Georgia Militia?
- When and where did you enlist? Charafaley. A. C. 1. 1961
- 6. In what company and regiment did you culist?
- 7. How long did you remain in that company and regiment?
- N. If you were discharged from same and joined another, or if you were transferred to another, give an account of such discharge or transfer?
- 9. For how long a period did you discharge regular military duty?
- 10. When where and under what circumstances were you discharged from service? any Discharge, Na. at bend on Hannaded dur reginalling
- of the Sour order, that they at home I ere menthe.
- 12. How much can you earn per annum by your own exertions or labor? Gent to little
- 13. What has been your occupation since 1865 to mellering y from period of
- 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? To the Jone Lester lang le contribute 13. What is your present physical condition and how long have you been in such condition?
- with the kennichen It as user have die and to the rest men and be chier in brush bucky daily to been of but now for and to me noch
- 10. Upon which of the following grounds do you base your application for pension, via.: first, "age and poverty," second "infirmity and poverty" or third "blindness and 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? upon the third state whether you are totally blind and when and where you lost your sight? We the Seconds
- Mas hampled in left us plear the ridia. Mise, Rhow alis in alleded that leg seen need has vivodonice, so seemed, and offerled my while from
- untill & home become a Thypical Freets and touth as invalid 18. What property, effects or income do you possess? It is the history that I feel the land of the lan
- 19. What property, effects or income did you possess in 1893 and in 1894 and what disposition, if any,
- did you make of some? Head it fragest, assets as its sense
- 20. , In what County did you reside during those years and what property did you then return for taxation? I lined in Lutan bounds to und Ellerne de my art
- 21. How were you supported during the years 1893 and 1894: " Wate held Boarde Linky 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? a leant 8/2 . anch, par heade it in it inkeres is ing. 23. What was your employment during 1893 and 1894? What pay did you receive in each year? Por gelieber in Southern Squaretagal Bearing Freiend in 18%.
- about 8/2000 and in 1:14 about \$ 10:00 chain not while to wert there were 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 a Wife bing Home will

me I soughter" Molice to Leave old, and I San Freddie I dears old, I hear a suffert but their own work at home

DIGHT THIN AND ON THE
26. Are you receiving a pension under any law of this State, if so what amount and for what disability?
New orn to and subscribed before me this the 19 day of huc 1805. Applicant.
19 day of Thue 1895. Applleant.
on. L. Celhins Ordinary
of fulling County.
)
QUESTIONS FOR WITNESS.
STATE OF GEORGIA,)
County.
of said State and County, having been presented
as a witness in support of the application of Merricutel 5. Secretarial 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."
· · · · · · · · · · · · · · · · · · ·
2. Are you acquainted with the transfer to the applicant, if so
how long have you known him?
3. Where does he reside, and how long has he been a resident of this State?
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you
know this " L
and the second of the second o
5. When, where and in what company and regiment did he collist the contract the con
the state of the state of the state of the state of the
6. Were you a member of the same company and regiment? Lee totals in the Hell Marie Co ? 7. How long did he perform regular military duty, and what do you know of his service as a Confed-
erate soldier, and the time and circumstances of his discharge from the service?
of some be have a green, distiffed becomes the
and the same of the confidence of the same of the same of the same
8. What property, effects or income has the applicant? (Give your means of knowledge.)
 What property, effects or income did the applicant possess in 1893 and 1894, and what disposition.
if any, did he make of some?
10. What is the applicant's occupation and physical condition?
A Contract of the contract of
Wille Vigory to and con soil & it sugar Han the war
11. Is the applicant unable to support himself by labor of any sort, if so, why?
Chille amoste of Puliparto this tell Being
Summar & Green drive Durania Mily makers,
12. How was he supported during the years 1893 and 1894? Ly thene see Lance
13. What portion of his support for these two years was derived from his own labor or 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, 1694?
9 Cup such sich norngout Chiny cologa in Ashites
gills face the Land Vilantervel strenget is the same
15. What interest have you in the recovery of a pension by this applicant? Toma at all
Sworn to and subscribed before me, this the 19 day of Spul 1895. Applicant.
the 17 day of June 1895.) (Mich Applicant.
71. Drallmi
And the same of th

AFFIDAVIT OF PHYSICIANS

AFFIDAVIT OF PHYSICIANS.
Personally came before me Personally came before me Doth Rice 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: The has Chyonic Rheumstann which expect the whole Septem, he is I washe to do any hard work at all, he is a Very poor hear.
We further say on onth that the physical condition of applicant renders him unable to labor at any work or calling sufficient to carn 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 Mark 1895.) The caches and the caches are the caches and the caches are the caches and the caches are the caches and the caches are the caches and the caches are the ca
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA, County. I, White Claim County. I, Or Khe cellisman, Ordinary in and for said County, hereby certify that the applicant Sattement Mr. Lecturbuse resides in said County, and was a boun fide, resident of this State on the first day of January, 1894, and that the witnesses, viz. The further certify that the fore answering the foregoing questions, the applicant and each witnesses 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 returned for taxation in his name in 1803, of property, and in 1894, Witness my hand and seal of office, this day of Shallar Ordinary of Shallar Ordinary Ordinary Ordinary Ordinary Ordinary Ordinary

MOTE.

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 saked of you, and the evidence you shall give will be the whole tritle, so help you God."

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STATE	OF G	EORC	ìΙΑ, .		1		
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POWER OF ATTORNEY.

State of Georgia,	Į		
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(For Those Aircady Enrolled.) No. 384 INDIGENT INDIGENT 1898.	31	a z	Tram.
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	Car ?	WARRANT ISSUED // 3 ICHARD JOHNSON COMMISSION	WAERAST HASDED TURNERSON CONTERN.
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SS	Nашес County		4 . 3

3.00

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Ectaquation of the state of the
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 day of 1883; that he is years old and
by occupation a Farmer ; that he enlisted in the military service of the Confed-
erate States (or of the State of Alle 12 feet) during the war between the States,
and served for the term of teary 4 flare in Company &, of by th Regiment of
Hit Courties that his physical condition is as
March Condina ; that his physical condition is as follows: Chicanic Checumaterine
Tollows: Co // Leville Co // Leville Co
no of
that his property consists of the following items Marketing
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 Local Form
county been allowed a pension for the year 1896.
Sworn to and subscribed before me, this, the
11th day of Lanerary 1897.
Theredices y Ordinary.
STATE OF GEORGIA,
Sulton, County.
Sucroic County.
1. M. H. Heckey Ordinary of said County,
do certify that I am well acquainted with S. H. Lamber the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.
Given under my official signature and seal, this
day of January 1897.
Affix
your seal miles
Ordinary Dullone County.
Note—The blanks spaces must be filled.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fulton County.
Personally appears In January of Fullosi
County, State of Georgia, who being duly sworn, says on oath that he is a bond fill officen
and resident of said County and State, and has resided in said State continuously ever
since theday of 1883; that he is 58 years old and
by occupation a Famel that he enlisted in the military service of the Confed-
erate States (or of the State of Scarcia) during the war between the States,
and served for the term of & Gais in Company 97, of 39 th Regiment of
71-0; that his physical condition is as
Chronic Phinmatism-
All the control of
that his property consists of the following items
,
of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and
that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1898. I have heretofore as a resident of
county been allowed a pension for the year 189 7
Sworn to and subscribed before me, this, the
Sworn to and subscribed before me, this, the 13 day of Jan 1808.
1808.) 1808.) Ordinary.
,
State of Georgia,
Fulton County.
I, HITT Julsey Ordinary of said County,
I, MI Julista do certify that I am well acquainted with 19. Sant Section the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Given under my official signature and seal, this
day of
All Millians
Ordinary Feelle County.
NOTE - The blank spaces must be filled,

STATE OF GEORGIA,	OTATE OF GEORGIA
Hackori County.	Fulton County.
Personally appears S. H. Kambert of Kulton	Personally appear of January of Fullow
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen	County, State of Georgia, who being duly sworn, says on oath that he is a bond file officen
and resident of said County and State, and has resided in said State continously ever since	and resident of said County and State, and has resided in said State continuously ever
the day of 1813; that he is 72 years old and	since theday of 1883; that he is 58 years old and
by occupation a Farrico; that he enlisted in the military service of the Confed-	by occupation a Fames that he inlisted in the military service of the Confed-
	erate States (or of the State of Scarge 2) during the war between the States,
erate States (or of the State of Selrigiac) during the war between the States,	and served for the term of 4 4cars in Company 37, of 39 th Regiment of
and served for the term of Many 4 Jean in Company , of of th Regiment of	7. C. ; that his physical condition is as
Which Condina that his physical condition is as follows: Chicanic Checinaterin	follows: Chronie Prizemation-
20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	No. True
	that his property consists of the following items
that his property consists of the following items Mathing	
of the value of Dollars, that by reason of his physical	of the value of Dollars, that by reason of his physical
condition and poverty he is unable to support himself by his own exertion or labor, and	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.	that he receives no pension but the one herein applied for.
Deponent desires to participate in the benefits of the Act, approved December 15th,	Deponent desires to participate in the benefits of the Act, approved December 15th,
1894, and the acts amendatory thereof, and makes application for the pension to which he	1894, and the acts amendatory thereof, and makes application for the gension to which he
is entitled for the year 1807. I have heretofore as a resident of	is entitled for the year 1898. I have heretofore as a resident of
county been allowed a pension for the year 1896.	county been allowed a pension for the year 180
Sworn to and subscribed before me, this, the	Sworn to and subscribed before me, this, the day of fam 1898.
Sworn to and subscribed before me, this, the	13 day of fang 1898.
day of (all 1891.)	Mary Ordinary.
Till decesey Ordinary.	Oldmary.
STATE OF GEORGIA.	State of Georgia,
	Full on County.
Sulton, County.	
I. M. H. Heckey Ordinary of said County,	I, Halsly Ordinary of said County,
204/4-1, -	do certify that I am well acquainted with A. Fant her - the
do certify that I am well acquainted with O, J, X Corn beach the applicant in the foregoing affidayit, and am well satisfied that the statements made by him	applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be	in his said affidavit are true, and I know he is the individual he represents himself to be
and that he resides in this County.	and that he resides in this County.
11/2	Given under my official signature and seal, this

2) Wildering

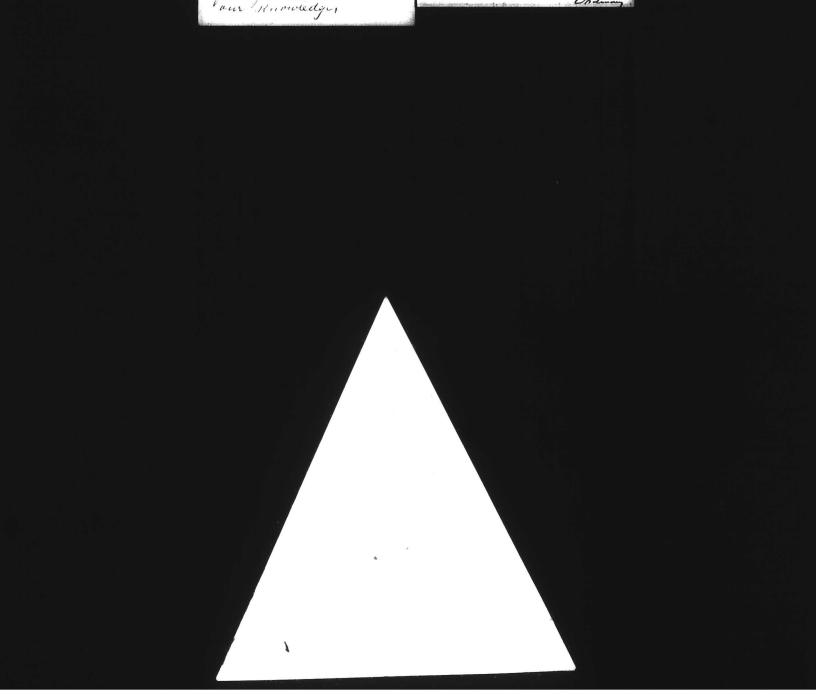
Novz-The blanks spaces must be filled.

Affix your seal bere. day of Jan 1898.

Ant The County County.

Note - The blank spaces must be filled,

day of January 1897. Mitthung millereny Ordinary Frell County. Ordinary Rullon County. NOTE - The blank spaces must be filled, Novz-The blanks spaces must be filled. **** BIGHT PRINT AND, OR HAD COPY **** Atito of bornial The min purther add, that in land (out of in our aprinion the said Alleant would sunable to sufficient himsein without the to we willed the service ino most in a Catter Suclos to the the with a wellen and else where and help to at a his to the rest to have ment support him ha collected a price of for I'm have shither of us any Leaven will been our con intest in this denine. justing inostrato an inonfort stunk only in furtice that he find ; miles had in lin, Tournal, ne who income to dine . A11604 i'men carrent in such line us in is with lot it is little work. F.M. lantrell The is in great such of honey from to and subsculed Lyon and no our oficion, shoul me & a cutify that the witness be accorded person; be is on buttfal + satisfied to belief certainly, the most entitled to it This Out 24 1895 . M. & balking of any commant within Ordinary our Knowledge,



Maybefore STATE OF GEORGIA State since January 1st, 1920; he represents himself to be, and that he has been, statements are entitled to full faith and credit. Edartmen SOLDIER'S APPLICATION (SEAL OF ORDINARY.) fore signing the foregoing affidavits, and the 1925 wer. Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920. my hand and official seal of office this ? we: that better them are now residents of said County and were duly sweetly the territory and their and trustworthy and their trustworthy and trustworthy Commissioner County Feel &U Ordinary's Certificate COUNTY. d the Ordinary shall swear amplicant and the witness in the following words:

at the Ordinary shall swear amplicant and the witness in the following words and the evidence of the questions taken you and the evidence of the following pages are insertioned.

The Ordinary of the County is presented to the Ordinary of the County is presented to the Ordinary of the County is presented to the Ordinary of the County is presented to the Ordinary of the County is presented to the Ordinary of the County is presented to the Ordinary of the County is presented to the Ordinary of the County is presented to the Ordinary of the County is presented to the Ordinary of the Ordina the applicant for pension; that he is the person continuously, a bona fide resident citizen of said , Ordinary of said County, certify that I know The you we it. truthful and trustworthy and their C. E. McGREGOR. Commissioner of Pensions. Ordinary County

The force any describes are associated by Collems and the split over the policy of the control o (SEYF OF ORDINARY.) Conucy Sworn under my hand and official seal of office this ' i day of (1) Ordinary statements are entitled to full faith and gredit. : :61 ween trine sprince; that both of them are now residents of said County and were daly sworm by will be yalrowished ben folding he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said mis don't min the applicant for pension; that he is the person ~7.19 J. x 11.001/11 would I had County, certify that I know, nox mil STATE OF GEORGIA, Ordinary's Certificate Under Act of 1910—As Amended by Act of 1919, and Constitutional Amendment of 1920. SOLDIER'S APPLICATION \$ 00 w E McGREGOR Commissioner of Sense

THE PROPERTY OF THE PERSON OF APPLICATION CONFEDERA ò SOLDIER'S jo pu

Ordinary's Certificate

Ordinary of said County, certify that I know the applicant for pension; that he is the person he represents himself to be, and that he has been, continuously, a bona fide resident citizen of said
state since January 1st, 1920; Mark also known and their since January 1st, 1920; Mark and Sandary and Sandary and West and Sandary and West and Sandary and Sanda
statements are entitled to full faith and credit. Sworn under my hand and official seal of office this Y day of County (SEAL OF ORDINARY.) of County
Instructions: Instructions: Instructions:

Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
 You do sedemnly aware that you will true answers make to each of the questions asked you and the evidence
 you give shall be the whole that that he lift blank spaces are insufficient.
 Additional affidavits must be a subject of the County in which the applicant or witness resides and
 must be erritable; or Ordinary.
 Fill out the lock 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.

FILLTON

COUNTY.

of said State and Personally appears before me. W. M. Lampkin reisonany appears octore me. W. M. Lampkin of sand 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

- 1. What is your name and where do you reside? (Give County and Post Office)
- W. A. Lampkin, 57/Tumlin St., Fulton County
- 2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All my life
- 3. Did you enlist in the Army of the Confederate States, or in the organized militia, of this State from 1861 to 1865? the first of the year of 1864
- 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.) Athens, Ga. 23rd patt. Ga. State Guards, Maj. F.W.C. Cook, Capt. DuBose
- 5. How long did you remain in the actual military service with said Company, and Regiment? (Give date of discharge.) until the surrender
- 6. When and where was your Company and Regiment surrendered or discharged from the Service?
- At the close of war, Co. in Savannah, on furlough in Athens.
- 7. Were you personally present with your Command when it was surrendered or discharged?
- 8. If you were not actually present, state specifically and clearly where you were on fur lough in Athens, on duty.
- a. Where was your Command when you left it? At Savannah
- b. When did you leave the Command? about thirty days before the surrender
- c. For what cause did you leave? To collect arms
- d. By whose authority did you leave? Maj. Cook
- e. For how long was your leave of absence granted? In what way? Thirty days, for bu si ness
- f. Why did you not return to your Command after leave expired? War was over
- g. In what way were you prevented?
- b. 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?

Sworn to and subscribed before me, this the

1924 11th day of William R Market C.C., Ordinary

County

(SEAL OF ORDINARY.)

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

C. E. McGREGOR.

Ordinary's Certificate

TATE OF GEORGIA.

Momas

. Ordinary of said County, certify that I know

the applicant for pension; that he is the person

he represents himself to be, and that he has been, continuously, a bong fide resident citizen of said State since January 1st, 1920; that I also knowswe is to the service; that well of them are now residents of said County and were duly sworn by se before signing the foregoing affidavity, and they are is truthful and trustworthy and their statements we entitled to full faith and credit.

Sworn under my hand and official seal of office this 8 day of June 1923

(SEAL OF ORDINARY.)

Instructions:

- Before any questions are answered the Ordinary stall swear applicant and the witness in the following words:
 "You do solemnly swear that you will true answer, make to each of the questions asked you and the evidence jou give shall be the whose truth. So help you God."
 Additional affidavits may be attached if blank spaces are insufficient.
 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.
 Fill out the back of the application carefully.

of Per

SOLDIER'S APPLICATION CONFEDERATE

Under Act of 1910—As 1919, and Constituti of 19

Ordinary's Certificate

STATE OF GEORGIA,

Banks W.M. Thomas COUNTY

. Ordinary of said County, certify that I know

C. E. McGREGOR.

the applicant for pension, that he is the p

he represents himself to be, and that he has been, continuously, a bona fide resident sitizen of said J.S.Echols , 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 1920 Ordinary

(SEAL OF ORDINARY.)

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.

Questions of Witness as to Service

Questions of Witness as to Service	Questions of Witness as to Service
STATE OF GEORGIA,	STATE OF GEORGIA,
COUNTY.	Do. 2 chals of said State and County is hereby presented
of said State and County is hereby presented	J. S. Echolo of said State and County is hereby presented
as a witness in support of the application of Lampkin for the pension	as a witness in support of the application of Larger in for the pension
provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendment of	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,	1920, in said State, who, after being sworn true answers to make to the questions propounded.
answers as follows, to-wit:	answers as follows, to-wit:
1. What is your name and where do you reside" . 3. 3. Schols, and reside in Banks	1. What is your name and where do you reside? J.S.Echols and reside in Banks County
2. How long and since when have you known Lamp kin the applicant?	2. How long and since when have you known Lampkin the applicant?
The Johns the Sival Har.	Sixty five years, singe I800.
3. Where does he now reside, and since when has he been, continuously, a bona fide resident of	3. Where does he now reside, and since when has he been, continuously, a bonn fide resident of
this State, and how do you know? Attachta, Ja.; has regided in Ga. all of his	this State, and how do you know? Atlanta Ga. and been a resident of Georgia since 1800 and E have seen him all along during this time.
I. When, where and in what Company and Regiment did L. Lumpkin enlist?	4. When, where and in what Company and Regiment did L. Lisiq kilm enlist?
(Give date and place)	(Give date and place) About first of your 1864; Athens, Ja.; Japt. Daboso' Company, Major P. J. J. Soot, Sird Battalion Ca. State Canals.
5. How did you obtain your information of this Service? I I naw him soon after a smilleted, and frequently during his service.	5. How did you obtain your information of this Service? By seeing him at different times in the service. I saw him soon after he enlisted.
6. How long within your own personal knowledge did he perform actual military service with	6. How long within your own personal knowledge did he perform actual military service with
this Company and Regiment? (Give dates.) intil the Jurrender.	this Company and Regiment? (Give dates.) Intil Surrender, April, 1 6b, was 04 Abhons, 2a., on furlough which was granted about 10 days before parrender.
7. When and where was his Command surrendered or discharged? (Give date and place.)	7. When and where was his Command surrendered or discharged? (Give date and place.)
A. Vanach, St., at end of the mar.	Javannah, Ga.
8. Were you personally present when it was sur endered? No, but saw him so, n after.	8. Were you personally present when it was sur endered? No, but saw him soon after.
9. If not, where were you? on my way home from Jurrender. and how	9. If not, where were you? On my way home after surrender. and how
came you there? LB regularly discahrged.	came you there? Was discharged and sent home.
10. Was the applicant personally present with his Command when it was surrendered?	10. Was the applicant personally present with his Command when it was surrendered? for production
11. If not, where was he? Athons, Ga. and how come him there? On detail or Jordough, to collect arms.	11. If not, where was he? Libers, Sa, and how came him there? Furlow had.
12. When, where and for what cause did he leave his Command? (Give date.) About one month	12. When, where and for what cause did he leave his Command? (Give date.) Loout 20
Suffered the end of the Mar, to sollect arms, Command at Savannah, Ga. By whose authority did he leave his Command? Major Cook.	days before Surrender, on \$0-day furloush, to visit his home. By whose authority did he leave his Command? Officers of Somplay.
and how long was he granted leave? Thirty days	and how long was he granted leave? Thirty days. How do you
know all that you have stated to be true? If of your own knowledge, state clearly and specifically by having frequently seen applicant in the service and very soon after	know all that you have stated to be true? If of your own knowledge, state clearly and specifically By having seen applicant in the serviceandsoon after the surrender.
13. In white the in you know of your dwn know know know know he was he protected from neutral figures and the contraction of th	13. In what way, if you know of your own knowledge, was he prevented from returning to his
Command? (State clearly and specifically.) Logve had not expired.	Command? (State clearly and specifically.) Furlough had not expired.
14. What effort did he make to return to his Command and how do you know this?	14. What effort did he make to return to his Command and how do you know this?
15. Was applicant captured as a prisoner? No. if so, when and where?	15. Was applicant captured as a prisoner? No. if so, when and where?
in what prison was he held?	in what prison was he held?
when released?	when released?
Sworn to and subscribed before me, this the day of June 1925 Witness.	Sworn to and subscribed before me, this the day of factorial subscribed before me, this the witness.
of Re-/c County	of 13 County
(SEAL OF ORDINARY.)	(SEAL OF ORDINARY.)

H. H. W.M.,
For Fulton County

1921

Application for Pension Due Deceased Pensioner (UNDER ACT 1919) (To pay expenses of last illness and funeral)

(To pay expenses of last liness and function)

For W. W. Jamps Gun.
Date of Death. 1928

Amount \$/00

Approved and ordered paid of

Dec. 20, 1928

JOHN W. CLARK,

Commissioner of Pensions.

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

Pa

H.M.Patterson & Son

96 North forsyth Street
ADJOINING CARNEGE LIBRARY
Atlanta, Ga.

October 28, 1928

Funeral expenses of Mr. William M. Lampkin 301 - 11th St. N.W.

22.00

To our complete service including casket

156 50

and

County of Fulton) State of Georgia)

Personally appeared before me F.W.Patterson who on oath states that the above account, funeral expenses of Mr. Willium M. Lammkin of 301 - 11th St. N.W., are true and correct.

Sworn to before me this Disk 3 1928.

Green Ringerst

GEORGIA. FULTON COUNTY.

Personally appears W. M. Lampkin, who deposes and says that he has made diligent search and has been unable to find any one as a witness to his service in the War of 1861 to 1865.

Ir. W. xdauphin

Sworn to and subscribed before me.. this 11th day of August, 1924.

arling in certain

State of Georgia Fulton County.

ersonally appeared before the undersigned of-fiwer authorized to administer oaths, Oscar Brown, who on oath says that he remembers having prepared, as Assistant Ordinary of Banks County, pension application papers for Mr. W. M. Lampkin some twelve or fifteen years ago; and as he remembers they were complete, he having made out many applications for pensions in Banks County. He Further says, as he remembers, that Mr. Lambkin's application. after having been completed, was placed in a batch of six or eight other applications and turned over to the Ordinary, . F. Hill, of Banks County. That the Ordinary misplaced this application, or did not return it from the Fension Office in Atlanta when he went there fo have the applications mentioned approved.

SWORN TO AND SUBSCRIBED before me, this 17th. day of July. A. D. 1925.

John Watelank

Oscar Brown Banks County

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)

Ful Bons

GEORGIA.

Personally before me, the Ordinary of said County, comes & Sea Miller wit
of said County, who, after being sworn, on oatl
was on the Pension Roll of said County at the time of death, which occurred in
County, in this State, on the 27 day of Lov 63,
and that pensioner left no widow surviving, and no estate of any value sufficient to pay these forms
expenses, which amounted to the sum of \$1965, per sworn statements fully and completely
ITEMIZED hereto attached.
Sworn to and subscribed before me,
When R. Warbert Ordinary A. Lu Klieber
Fullou 3 County
(Seal of Ordinary)
CERTIFICATE OF ORDINARY
GEORGIA, Fullow County.
I. This H. Jeffing Ordinary of said County, do certify
that I personally know R. dee thele with H. m. Potlerson 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 with fampair while in life and that this was
the same person whose name appears on the Pension Roll of Fulton County, and
was paid a Pension of The Was paid a Pension
in said County for 1924, 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 at-
tached hereto.
Given under my hand and official seal, this
(Seal of Ordinary) / pas Suffrie Ordinary
(Seal of Ordinary) / name of the country Country

1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date. 2nd. Each account must be sworn to before the Ordinary, and in the following form. (Do not use the terms: "just, true, due, unpaid," etc.)

"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may , who died without owning sufficient property to pay this bill.

3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated. 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.

5th. Return this application, and attached bills, with your final settlement, to the Pension Department.

6th. Ordinary should see that the back of this blank, when folded, is filled out.

We He Lampicine

DIEAPPROVED, because no proof at all is submitted. Record should be saked for-

No Be Parris.

COMMESSIONE OF PERSIONS.

GEORGIA, FULTON COUNTY.

Personally appears W. M. Lampkin, who deposes and says that he has made diligent search and has been unable to find any one as a witness to his service in the War of 1861 to 1868.

Sworn to and subscribed before me,

this 11th day of August, 1924.

arthus Rucerbus

Sworn to and subscribed before me, this 11th day of August, 1924. arthus Runcerbut
c. c. ordinary.

Oglettan Widow's Application Marsallville Who Lost a Husband During War as a Soldier, Remarried and is Now a Widow. N-1. me den 1,1864 ENTERED ROSTER OFFICE J. W. LINDSEY,

riage to Sa uell bandater, the water he died entring that	5 Teary H
"Idow. " The Lindson, Son or bandons, 19 1	Widow's Affidavit Who Lost Husband Killed During War and
36 7 8	Afterwards Married, now a Widow.
E GI BOO 3	STATE OF GEORGIA,
2 2 2 4	Fultan County.
	Personally before me comes hantha J. Juneunts of said county who after being sworn on oath
5-15-21 5-15	says that she became the wful wife of the Menter on the day of Chill 3 and
	that he did on theday of18.65 enlist in Company B 22 TRegiment
	and was on the
	That on the 24 day of Febr 1870 she was married to Q. F. Lancaster of
The second section of the section of the section	County, and that on the 20 day of how 15% in the county
	of State of Guerrain, the said and Surrents died and that this deponent is now a widow.
	That she was on the 4th day of November, 1908 or at the death of her last husband left in the use possession and control of the property. Stated in schedule (A)
	acres of land cash value of
2 E C E C E C E C E C E C E C E C E C E	Horses or mules
2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Hogs and cows and other stock
	actual income and savings
Widow's App Who Lost a Husband Du Saldier, Remarded as Regiment Regiment Regiment Name of Last Husband Na	
	Total
Processing West Annual Street, Albandary of Transmissions	SCHEDULE B.
	That since the 4 of November, 1908 or the death of her husband, she has sold or given away the following property of the eash valueas follows.
1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Constant of the cash value
	Total value
N.	and that the proceeds were disposed of
	SCHEDULE C.
	That she is now in the use, possession and control of the following property at the cash value attached
	acres of land of the cash value. Horses and cows of the cash value
	Hogs and other stock
	Cotton and other farm Products, worth.
·	Total value of all property
	Total value of all property and that the valuation of all of said property, is styled at its true cash coluct.
	Walter R Sworn to and subscribed to by me this may May of the data carter
	Fullon County
	and the second s
	Affidavit of the Witness to the Service and Death of Soldier
	Husband and Her Marriage.
	OTATE OF GEORGIA,
	Meacan County.
	Personally before me come . 11/3 + 2 who after being duly sworn on oath says that he
	knew Mandy Jones M. Mary that he enlisted in Company Que Regiment of did the Be veterans on the Lord Description day of About and 186 4
	and that on theday oflshe was killed or died as a result of the injury received
· ·	while in line of duty as a soldier, in the Confederate army, and that he knows Mrs.
	sound how when he high the Commands, but I supposed he was

Know when they were mor	. 7.
husband were married on theday of	the applicant. She and her said s
nat he knows that the said	
19 to one and	married again on the day of .
day of 19 and that the	that her said husband died on the
of De @ 1918)	applicant is now a widow.
	Swarm to and subscribed before me this
Le & Brady	The same of the sa
	of Drawsky County 1
5.	
Property and its Value.	Affidavit of the Witness to
	STATE OF CEOPCIA
	STATE OF GEORGIA,
	County.
ter being sworn on oath says that they are	
I that they know Mrs / and	Free Holders of said County of
	that she was on the 4th day of November or at the death
sion and control of property at its true cash	
-	value, as follows
	SCHEDUL
	Lands whose cash value
	Horses mules
	Cows hogs and other stock
	Money, notes and accounts
	All other properts
THE ROLL WILLIAM STREET	
	. Total each value of all property
_	SCHEDUL
weath over last husband she has sold or	We kp-w that since the 4th November, 1908 or
	given away property of the cash value of to-wit.
	land worth
	Horses and mules
	Cows, hogs and stock of all kind
	any and all other property
its full cash value and was disposed of	Total cash value and we know that the proceeds of this property were.
to the tast value and was disposed of	State fully.)
**	
•	SCHEDULE
ion and control of property of the actual	We know that the applicant is now in the use,
	eash vilue as follows, to-wit:
	Land of the cash value of
	Horses and mules, cash value of
7 4	, Cows hogs, and other stock
the comment of the second	.Wagon and Buggy
The state of the s	
	Other personal property
	Other personal property Money notes and accounts

County

	O	RDINA	RY'S	CERTI	FICATE.		
STATE OF	GEORGIA		1,		TOPITE.		
applicant for renis a bona fide cont	ion and that I	linary of s	aid County	person that	tify that I kno	s herself to be, ar	th
That I also						d's marriage, and	the deat
of Husband, and I county, that all of they are truthful a That the The amount of 190 Read this not	said persons wand trustworthy Tax Books of Tax my hand ha	persons Tul	sworn by rand their st land their st land. Cour r 1909	ne before si atements a ity, shows	gning their re- re entitled to f	dent and free-hol spective affidavitual faith and cred water returned p for 190 ? y of 34.	s and tha lit. roperty t
give will be the whole 2. Additiona 3. All affidav 4. Only wido	re truth. Be help: I affidavits may I its must be made was whose husban	you God." be attached before the ids died fro	if blank spi ordinary of om wounds or	each of the questions are insu- the County of injuries, rec	uestions asked ficient. the residence o cived in line of c	witness in the follo- you and the eviden f the person to be sy luty before 26 Apri e who know it, or	ce you shai s orn I 1865, sinc
					,		
				¥		J.	*****
				x		January and American	****
					,	3	******
6.					,	January	
4				 	· · · · · · · · · · · · · · · · · · ·	A direct de angle comme	
6.		 .	¥		,	2	*****
4		 .	× .				***************************************
4		 .	y		, .		

Actual income and savings Total cash value of all property. Sworn to and subscribed before me this. 4 Luciaster, Voints J. (mg.) Julton Co. 447. For Kulkon TO PAY-1932 State of Mahama | Before me & 11. Application for Pension Due Deceased Pensioner Lee County Spokuson, a yestice (UNDER ACT 1904) (To pay expenses of last illness and of the Pace in "4s for vail county heromathy funeral) Thot Joffice Ordinary appeared Him ha bello, who hoing duly sworn deposed we (bays That she was Date of Death June 18 1937 present at The marriage of Martha & Amount \$ 127 Larvaster and U. To Successer, The north day Approved and ordered paid of Freby, 187; and further she knows That U.T. Lewcashes died with days november, 1588 in the county of I lot station Georgia, 1,100 1. d. Sells PAID TO ORDINARY ON THIS CLAIM: Sworn to and Suksoribed, FUND FROM WHICH PAID before me this 12 1 lay of Dec 1916 Ja Johnson 12700 Justice of the France

Wagon and Buggy
Other personal property
Money notes and accounts

A Certificate

STAKE	OF GEORG	IA County o

IN RE: Expenses last illness and funeral And town of Language

This is to certify that from an examination of the records in my office, and from personal knowledge, or inquiry, it is ascertained that this pensioner:

1. Died inside of the State of Georgia;

2. Left no estate of any kind or value, sufficient to pay these expenses.

Received of Thomas H. Jeffries, Ordinary, \$127.00, for the account of Maitra & Lucieite _. This amount has not previously been paid and is now owing to me.

March ____ 1935.

CHARING, GA.

and the second of the second of the second and a second sec ing of the second second second second the same property of the section of the section in the year of our Lora Flighteen Hantrel and Sixty Inche. finer to and but or less to later a

me time law and of Javana, 1966.

Ollogere has ha Sells

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, Lueton County,
Personally before me, the Ordinary of said County, comes 3/3 de source
of said County, who, after being sworn, on cath
says that he knew Mandalan Jacob Staid County, and that said Pensioner
was on the Pension Roll of said County at the time of death, which occurred in
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
ITEMIZED hereto attached.
Sworn to and subscribed before me,
When Blundle Ordinary Bold Liver

CERTIFICATE OF ORDINARY

GEORGIA, County.	
I, Ordinary of said County, do certif	fy
that I personally know & Balance Hun attended who is a residen	'nt
citizen of said County, and that said person is of truthful and trustworthy character, entitled to fu	all
faith and credit; that I also knew Makley Square shile in life and that this wa	as
the same person whose name appears on the Pension Roll of Tuello County, an	nd
was part a Pension of Thirty (\$39.) Dollar	ra
in said County for 1922, and I now believe said pensioner to be dead; and that the instruction	ns
at the foot of this voucher have been carefully observed in making up this voucher and the bill	lls
which are attached hereto.	

Given under my hand and official seal, this (Seal of Ordinary)

(Seal of Ordinary)

.. County

INSTRUCTIONS

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemised form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
- "The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may 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.

it ele ala promission de les addinage of alter within to become a to see the constitution of April the Ani, in the year of our Lors Fighteen Handred and Sixty Three. fivore to and backers 31 to Sione as tare late on, of January 1904. Logere has Ma Sells

INSTRUCTIONS 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

2nd. Each account must be sworn to before the Ordinary, and in the following form:

"The above and foregoing account is rendered for services in the last illness (or funeral expenses, as the case may, 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.

3249 TA 11 - - C.1110 The a / ret to racker hatablished lane

H. M. PATTERSON & SON

· Spring Hill at Jenth

ATLANTA, GA.

For Fineral Expenses of -Sold to Mrs. M. J. Lancaster

June 20, 1932

To Our Complete Service Including Cask t \$447.00

SPECIAL DISBURSEMENTS FOR YOUR CONVENIENCE

Two Musicians

State of Georgia) County of Fulton)

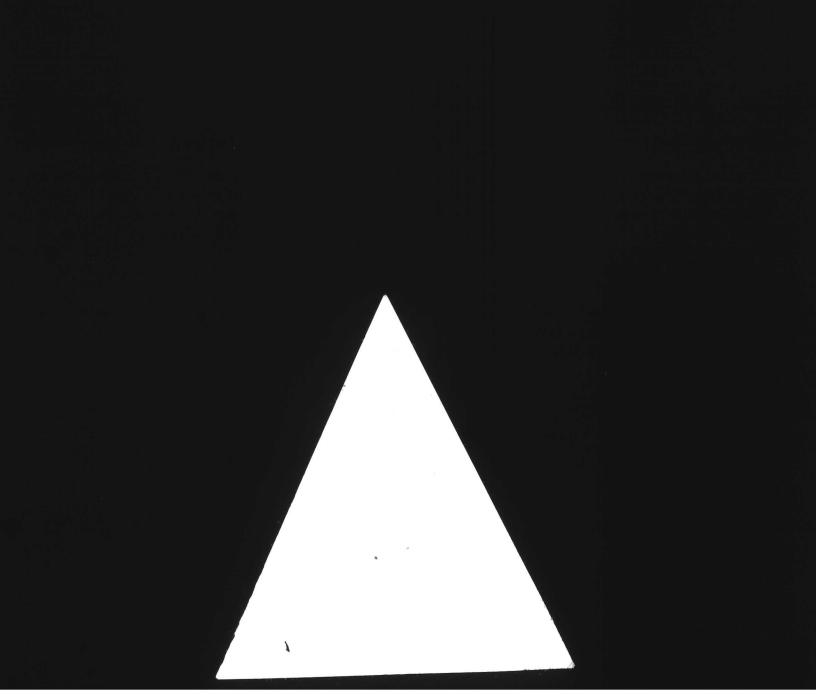
Personally appeared before me F. W. Pattergon, who on oath states that the above account as true and correct, all of the above items were furnished directly by H. M. Patterson & Son, and that payment therefor has the payment therefor has the payment therefor has the payment therefor has the payment therefor has the payment therefor has the payment therefor has the payment therefor has the payment therefor has the payment therefor has the payment the payment therefor has the payment the paymen

fattimin of Firm of H.M. Patterson & Son

Sworn to before me this 5 km day of July, 1932.

malla R. mote

Notary Public, State at Large, Atlanta, Ga. My Commission Expires June 28, 1936.



Land, J.J. Julion Country
CODE SECTION 1254. (FOR THOSE ALBEADY ENROLLED.)
, No. /2 F
INDIGENT
SOLDIER'S PENSION
1903.
Name Stand County Gutton Servall Co. L & Regiment SC
WARRANT ISSUED
//20 1908.
JOHN W. LINDSEY, Commissioner of Pensions.
WARRANT HANDED TO
Geo. Harrison, State Printer, Atlanta.
no cata

POWER OF ATTORNEY.

STATE OF GEORGIA,

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

Executed in presence of

Witness my hand and seal, this ____day of____

[LS]

POWER OF ATTORNEY

	FOWE			
TATE OF	GEORGIA,	J		
		County.		
1.		hereby author	ize	
		of		THE STREET CO. LEGISLOSIUM
o receive and	l receipt for the	pension allowed and req	aest that he re	emit same to
		at		* X * 100 *
y.		*		
Witness in	y hand and scal, th	is day of		1903.
Executed i	n presence of			[v. s.]
		1. 175		
MARCADY EMPOYER)	IRNS PENSION	fatter Toertall	JOHN W. LINDSEY, Commissions of Francis.	WARRANT HANDED TO WARRANT HANDED TO WARRANT HANDED TO ON LATES. MARKET MAN CONTACT MAN CONT

		-	OW.	ER U	AI	IORI	NEY	•		
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		I ,						1	ereby	authorize
					of					
to nece	sive and	receipt	for th	e pension	allowed,	and re	quest 1	that he	remit	same to
					at					
by										
W	VITNESS	my hand	l and sea	l, this		day of	1.			1904.
										[L. S.]
E	xecuted	in the p	resence o	of	τ					, ,
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7 3		7	<u> </u>	1 1	2				1	li.
2 5		I	Ź	: 1	B	9	. 3	Υ,	WARRANT HANDED TO	W. Harrison, State Printer, Atlanta
2 4 F	2	N E	ZE Z	7 3	ent.	WARRANT ISSUED	13	JOHN W LINDSEY,	T HANDED 1	- Jaker
READ	3	GE	2	2 4	Regiment	VT IS	11	E	HA	State
N S		IQ R		9	N. C.	RRA		M 0	ANT	Hoo.
DSE 3	No.	Z E	골 ;		12	WA		JOH	ARR	3
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FOR THOSE ALREAD		Š	5	Name	County Co. A		11		į	
. , , ,	U	2	/2	Z	0 0	1	1 1		1	1.0

COR THOSE ALREADY ENROLLED INDIGENT

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FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,)
Julton County	(from NeKulb)
Personally appears & & Law	1 1
County, State of Georgia, who, being duly swo	UI PIO
and resident of said County and State, and h	5
since the day of Seht	1856; that he isyears old and
by occupation a Gaspunters, that	
federate States (or of the State of) during the war between the
States, and served for the term of 4 ym	in Company L, of 10th Regiment
of SC. Reflex	; that his physical condition is as
follows:	
Z 7 00	
i na na maria	
that his property consists of the following iter	ms:
	Ministration - Colors - Mark Ministration and American Ministration
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	
	enefits of the Act, approved December 15th,
1894, and the Acts amendatory thereof, and ma	
is entitled for the year 1903. I have heretofo	
county been allowed a pension for the year 1	102 66
Sworn to and subscribed before me, this th	
19 day of Jan _1903	1
John Allie Russon	Ordinary.
STATE OF GEORGIA,	
Jullon County.	
I Dotuk Wilkinson	Ordinary of said County,
do certify that I am well acquainted with	I & Land
the applicant in the foregoing affidavit, and are	well satisfied that the statements made by
him in his said affidavit are true, and I know h	e is the individual he represents himself to
be and that he resides in this County.	
Given under my official sig	guature and seal, this 19th
day of Jun	1903.
Affix your real	Jam A Wil Kingon
	Ordinary County.
Norg.—The blank spaces must be fi Norg.—Affidavit should not be atte	illed.
NOTE A many it should not be atte	seed source omputity int, 1900.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,	
- 1	
Lulton. County.	
Personally appears & & Lange	of
County, State of Georgia, who, being duly sworn, sa	ays on oath that he is a hong fide citizen
and resident of said County and State, and has	resided in said State continuously ever
since the day of Seft 1	856; that he is years old and
	sted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served for the term of of you in	Company Z, of / th Regiment
of SC. Rights	; that his physical condition is as
follows:	
Infirm	•
that his property consists of the following items:	
	Committee of the Commit
of the value of	Dollars, that by reason of his physical
condition and poverty he is unable to support hir	nself by his own exertion or labor, and
that he receives no pension but the one herein appl	ied for.
Deponent desires to participate in the benefit	s 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 County been allowed a pension for the year 1	resident of
Sworn to and subscribed before me, this the	1/1/16/
_ /day of 1904.	Ct Bush
D(10 - 1)	O Januari
1	rdinary.
STATE OF GEORGIA.	
County	
1, Juin or Helienson ()	Ordinary of said County.
do certify that I am well acquainted with	Land
the applicant in the foregoing affidavit, and am we	Il satisfied that the statements made
by him in his said affidavit are true, and I know he	s the individual he represents himself
to be, and that he resides in this County.	
Given under my official signature an	d seal, this 344
day of	1904.
Amx	in Milleruson
Beal here Ordinary	County.
Note.—The blank spaces must be filled	·)[].
NorgAffidavit should not be attested	before January 1st, 1904.

POWER OF ATTORNEY.

1911211 01		TOMINE		
STATE OF GEORGIA,	}	-		
County	·. }			
I,			h	iereby authorize
	_of.			
to receive and receipt for the pension	allowed,	and request	that he	remit same to
	at		1.0	
by				,
WITNESS my hand and seal, this		day of.		.1905.
				[L. S.]
Executed in the presence of				_ [[u.]
Preceded in the presence of				
				•
	10.			K 100
ê. 6	1/3	.061	× 20.00	1 1
S	H		W. LINDSEY,	ATTA
L S 3	15	9	13.	WARRANT HANDED TO
NO DO ON	egiment /	WARRANT ISSUED	JOHN W. LINDSEY,	NDE NDE
INDIGEN PROPERTY PROP	egit	NT.	11	± 2
D S D	, · ×	RRA	* °	TYPE 3
S S S S S	13	W.	ЮН	A R.B.
OLDIER'S PENSIONAL BOOS. 1905. 1905. 1905. 1905.	7 0			W WITH
10 Jon	8			188

POWER OF ATTORNEY.

STATE OF G	EORGIA,	INTY			
					hereby authorize
				equest tha	t he remit same to
WITNESS	my hand and seal,	this			.1906.
Executed	in the presence of	×.			[L. S.]
			,		
(TEB.)	NOIS	1. 1		1906.	Prations.
Com Section 1354. (FOR THOSE ALREADY ENROLLED.) No. 2 5 9	S PENT	lecce ilton	WARRANT ISSUED	JOHN W. LINDSEY.	Commissions of Pression WARRANT HANDED TO Methods Port
Coom Suc	INDICATE OF THE PARTY OF THE PA	· 1.	WARRANT	W NHOL	ABRANT H
(FOR 1	SOLD	Name			W Y

no deta

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.
Pearsonally appears J. J. Lain of 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
federate States for of the State of
follows: Infilmity and poverty
that his property consists of the following items:
of the value of
by my labor Dollars per month. That by reason of his physical condition and poverty he is unable to support himself by his own exertion or labor, and that he receives no pension but the one herein applied for. Deponent desires to participate in the benefits of the Act approved December 15th, 1864, and the Acts amendatory thereof, and makes application for the pension to which he
is entitled for the year 1995. I have heretofore as a resident of Hulton. County been allowed a peusion for the year 1904. Sworn to and subscribed before me, this the day of Aday of 1805.
Ordinary.
STATE OF GEORGIA. (
1. do certify that I am well acquainted with J. J. Land
the applicant in the foregoing affidavit and well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County. Given under my official signature and seal, this JAN 2 1905 day of 1906.
Ordinary County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,	
Fulton Coun	
Coun	ty.)
Personally appears	Land of "11thm
County, State of Georgia, who, being du	ily sworn, says on oath that he is a bona fide citizen
	, and has resided in said State continuously ever
since theday of	1866; that he is 79 years old and
by occupation a Vanne,	that he enlisted in the military service of the Con-
federate States (or of the State of	during the war between the
States, and served for the term of	Yra in Company , of Ath Regiment
of Deuth Carolina	Rifler; that his physical condition is as
follows: entirely the	sabled from weakness
	The second secon
	The state of the s
that his property consists of the following	ing items: 220 property
	Dollars. I am now earning
	Dollars per month. That by reason of his
physical condition and poverty he is a	unable to support himself by his own exertion or
labor, and that he receives no pension l	
	n the benefits of the Act approved December 15th,
is entitled for the year 1906. I have h	and makes application for the pension to which he
County, been allowed a pension for the	
Sworn to and subscribed before m	
	Ordinary.
The state of the s	Ordinary.
State of Georgia,	,
Course Course	
111/	
I,	Ordinary of said County,
do certify that I am well acquainted w	
	t, and am well satisfied that the statements made
	d I know he is the individual he represents himself
to be, and that he resides in this County	The state of the s
	signature and seal, this JAN 1 1906
day of	
Affix	- Addillerson
your seal here	Ordinary County.
Norn.—The blank space	s must be filled.

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
atat
by
WITNESS my hand and seal, thisday of1907.
Executed in presence of

SOLDIER'S PENSION 1907.

Regiment, ...

JOHN W. LINDSEY,
Commissioner of Penni WARRANT HANDED TO

Late

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

Stat	te of Geor	gia,		
FU		County.		
Pe	rsonally appears	it Jack	C of	
County,	State of Georgia, wh	o being duly sworn	says on oath that he is	s a bona fide citiz
and resid	ent of said County a	and State, and has	resided in said State	continuously ev
since the	day of_		18 78 ; that he is_	To years
and by oc	cupation &	, that he	enlisted in the military	service of the Co
federate S	States (or of the Stat	te of V. C	during th	ie war between t
States, an	deserved for the terr	m of 4 1/22	in Company X, , of	/ th Regime
of	le Tril	les	that his physic	,
follows : _	Julih,	mitel 4	porecity	car condition is
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	/	7	and the second second	The Control of the Co
that his p	roperty consists of t	he following items		
	, , , , , , , , , , , , , , , , , , , ,		Man	
		7.5	The state of the s	The second secon
of the valu	ue of the		Dollars.	T a.m. man:
by my lab	or me		llars per month. The	I am now earnin
ahvaical co	ondition and poverty	he is unable to su	pport himself by his	at by reason of h
	that he receives no			own exertion
			fits of the Act approve	d December 15t
			s application for the pe	
			is a resident of	ui'oti.
	een allowed a pensio		41/	^
Swo	orn to and subscribe	d before me, this th	el Xyraca	·
	day of		manc	
0	01 171 1		Ordinary.	
Q 4.4				
Stat	e of Geor	gia,		
27 11 1	1	County		
	The POR	MV / hienson	/ 0 1	
	35		T C/-Ordinar	ry of said Count
	that I am well acqu		f. Vana	
			ell satisfied that the	
			e is the individual he	represents himse
o be, and	Civen under		and seal this	
	day of	1.6.4.1	1907.	
	uay or		ton R. Wilkens	on.
Amx			Company of the Compan	-
your seal here		Ordin	ary	County.
	Norm -The	e blank spaces must be fil	led.	

do certify that I am well acquainted with the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be, and that he resides in this County. Given under my official signature and seal this JAN 2 _____1907. John R. Wilkenson Affix your seal here Ordinary_____County. Norz.—The blank spaces must be filled.

Norz.—Affidavit should not be attested before January 1st, 1907. GEORGIA, De Kalh 1 Certify, That Il. Land the holder of this Certificale was Indigent Pensioner, and paid the sum of Sixty Dollars from this County, in 1902, and that he, or she, now resides in Gulton County. Given under my hand and official signature, this San 19" 190 3 MM Regalace

POWER OF ATTORNEY.

STATE OF GEORGIA.

Sand, James M.,	
7 ulton Go.,	
THE THOSE ALREADY ENROLLED 1905	
No. 420	
DISABLED	
SOLDIER'S PENSION	
1906.	
Name Jas. M. Lud	
County Fulton.	
Co. C. Regiment At Sa	
Disability Lost right arm	
Amount, \$ 100.	
// 6 1908.	
JOHN W. LINDSEY.	
Commissioner of Pensions.	
WARRANT HANDED TO	
The Francis Province and Published Co., Ord. W. Huderson, Mon.	
\	

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

of

hereby authorize

day of_

Executed in the presence of

__[L s.]

no data

GEORGIA, CriciolEic County. I, the undersigned, do certify that Pensioner of this county, is on the Pension roll and draws a pension of Like hurided Dollars for 1904. The bearer is the same man of Cl. Company 1 42 Regiment, who enlisted on day of Lings 1862 , and was discharged on the Given under my hand and official seal this the 2 day of Jan 1906 Ordinary's L. S. (SEAL) 7 LEOR HOVE ALBEAN ENPOSSED 1905 JOHN W. LINDSEY. SOLDIER'S PENSI WARRANT HANDED TO Fulton DISABLED 1906 10 Lata

DOWED OF ATTORNEY

POWER OF ATTORNET.					
STATE OF GE		COUNTY.			
Ι,				, here	by authorize
	(((((((((((((((((((_ of			
to receive and r	eceipt for the pens	sion paid hereon	, and request	that he re	mit same to
		by		-	
at					
In Witness	WHEREOF, I have	hereunto set my	hand and seal	, this	
day of		1.			
				7 mar (a)	[t. s.
Execut	ted in presence of				
			*		
1		7			
6	5	1,	1907	18iona	
1 3	S	0 4		Pensi	ANTA.
EN BO		J. 7.	3 1	SD T	ER, ATLAN
Cons Section 1250 SE ALREADY E		Fulton Regiment	251	W. LINDSEY, Commissioner of NT HANDED TO	PRINTER
S LRE	ER'S	Lal Lal	15/11	Com Com	1
Cobs	S 55 0	3 E 3		RAN W	A Vone
Code Section 150. No F 3		A C		JOHN W. LINDSEY, Commissioner of WARRANT HANDED TO	W HARRISO
20 H	3	Ca the	ability	=	3
E.	5	me nety	abilit	ı	

James M.

Sand,

Disability

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,
Fulton County,
Personally appears sames M. Land of Fulton.
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 1855; that se enlisted in the military service of the Con-
federate States, (or of the State of Slanger) during the war between the
States, and served as ain Company, of Regiment
of Ga, Mate Volunteers Tracky, 's Brigade; that whilst engaged
in such military service in the State of Las , on the / day
of 1862, he was wounded, injured or diseased as follows:
Low of light arm
V
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
Olignofiel County, been allowed an invalid pension of
Sue Houndred Dollars, for the year 1906.
Sworn to and subscribed before me, this the
day of JAN 1 1906.
Post-Office
X
NOTE.—State fully be nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
State of Georgia,
Fulton County.
CALL AND AND AND AND AND AND AND AND AND AND
Urdinary of said County
do certify that I am well acquainted with James M. Land.
the applicant in the foregoing affidavit and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
day of JAN 1 1906.
John 1 Walletter
Ordinary Fulton. County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

THE T	on. A Country
	(
County, State of C	Georgia, who, being duly sworn, says on oath that he is a bona fide citize
and resident of sai	d State, and has resided therein continuously ever since the
day of	180 ; that be enlisted in the military service of the Con
federate States (or	of the State of) during the war between th
States, and served	as a private in Company , of th Regimen
of Sa	Volunteers 11, 100 pg 's Brigade; that whilst engage
in such military se	ervice in the State of, on the, on the
oftel	186 2, he was wounded, injured or diseased as follows
Last rig	It arm at bobby bar
	and the second s
one la	County, been allowed an invalid pension of the year 1906.
	County, been anowed an invalid pension of
day o	Dollars, for the year 1906.
John S	and subscribed before me, this the of JAN 1907.
Jahn S	Dollars, for the year 1906. and subscribed before me, this the 1907. Postoffice Do 3 Brelie Williamson Uly the nature of the wound or character of disease which causes the disability, and capil
John G Norz.—State ful particularly the extent of	Dollars, for the year 1906. Id subscribed before me, this the 1907. Postoffice M. 3 Brelia R. W. Mariana Postoffice M. 3 Brelia Replace of the wound or character of disease which causes the disability, and explain the disability resulting from the wound or disease. Georgia,
John Son State ful State of State of	Dollars, for the year 1908. and subscribed before me, this the 1907. 1907. Postoffice N. 3 Brown By the nature of the wound or character of disease which causes the disability and caple the disability resulting from the wound or disease. County.
John S Norn-State ful varificularly the extent of State of T1111	Dollars, for the year 1908. and subscribed before me, this the 1907. 1907. Postoffice N. 3 Brown Brown By the disability resulting from the wound or disease which causes the disability, and caple Georgia, County. Son R. White the state of the wound or disease. Ordinary of said County.
John S Norn-State ful varificularly the extent of State of T1111	Dollars, for the year 1908. and subscribed before me, this the 1907. 1907. Postoffice N. 3 Brown By the nature of the wound or character of disease which causes the disability and caple the disability resulting from the wound or disease. County.
John Son-State ful articularly the extent of State of 1, for the applicant in the applicant in the	Dollars, for the year 1908. and subscribed before me, this the 1907. Postoffice M. 3 Brelie R. W. Marketon Postoffice M. 3 Brelie Replace of the wound or character of disease which causes the disability, and explace of the disability resulting from the wound or disease. County. County. County. Ordinary of said Count arm well acquainted with Alman and well satisfied that the statements made foregoing affidavit, and am well satisfied that the statements made
John Son-State ful articularly the extent of State of I, John Land the applicant in the by him in his said	Dollars, for the year 1908. In disubscribed before me, this the period of Land 1907. Postoffice M. 3 Brelief. Postoffice M. 3 Brelief. Postoffice M. 3 Brelief. Georgia, County. Ordinary of said Count must well acquainted with Musical Acquainted with Musical Acquainted and affidavit, and am well satisfied that the statements mad affidavit are true, and I know he is the individual he represents himse
John Son John State of all articularly the extent of State of Translation of the applicant in the applicant in the power of the power o	Dollars, for the year 1906. In the part 1907. Dollars, for the year 1906. In the part 1907. Dollars, for the year 1906. All Lands. Postoffice M. 3 Brelief Brelief The disability resulting from the wound or disease which causes the disability, and explose the disability resulting from the wound or disease. County. County. Ordinary of said Count are foregoing affidavit, and am well satisfied that the statements made a affidavit are true, and I know he is the individual he represents himse resides in this County.
John Son John State of all articularly the extent of State of Translation of the applicant in the applicant in the by him in his said to be, and that he Gi	Dollars, for the year 1906. In the part 1907. Postoffice Dollars and subscribed before me, this the part 1907. Postoffice Dollars and subscribed before me, this the postoffice Dollars and subscribed before me, this the postoffice Dollars and subscribed before me, this the disability resulting from the wound or disease which causes the disability, and explore the disability resulting from the wound or disease. Georgia, County. Ordinary of said Count are well acquainted with Dollars and well satisfied that the statements made a affidavit are true, and I know he is the individual he represents himse resides in this County. We would be the statements of the statement
John Son-State ful particularly the extent of State of Translate in I. John do certify that I at the applicant in the by him in his said to be, and that he Gi	Dollars, for the year 1908. Ind subscribed before me, this the port of the year 1908. Indeed, the port of the year 1908. If the nature of the wound or character of disease which causes the disability, and explored to the disability resulting from the wound or disease. Georgia, County. Ordinary of said Count and well acquainted with provided that the statements made affidavit are true, and I know he is the individual he represents himse resides in this County, when under my official signature and seal this. AN 4-1907.
John Son-State ful particularly the extent of State of Translate in I. John do certify that I at the applicant in the by him in his said to be, and that he Gi	Dollars, for the year 1906. In the part 1907. Postoffice Dollars and subscribed before me, this the part 1907. Postoffice Dollars and subscribed before me, this the postoffice Dollars and subscribed before me, this the postoffice Dollars and subscribed before me, this the disability resulting from the wound or disease which causes the disability, and explore the disability resulting from the wound or disease. Georgia, County. Ordinary of said Count are well acquainted with Dollars and well satisfied that the statements made a affidavit are true, and I know he is the individual he represents himse resides in this County. We would be the statements of the statement

Norz.—Fill all blanks and of Company and Regiment. Norz.—All vouchers and affidavite must bear date after January 1st, 1900

Widow's Pension UNDER ACT 1910 Namo Remelia Land
Willow of S.L. Land S. H.C. Luf-

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

STATE OF GEORGIA. Tulton ... County.

Personally before me comes __ Carrollo Land __ 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 lowing questions to-wit:

- 1. What is your name, and where do you reside? Germelia Sand, attanta, Isa. 2. How long and since when have you been a continuing resident of the State of Georgia?
- 19 wears since 1892, 3. When, where and to whom were you married? any W. 16-1866 in
- 4. When, where and in what Company and Regiment did your husband culist as a soldier in
- Wounded & discharged in summer of 1863. 6. Was your husband personally present at the time of the surrender or discharge of this Commandr Mo.
 - 1 If he was not present state clearly where he was? Discharged for dischilit
 - s. Where was his command when he left? . Winamia
- . a. For what cause did he leave his Command? Because of disched
- b. By whose authority did he leave his Command? Outhouth of dischards G. 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? Command! disability
- h. Was he captured by the enemy at any time? If so, when and where captured and where held as a prisoner, and when and for what cause
- When and where did your husband die? Quant 12, 1904, Octomba, Isa.
- k. Were you residing together when he died?
- L. If not, how long had you resided apart? 9. What property of any description did you own, hold or control for your use and its eash
- value, Nov. 1, 1908? (State same by items.).
- 10. What property of any kind have you sold or given away since Nov. 4, 19083. What was received for frond what did you do with the proceeds thereof? (Give items and cash value,
- 11. What property of any description of any value have you now? Alexa. Give list and cash value.....
 - 12. What are your annual earnings or income and their value? ______
- 13. Have you heretofore been paid a pension by the State? If so, when and for what cause were you struck from the Roll?

Questions for the Witnesses as to Service of Husband and Marriage.
STATE OF GEORGIA,
County.
Personally before me comes
being duly sworn true answers to make, to the following questions, answers as follows:
What is your name and where do you reside: John J Land, Wood of the What is your name and where do you reside: John J Land, Wood, Jan. How long and since when have you known
2. How long and since when have you known applicant?
3. How long and since when has she continuously resided in this State? (Give date.)
19 Aleas - Since 1892. When and to whom was she married? Box board. How do you know? married to the state of
When and to whom was she married? 3.3. 16 and How do you know? 10 her her
6 When and where did.
the husband of Applicant die angust 16, 1904, attenta, lace
Were the applicant and her husband living together as husband and wife at the date of his
death's
8 If not, how long did they live apart before his death?
Were they divorced?
When, where and in what Company and Regiment did by Land enlist?
In 1861 at afartenberg S.C in Co. "H" I'm Reg & Dry.
10. Were you a member of the same Company? Ms.
11 How long within your personal knowledge did he perform actual military service with his
12 When and where did his Command surrender, and was discharged On Hangania.
12 When and where did his Command surrender, and was discharged No. National Command
13. Were you personally present when it was surrendered?
were you Shartenberg S & and how came you there?
and how came you there?
1) Was the husband of applicant personally present at surrender? . No
0 90
cause did he leave Command? (Give date.) Dumannes of Was from No. disability . By whose
authority did he leave his Command? Authority of discharge and how
when, where and for what cause did he leave Command? (Give date.) Dimensional Wishers and distribute. By whose authority did he leave his Command? Authority of distributes. They do you know all this? How do you know all this? By second the granted leave?
By suma him relum home timefrecting divilgage
15. For what cause, if you know of your own knowledge, was he prevented from returning to
his Command? because of hermanstort disability. 16. What effort did he make to feturn to his Command hull how do you know this? Of your
16. What effort du ne make to feturn to his Command and how do you know this? Of your
own knowledge or fow More of suggles living together.
To the day of July 19
day of the day of the
honcelius It musicl Ordinary
of Dutto County

AFFIDAVIT OF TWO FREEHOLDERS.	
STATE OF GEORGIA,	
Personally before me comes	
are freeholders of said County and that they know auching fauth	says that they
of said County and know what property she owned on 4th Nov. 1908, and its cash value	o be as set out
by Schedule (A) as follows	
Personal property 5	
Notes and accounts due	
Total	
Schedule (B). We know the property sold or given away since Nov Ath, 1908, its eash value to b	e as follows
Personal property Ships	
Money, Notes and Accounts.	
Schedule (C).	
We also know what property she has now in her possession, use and control to-w	it
Acres of land_ worth\$	*******
Cows and Hogs\$	
Other Property	
Income and Earnings	
Total Value of all property and effects	
 County.	
ORDINARY'S CERTIFICATE.	
STATE OF GEORGIA,	
Fultur County	
Lohn Willigsom Ordinary of said Con	inty do certify
that, Anow North the applicant for is the person she represents herself to be and she is a bona fide continuing resident	pension. She
County and was on the 1th Nov., 1908-	
That I also know the witne	ss who swears
to the service of husband, and	
entitled to full faith and credit.	
That the Tax Returns of Fullton 16" Returned	for Tax is for
1908 \$ Name for 1910 \$ Name	
MV 191 Oak At a Call	day of
() Fultan	County.
(SEAL.) NOTES 1. Before any questions are answered the Ordinary shall swear applicant and the witness	in the following

words: "You do solemnly awar that you will true nawvers make to each of the questions saked you and the svidence you shall give will be the truth. So help you doo?"
Additional afficients may be attached if blank spaces are insufficient.
Only widow who married prior to first jamusey 1970, are entitled. Attach certified copies of marriage license if obtainable. If not prove marriage by some person, or by general reputation.

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Fultur County

Permelia jant

U M DATTERSON

ESTABLISHED 1880

FRED W. PATTERSON

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459

H. M. PATTERSON & SON

FUNERAL DIRECTORS

96 North Forsyth Street

Atlanta, Ga., Jan. 13, 1921.

Funeral Expenses of Mrs. Permelia I Land: Sold to

> Casket, Metal Lining, Box and Professional Services

Embalming, bathing, dressing, etc. Dress Constitution notice Georgian notice

Journal notice Dray for Box-Motor Hearse

Pall-bearers' Motor Coach

State of Georgia) County of Rulton)

Personally appeared before me F.W. Patterson who on oath states that the above account is correct, due and unpaid.

Sworn to before me this April 21, 1921.

To The ... I. M.P. Button Co Ja

Commerce signer 10+ 1922

H. M. PATTERSON

ESTABLISHED (880

FRED W. PATTERSON

H. M. PATTERSON & SON

FUNERAL DIRECTORS

96 North Forsyth Street Adjoining Carnegor Library

Atlanta, Ga., Jan. 13, 1921.

Funeral Expenses of Mrs. Permelia I Land:

Profei Mmbaln Dress Consti Georgi Journe Dray Motor	t, Metal Lining, Box and ssional Services ning, bathing, dressing, etc. itution notice lan notice al notice for Box- Hearse hearers' Motor Coach	350 154 53 3 3 15 12	78 60 60	459	9
Patter	rsonally appeared before me F.W		6	-	<i>Y</i> .

Sworn to before me this April 21, 1921...

To 7 5 11. P Juston Co La

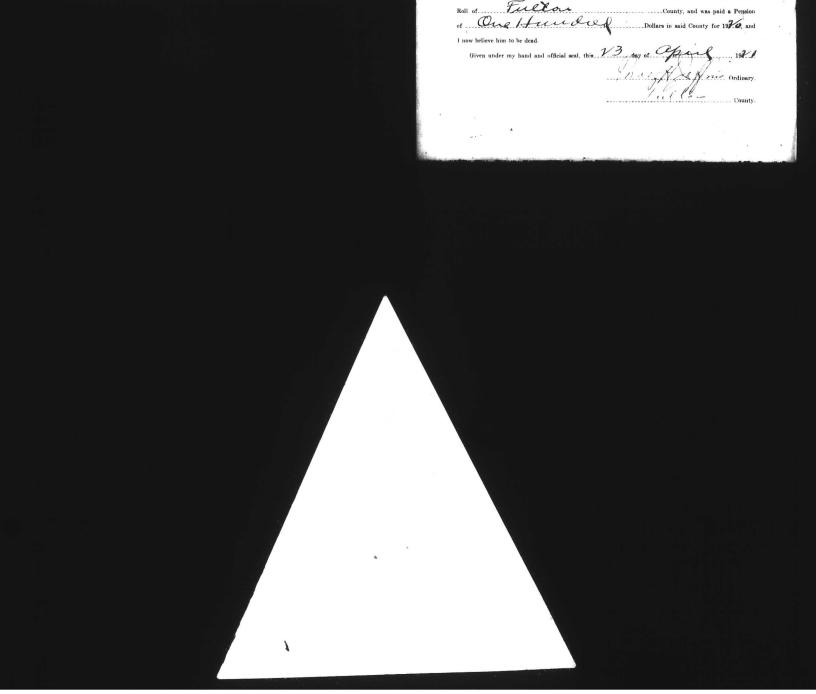
Tommeron reduce : DY 1922

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, Tullou County.	
	Personally before me, the Ordinary of said County, comes Au Patters on	
	of said County, who, after being sworn, on oeth says that he knew	
	the Willows Peasion Roll Tillow County at the	
	F . X	
	State, on the day of the state of the sand that	
	a Pension of Oug Hundred Therenty five Dollars was due him and	
	unpaid at the time of his death. That he left no widow or dependent children surviving him; and no estate	
	of any value sufficient to pay his funeral expenses, which amounted to the sum of 145998	
	Dollars, as per sworn statement, itemized, hereto attached.	
	Sworn to and subscribed before me	
0	this V3 day of Gril 18/1 HM Patters D	
Year	hus Ru arent Coordinary.	
	Tulkan County.	
	GEORGIA, Fullow County.	
	I, Theo It Deffuels Ordinary of said County, do certify that I personally know Pollular Defendence of the Pollular of who is a resident	n
	citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and	
	credit.	
	I also knew It also knew while in life; that he	
	was the same person whose name uppears on the Pension	
	Roll of County, and was paid a Pension	
	of Cing Hundred Dollars in said County for 1970, and	×
	I now believe him to be dead.	
	Given under my hand and official seal, this 23 Gay of Gay of 1921	
	1) al free Ordinary	
	9.0,00	
	County	



Soldier's Pension 1893. Name S. Lucal County Scillin Disability De's (1994) Amount, & O. C. MICLEY 24 1898 W. H. HARRISON, Necretary Executive Department WARRANT HAMPIND TO (Applicant) Goo. W. Marrison, Blate Printer, Atlante,	Prof. much Sofen afters fa Court of Record fa Court of Record under Seal where will not be received. (W H Hamser Met 24/13	DIRECTION. If allowed, send amount by, and oblige,	my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of moon It may be entitled to from the State of Georgia by reason of the injury received as aforesaid oney I may be entitled to 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, of for any sum of money which may be coming to me for the reason aforesaid. In Witness Whereor, I have hereunto set my hand and seal this Executed in the presence of us: [L. S.	POWER OF ATTORNEY. STATE OF GEORGIA. County. KNOW ALL MEN BY THESE PRESETS, That I. County, in said State, do hereby appoint

KNOW ALL MEN B	Y THESE PRESENTS, That	I,		
		of		(1100)
County, in said State, d	o hereby appoint			
of		my true a		
from the State of Georg the Confederate States my said attorney to rec	receive and receipt for wagia by reason of the injury. [or of this State], as state eipt in my name for any which may be coming to	y received as afore ed in the foregoin Warrant that may	said in the mil g affidavit; her be issued by th	litary service of eby authorizing
The second secon	EOF, I have hereunto set r	4		/
day of		ny nana ana scar	uus	
day or	1093.			[L. S.]
Executed in the p	resence of us .		(1.40) ((0.41) (***) (1.46)	[L. S.]
Executed in the p	eschee of us .	1		
	10 A 10 M M A 14 A 14 A 14 A 14 A 14 A 14 A 14			
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If allowed, send as	mount by			to
me at		, and oblige,		
	AND RECEIPTION OF THE		THE RESIDENCE	
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Pensio with so	BB. Mary Will not Col	Com Mer	ARRISON, arrests Department	Jan Harris
S Pensio pituus	SSS. Control will not con	D, Mary Mary	HARRISON, Secretary Essenties Department	Loant
(N)	Culling mulnet	100 Met Met 200 Met 20	H. HARRISON, Securety Exercise Department	Weart
ier's Pension with a contraction of the second	1898. Mary	Mer Man Mer 2 (50)	W. H. HARRISON, Sorting Benetics Depart	Mylicant Services and

FOR USE OF APPLICANTS WHO HAVE NOT HERETOFORE DRAWN.

STATE OF GEORGIA,
Personally appears of Land of Fullow
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 continuously since the Fifteent day of Novembre 18 16; that he enlisted in the military service of the Con-
federate States (or the State of) during the war between the
States, and served as a Rivella in Company 6, of 13 th Regiment
of SC Volunteers M. C. G. Wand Brigade; that whilst engaged
in such military service, at the battle of Fuggle mill in the State
of inquired on the la day of a squet 1864, he was
disabled as follows: by a fund in
left and which I satured the Bong
and rendered a relection of The inches of born about Ellow necessary
are consequere of which the arm is
rudred entirely wells
<i>f</i>
Deponent desires to participate in the benefits of the Act approved October 24th, 1887,
and the Acts amendatory thereof, and makes application for the allowance to which he is entitled
for the year thereunder, ending October 26th, 1893.
Sworn to and subscribed before me this the
24 day of Ulb and 1802

Norz.—State fully nature of wound or character of disease which causes the disability, and emplain furricularly the extent the disability. If claim is based on disease, give full were connected history of disease, tracking it directly to the service.

Norz.—Do not trouble to regation required spidle for one of disease, tracking it directly to the service.

Affidavit	for	1	Witnesses
 South Cagrolina			

STATE OF GEORGIA County of Shartanburg

notary Rublic Personally appears before me, the undersigned, Ordinary in and for said County, W. J. Harris, Ins. N. Carlisle DR Duncan each of whom, being duly sworn according to law, severally say, under oath, that they are personally well acquainted with Land whose application is herewith presented for a pension,

and that they served with him in the army, and from our personal knowledge he was injured by the service as follows: (give full statement, and tell in your own language how badly applicant is disabled from work. If he does any labor, or can do any, state what.)

Gun shot wound in The arm at Frazzle's mill august 16,1864, not for from Richmond. The would shattered the bone and rendered a he-section of the arm necessary, in Groequeice of which he has no use of that arm.

We personally know above stated facts. We were with him in the army and have known him ever since. Applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1864 We have no interest in the recovery of a pension by him.

Sworn to and subscribed before me this

2/ day of March 1893.

It I Harris

PHYSICIAN'S AFFIDAVIT.

STATE OF	GEORGIA
D'ISTET OT	GEORGIA,
1. 11 -	
Simileon	Course

Personally comes before me			Ordinary	of said County.
Personally comes before me and	Dr m	c marle		, both known to
ne as reputable physicians of said Count	y, who being	severally sw	orn, say o	n oath that they
nave carefully examined	aud,	and after	such pers	onal examination
any that the applicant has been injured as light Chron at low fro cline, render. Consequently Dente meliae on a a com from for The live	follows:	s l	1 200	0
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fro cline, render.	y rea	erelion to a	zuer	africa de la compansa
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Sworn to and subscribed before me this) 24 day of Manh 1893 Mr. L. lo achimi

Nors .- 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
Also state how long physicians have known and treated applicant.

Form 4.

STATE OF GEORGIA. Freden County.

M. L. Couchnan Ordinary of said County, do certify that I am well acquainted with

applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and 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.

Given under my official signature and seal this 24 day of clearle 1893

m. L. Lo ouchmin Ordinary Flaceles County

	COUNTY	,		
Know all Men by the	se Presents, That I,			
		of ,		
county, State of Georgia,	do hereby appoint			
		my	true and lawful a	ttorney in fact, for
ey to receipt in my name bich may be coming to r	ne for the reason afores	rid.		any sum of money
IN WITNESS WITH	ACCOUNT, I mave nereu	nto set my hand and	scal, this.	/
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ay of	.189	CONTRACTOR TO BE SEEN TO SEE THE SEE T	seal, this,	[i s.]
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ay of	.189 presence of us	CONTRACTOR TO BE SEEN TO SEE THE SEE T	seal, this	/ [i s.]
ay of	189 presence of us DIRE)	seal, this	/ [i. s.]
ay of Executed in the	189 presence of us DIRE)	seal, this	[t., s.]

SOLDIER'S PENSION. 1895.

18° %

RICHARD JOHNSON, Disability Off-Boles err Name 3.1.1383 County Sulton

POWE	R OF ATTORNEY.	
STATE OF GEORGIA,	Ĭ	
County	y. }	
KNOW ALL MEN BY THESE I	PRESENTS, That I,	
-	of.	
County, State of Georgia, do hereby ap	point	
of	my true and	lawful attorney in fact, fo
States (or of this State) as stated in the in my name for any Warrrant that may be coming to me for the reason aforesaid	received as aforesaid in the military s foregoing affidavit; hereby authorizing r be issued by the Governor, or for any	ervice of the Confederat ny said Attorney to receip sum of money which ma
day of		
Executed in presence of us)	[L. 8.
*) ×	
	DIRECTIONS.	
Send money to me as follows, by		
	to.	P. C
wi = 1	County, Georgia.	

Soldier's Pension. 1300

1894.

S. J. Land

Disabled Arm Tul ton

Servetory Executive Department

W. H. HARRISON,

WARRANT HANDED TO

Disability

(For These Aiready Enrelled.)

In Sate

Secretary Executive Department.

For Applicants Heretofore Allowed Pensions.

County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizenand resident of said State, and has resided therein continuously ever since the 15th

rul on

STATE OF GEORGIA,

PERSONALLY appears ___ S.L. Land

fulton

day of November 18.76; that he enlisted in the military service of federate States (or of the State of) during the war between the state of the sta	
States, and served as a Private in Company C , of 13 th	,
of 8% C. Volunteers McGowans 's Brigade; that whilst of	0
m - 1 - 1413	n the State
of Vinginia , on the 16th day of August 186	he was
wounded as follows: by a Gun Shot wound in left arm rendering	the mame
ont treat restand	
Deponent desires to participate in the benefits of the Act, approved October	
and the acts amendatory thereof, and makes application for the allowance to	
entitled for the year ending October 26, 1894. I have heretofore been allowed a	a pension of
Fifty dollars, for the year 189 3	
Sworn to and subscribed before me, this, the 12th day of Horath 1894.	. 22
12th day of Harch 1894.)	
Mr. L. Calhren Osumany	
Norz state fully the nature of wound or character of disease which causes the disability, and explain particular	durly the estant
of the disability, resulting from the wound or disease	
STATE OF GEORGIA.	
STATE OF GEORGIA.	
"il on County.	-14.0
I, WeLeGalhoun Ordinary of so	
I, W.L. Galhoun Ordinary of si	the
I, W.L. Galhoun Ordinary of so do certify that I am well acquainted with S.L. Land applicant in the foregoing affidavit, and am well satisfied that the statements m	the ade by him
I, W.L. Galhoun Ordinary of si	the ade by him
I, W.L.Calhoun Ordinary of so do certify that I am well acquainted with S.L.Land applicant in the foregoing affidavit, and am well satisfied that the statements m in his said affidavit are true, and I know he is the individual he represents his	the ade by him
I, W.L.Calhoun Ordinary of so do certify that I am well acquainted with S.L.Land applicant in the foregoing affidavit, and am well satisfied that the statements m in his said affidavit are true, and I know he is the individual he represents hi and that he resides in this County. Given under my official signature and seal, this	the ade by him mself to ba
I, W.L. Galhoun Ordinary of so do certify that I am well acquainted with S.L. Land applicant in the foregoing affidavit, and am well satisfied that the statements m in his said affidavit are true, and I know he is the individual he represents hi and that he resides in this County. Given under my official signature and seal, this day of Harph 1894.	the ade by him mself to ba
I, W.L.Calhoun Ordinary of so do certify that I am well acquainted with S.L.Land applicant in the foregoing affidavit, and am well satisfied that the statements m in his said affidavit are true, and I know he is the individual he represents hi and that he resides in this County. Given under my official signature and seal, this	the ade by him mself to ba
I, W.L. Galhoun Ordinary of so do certify that I am well acquainted with S.L. Land applicant in the foregoing affidavit, and am well satisfied that the statements m in his said affidavit are true, and I know he is the individual he represents hi and that he resides in this County. Given under my official signature and seal, this day of Harph 1894.	the ade by him mself to ba

For Applicants Heretofore Allowed Pensions.

STATE OF GEO	RGIA.			
Fulton	County.			
personally appears	7.1.68Dd	of	Fulton	
County, State of Georgia, wh	to being duly sworn,	says on oath that	he is a bona fide c	itizen
and resident of said State, an	d has resided therein	continuously ev	er since the 1	= th
day of November	18 76 ; that he e	nlisted in the mi	litary service of the	Con-
federate States (or of the Sta			ng the war betwee	
States, and served as a	ivete	in Company	, of 12 th Reg	iment
of S Volut	iteers, Melowin		that whilst engag	
such military service at the b	100000000000000000000000000000000000000	gle's Vill	in the	
		lay of 'ug		
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entirely useless			TOTAL VAL COM	
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Nors-State fully the nature of wound of the disability, resulting from the wound	reof, and makes appli Detober 26th, 1895. dollars, before me, this, the Maron 1895. Maron 1895. Maron derocate of disease with	cation for the all I have heretofore for the year 18	lowance to which been allowed a pe	he is
STATE OF GEO	ORGIA,			
" ulton	County.			
I,_	M.L.Calhoun		rdinary of said Co	ounty,
do certify that I am well acq	uainted with	S.L.Land		the
applicant in the foregoing aff	idavit, and am well sa	tisfied that the	tatements made b	y him
in his said affidavit are true,	and I know he is the	e individual he	epresents himself	to be
and that he resides in this Co	ounty.			
Give	en under my official :	ignature and sea	1, this 9.7	

day of Varch 1895.

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__County.

FOWER	OF ATTORNEY.
STATE OF GEORGIA,	1
County.	ſ
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o receive and receipt for the per	nsion paid hereon and request that he remit same to
	by
nt	á.
IN WITNESS WHEREOF, I	I have hereunto set my hand and seal, this
day of	1896.
	[L. S.]
Executed in presence of us	š
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	feni 195 Fre 0 26 1896 RD JOHNSON, Soretary Executive Department
	(SON)
(For Those Already Enrolled.) No. 785 TSPENSIC 1896.	1.1. į zni ulton 1szolei fre 50 HARD JOHNSON, Secretar Escoulte Dep COU
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	Name County Disabilit Amount,

PO	WER OF ATTORNEY.
STATE OF GEORGI	
	County.
Ι,	hereby authorize
	of
to receive and receipt for	the pension paid hereon and request that he remit same to
	by
at IN WITHINGS WITH	NHOW ALL
day of	REOF, I have hereunto set my hand and seal, this
day or	_1897.
Executed in pres	[L. S.]
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Emailed.	SON, SON,
MI THE	1897. S.X. Xan A Zallen Zallen Sy Briddin (1) Sy Briddin (1) Sy Briddin (1) Sy Briddin (1) Sy Briddin (1) Sy Briddin (1) Sy Bridgin
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IDIEI	HAM WAR INCHES
)}	Name County Disabili Amount

For Applicants Heretofore Allowed Pensions.

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 76; that he enlisted in the military service of the Cou-

Pulton

___) during the war between the

in Company C, of 13 th Regiment

County.

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STATE OF GEORGIA,

personally appears

federate States (or of the State of

States, and served as a

of 3.3? Volunteers, wo wan in such military service in the State of wirginia , on the
of 'ugust186 4, he was wounded, injured or diseased as follows: by gur shot wound in left arm rendering the same entirely useless
Depouent 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 county been allowed a pension of Fifty
dollars, for the year 189 .
Sworn to and subscribed before me, this, the
26 day of Peby 1896.
M. L. Walhow Ordy
NOTE -State fully the nature of wound or character of disease which cause the disability, and explain particularly the extent of the disability, resulting from the wound or disease.
STATE OF GEORGIA, (
Pulton County.
I, W.L. alhoun Ordinary of said County,
do certify that I am well acquainted with 3.L. Land the
applicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know 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 of1896.
edis per me le alhour
OrdinaryPultonCounty.
County.
Ĭ.

For Applicants Heretofore Allowed Pensions.

personally appears

County, State of Georgia, who being duly sworn, says on oath that he is a hona fide citizen and resident of said State, and has resided therein continuously ever since the land of Here 1876; 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 fit watter in Company C., of 13 th Regiment of States, and served in the State of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served in the State of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and served as a fit watter in Company C., of 13 th Regiment of States, and States, and States, and States, and States, and States, and States, and States, and States, and States, and States, and States, and States, and Stat

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 Recultary county been allowed an invalid pension of

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

Note.—Mate hilly the nature of wound or chartest of disease which causes the disability and explore portunited, the extent of the disability resoluted from the wound or disease.

STATE OF GEURGIA,	
Rullan County.	
1, MH lenesey Ordinary	of said County.
do certify that I am well acquainted with S. S. S. Corred	the
applicant in the foregoing affidavit, and am well satisfied that the statem	ents made by him
in his said affidavit are true, and I know he is the individual he represe	uts himself to be
and that he resides in this County	

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	GEORGIA, County.
1,	_hereby authorize
	of
to receive and	d receipt for the pension paid hereon and request that he remit same to
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	NESS WHEREOF, I have hereunto set my hand and seal, this
lay of	1898.
	[L. S.]
)
(For Those Aiready Enrolled.) No. 22543	SOLDIER'S PENSION. 1898. Name E. C. C. C. L.C. County . L. L. L. C. Disability New All Legist. Amount, 8. C. C. C. L. L. Amount, 8. C. C. C. Amount, 8. C. C. C. Amount, 9. C. C. C. Amount, 8. C. C. C. Amount, 9. C. C. Amount, 1898. RICHARD JOHNSON, Commissioner of France. WARRANT HANDED TO WHY C. The Market Amount and the commissioner of France.

		POWE	ER O	F ATT	ORNEY.			
STA	TE OF	GEORGIA,	ŧ					
		Co	ounty.∫					*
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	IN WITN	ESS WHERE	OF, I h	ave hereur	ito set my hand	and seal,	this	
day	of_			1899.				
							[L. S.]
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OUR SECTION 1200	\$ A	PE	₩	313	~	RICEARD JOHNSON Commissioner of	WARRANT HANDED TO	HARRISON, STATE PRINTER
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6,	-				it,	RIC	B	3
0)	-	3		Name County	Disability Amount,		1	9
		S	li	දී වී	Am Di	Į.	. 1	1

For Applicants Heretofore Allowed Pensions. STATE OF GEORGIA. Fulkon County. personally appears of K. Laur of Fir Chan County, State of Georgia, who being duly sworn, says on oath that he is alona fide citizen and resident of said State, and has resided therein continuously ever since the day of Trovi 18 26; 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 Drivate in Company, of the Regiment of V.C. Volunteers, It States Brigade; that whilst engaged in such military service in the State of traginizer, on the by day of lieg. 186 Y, he was wounded, injured or diseased as follows: Gun shart wound in light arm, rendering Same, reselvest 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 county been a lowed an invalid pension of Dollars, for the year 189 7 & Louis Sworn to and subscribed before me, this, the STATE OF GEORGIA. Fulton County. do certify that I am well acquainted with_ applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. Given under my official signature and seal, this 28

your seal here.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,	
Fulling County.	
included -	
personally appears Ja a a of Futin	
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 _ has	
federate States (or of the State of) during the war between the	
States, and served as a front in Company 6, of /d th Regiment	
of Volunteers, 's Brigade; that whilst engaged	
in such military service in the State of Transcription, on the 16 day	
of 186 4, he was wounded, injured or diseased as follows:	
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A THE CASE ASSESSED TO A SECOND SECOND	
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Deponent makes application for the pension to which he is entitled for the year end-	
ing October 26th, 1899. I have heretofore under said law as a resident of	
County been allowed an invalid pension of	
Dollars, for the year 189	
Sworn to and subscribed before me, this, the	(30)
day of 1899. POST-OBFICE	
TOOK.) POST ORFICE	
170 one	
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,	
County.	
2222	
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 2.7.	
day of 4	
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eal hore	_
Ordinary County.	

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IN WIT	NESS WHER	EOF, I have hereus	nto set my hand	and seal, this	/	
ty of		_1000,			[L. S.]	
Execu	ted in presence	of				
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offied.)	SION	8	1900.	SY, rr of Penniona,)
y Enrelled.)	LID DENSION.	0.	5 / V 1900.	NDSEY, missioner of Pensons. DED TO	bie, albain.	{
Irready Enrelled.)	ALID S PENSION.	00.	0 8 Walt V 1900.	. LINDSRY, Generations of Pensons.	Bus Pinier, Librate.	
see Arready Enrelled.)	(VALID R'S PENSION.	900.	5 6 0 8 ca Bouly 1 1900.	N W. LINDSRY, Commissioner of Pensions. RANT RANDED TO	Affi	
over Skrives mo. No. 477	DIER'S PENSION.	1900.	15 - 5 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	JOHN W. LINDSEY, Commissions of Funions, WARRANT HANDED TO	On V. Inches, Into Prince, Albara	00.4.6
(For Those Already Eurolled.)	OLDIER'S PENSION.	1900.	sability 5 5 6 9 9. nount, 8 5 6 9 9. urrant issued Prockly (* 1900.	JOHN W. LINDSBY, Commissions of Persons. WARRANT HANDED TO	Con Filtram too Prints, Alaste	100 ALA
(For These Already Eurolled.)	SOLDIER'S PENSION.	1900.	Disability Amount, \$ -5 6 0 6 Warrant issued Pueck V 1900.	JOHN W. LINDSBY, Generation of Persons, WARRANT BAINED TO	On " Inches, then Print, John	100000
(For These Arrady Enrelled.)	SOLDIER'S PENSION.	Name Co. ferred	Disability 6 9 9 8 Amount, \$ 3 6 9 9 Warrant issued Poolf V 1900.	JOHN W. LINDSBY, Commissions of Persons, WARRANT HANDED TO	Con V. Tarten, Ban Praint, Liama.	10000

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POWER OF ATTORNEY.

For Applicants Heretofore Allowed Pensions.

, 11 . ,	
STATE OF GEORGIA,	
Falkon County.	
personally appears. S. L. Land of Fulkon	
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 200, 1876 that he enlisted in the military service of	
the Confederate States (or of the State of) during the war he.	
the Confederate States (or of the State of tween the States, and serged as a Rural in Company 6, of 8th	
Project of National States, and series as a 100 per series of the Company of the	
Regiment of Volunteers, Infer 's Brigade; that whilst engaged in such military service in the State of August on the	
engaged in such military service in the State of	
day of au gue 1867, he was wounded, injured or diseased as follows:	
Trambed by riple back in less arm	
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The state of the s	
Deponent makes application for the pension to which he is entitled for the year	
ending October 26th, 1900. I have heretofore under said law as a resident of	
County been allowed an invalid pension of Dollars, for the year 189 7	
Sworn to and subscribed before me, this, the	
day of Much 1900. S POST OFFICE	
mme	
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 of disease.	
extent of the disability resulting from the wound of disease,	
STATE OF GEORGIA,	
Felkon County.	
. County.	
I, W. av. Louiseer ordinary of said County,	
do certify that I am well acquainted with A. A, Land the	
applicant in the foregoing affidavit, and am well satisfied that the statements made by him	
in his said affidavit are true, and I know 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 Frank 1900.	
ber many	
Ordinary County.	

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,
Fullyn County
-1 Page) 01
County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen
nd resident of said State, and has resided therein continuously ever since the
and resident of said State, and has resided therein continuously ever since the
aderate States (or of the State of) during the war between the
ay of MV 18 76 that he enlisted in the military service of the Con- ederate States (or of the State of Juring the war between the states, and served as a proposed in Company 6, of Ath Regiment
f Volunteers, 221 for 's Brigade; that whilst engaged
n such military service in the State of VA , on the 16 day
f 186 4, he was wounded, injured or diseased as follows:
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arun and left auxel
Julacly crisabling fork
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Deponent makes application for the pension to which he is entitled for year end-
ng October 26th, 1901. I have heretofore under said law as a resident of
County been allowed an invalid pension of Book Dollars, for the year 1900.
Dollars, for the year 1900. Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the
Hickay of Jany 1901. Postoffice attanta ya
Nore.—State fully the nature of the wound or character of disease which causes the disability, and explain partie-
farly the extent of the disability resulting from the wound or disease.
STATE) OF GEORGIA, July (42)
I, ocertify that I am well acquinted with AL and the
o certify that I am well acquinted with the pplicant in the foregoing affidavit, and am well satisfied that the statements made by him
in his said affidavit are true, and I know he is the individual he represents himself to be
nd that he resides in this County.
Given under my official signature and seal, this //th
day of laing 1901.
John R Wilkinson
Ann FILL TON
Ordinary County.

STATE OF GEORGIA,)	STATE OF GEORGIA,	l
Co	ounty.	County.	,
Ι,	hereby authorize	I,	hereby authorize
	of	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	of
to receive and receipt for the p	pension paid hereon and request that he remit same to	to receive and receipt for the pension	n paid hereon and reques
	by.	Minimum and American and Americ	by
at_	-	at	Market MC 100
IN WITNESS WHEREOR	F, I have hereunto set my hand and seal this	IN WITNESS WHEREOF, I h	ave hereunto set my hand
day of	1902.	day of1903.	
	[L. S.]		And the second control of the second
Executed in presence of		Executed in presence of	<u>x</u> .
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No.	S S S S S S S S S S S S S S S S S S S		lity 6
FOR THOSE ALREADY EMBOLLEO. No. 2/ DISABLED OLDIER'S PENSIO]	Name_County_CoGoGoJo		Name County Co. Co. Disability Amount,
	Nan Co. Co.	364	Co. Co.
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y authorize _ and request that he remit same to set my hand and seal this.... _ [L. S.]

POWER OF ATTORNEY.

JOHN W. LINDSEY,

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County.
Personally appears Shaued of ON
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 // 1874; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a free cute in Company 6, of 13 th Regiment
federate States (or of the State of
in such military service in the State of , on the day
of they 1861, he was wounded, injured or diseased as follows:
Wounded in left and i left wille disabling
Deponent makes application for the pension to which he is entitled for the year
ending October 26th, 1902. I have heretofore, under said law, as a resident of
County, been clowed an invalid pension of
County, been clowed an invalid pension of Dollars, for the year 19 Sworn to and subscribed before me, this the
Sworn to and subscribed before me, this the
day of And 19 1902 Post-office
Williamore
Nora.—State fully the nature of the wound or character of disease which causes the disability, and explain particularly like extent of the disability resulting from the wound or disease.
participation can extent of the distance resoluting from the would of disease.
STATE OF GEORGIA,
County. Revelous
I, Onlinary of said County,
do certify that I am well acquainted with
the applicant in the foregoing affidavit, and are well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

and the second
STATE OF GEORGIA,
a_County.
Personally appears & Land of
County, State of Georgia, who being didy 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 Nov 1826; that he enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and served as a final in Company 6, of 13 th Regiment of SC Volunteers, Lifty s Brigade; that whilst engaged
in such military service in the State of Ya , on the 16 day
of Cing 186 4, he was wounded, injured or diseased as follows:
Wound in left and + left andle
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No. of the Control of
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percentage enterprise the second of the seco
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
Sworn to and subscribed before me, this the
day of . 1903. Post-office.
China !! Collinson
Nyrs.—State fully the nature of the wound or character of disease which causes the disability, and explain pure that it is 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 SL Land
the applicant in the foregoing affidavit, and am well satisfied that the statements made by
him in his said affidavit are true, and I know he is the individual he represents himself to
be and that he resides in this County.
Given under my official signature and seal, this

your scal here

County.

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

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

County.

	- 1
STATE OF GEORGIA,	1
. County.	1
hereby authorize	
of	-
to receive and receipt for the pension paid hereon, and request that he remit same to,	1
. by	ŀ
at	ľ
IN WITNESS WHEREOF, I have hereunto set my hand and seal, this	
day of	1
[L. S.]	
Executed in presence of	
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SOLDIER'S PENSION DISABLED SOLDIER'S PENSION 1904. LOOA. Regiment 3 Hollo.i. Co. C. Regiment 3 Hollo.i. Co. C. Regiment 3 Hollo.i. Co. C. Regiment 4 Hollo.i. Co. C. Regiment 5 Hollo.i. Co. C. Regiment 6 Hollo.i. Co. C. Regiment 7 Hollo.i. Co. C. Regiment 7 Hollo.i. Co. C. Regiment 7 Hollo.i. Co. C. Regiment 6 Promi	1
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POWER OF ATTORNEY

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STATE OF	GEORGIA,)		
	.Coun	тү. ∫		
	I,		.hereby aut	horize
		of.		
to receive an	d receipt for the pensi	on paid hereon, and	request that he remit s	ame to
		by.		
at.				
In WITN	ESS WHEREGF, I have h	ereunto set my hand	and seal, this	
day of		1905.		
		v v		_[L. S.]
Execu	ited in the presence of	i		
		,		

CODE SECTION 1280.

(FUR THOSE ALREADY ENROLLED.)

SOLDIER'S PENSION Y. L. Land Fulton. DISABLED 1905. No. 7/ Disability Liadelle Name & County

WARRANT HANDED TO

JOHN W. LINDSEY.

Атопит, s/00,00

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton. County.
Personally appears D. L. Land 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 12 70 18/6; that be enlisted in the military service of the Con-
federate States (or of the State of) during the war between the
States, and gerved as a mafe in Company 6, of 13th Regiment
Volunteers 2211 's Brigade; that whilst engaged
in such military service in the State of , on the 16 day
of strift 186. H, he was wounded, injured or diseased as follows:
Consider left armoleft an-
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
Fulton. County, been allowed an invalid pension of
Dollars, for the year 1903.
Sworn to and subscribed before me, this the
day of 1904.
John Advickinson
Note State fully the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.
STATE OF GEORGIA,
Fulton. County.
I, John R. Wilkinson. J. G. Ordinary of said County, do certify that I am well acquainted with J. J. Flexe &
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this
(AD) John A Wil Kinson
AMIX John MULKINSON
beir Ordinary Fulton County.
Nore.—Fill all blanks and of Company and Regiment. Nore.—All vouchers and affidavite most bear date after January 1, 1904.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

1+07				
alton.	COUNTY.	,		
Personally appears	D. 4. X	and	of Fulto	\mathbf{m} .
county, State of Georgia,				
nd resident of said State	, and has resided th	nerein continuou	sly ever since th	e
ay of	18 ; that	he onlisted in th	e military service	e of the Con-
ederate States (or of the	State of _	C.) during the wa	
tates, and served as a	Julate	in Company	(1 , of /3	th Regiment
1 - V. Co. SMIT		1/	Brigade; that w	. 7
n such military service	n the State of_	.Va	, on the	6 day
i aug	1864, he	was wounded, i	njured or diseas	ed as follows:
Misabled	arno !	Euggle.	mill,	! w.
		// ,		,
	¥ 1			
Deponent makes ap				
ending October 26th,	1905. I have he	retofore, under	said law, as	a resident of
Que Huni	HILLOID.	County, been	allowed an inval	id pension of
Swprn to and subscr	ibed before me, th	is the	L'Za.	rol
day of		Post-offi	ce Atla	ecta
Norn.—State fully the na	ture of the wound or cibility resulting from the	haracter of disease w	thich causes the disa	bility, and explain
ı		. 1		
STATE OF GE	ORGIA,	ļ		
Fully ()	COUNTY.)		
I, lo certify that I am wel	4,0022 Jun	2000	9dinary o	f said County.
lo certify that I am wel	l acquainted with,	X. Z.	Lane	v .
the applicant in the fore	going affidavit, an	d am well satis	hed that the sta	itements made
by him in his said affiday		now he is the in	dividual he repr	esents himself
to be, and that he resides			JAN X	1300
Given un	ider my official sign	nature and seal,	this JAN A	1000
day of		f 1905.		
AME		1.500 L	Musson	
Bent bere.	Ord	inary_ H1	HOJAS.	County.,
	Note.—fili all blanks Note.—All vouchers a	and of Company and and affidavits must be	Regiment. ar date after January	1, 1905.

We personally know above stoled facts. We were with him in the army and have known him ever since. applicant is permanently disabled as stated and has been so to our certain knowledge ever since 1864. We have no interest in the second of a pension by him.

Second and the second of the second for the factor of the second of

POWER OF ATTORNEY.

COUNTY.		
I		_hereby authorize
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o receive and receipt for the pension paid he	reon, and request tha	t he remit same to
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In Witness Whereof, I have hereunto s		
In Witness Whereof, I have bereunto stay of1906.	et my hand and seal, t	this
In Witness Whereof, I have bereunto stay of1906.		this
In Witness Whereof, I have bereunto stay of1906.	et my hand and seal, t	this
IN WITNESS WHEREOF, I have hereunto stay of1906. Executed in the presence of	et my hand and seal, t	this
IN WITNESS WHEREOF, I have hereunto stay of1906.	et my hand and seal, t	this

No. 79

DISABLED
SOLDIER'S PENSION

1906.

Named J. A. Mallen.
Co. M. Regiment & M. M.
Disability Connect Amount, & M. M.

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4.

no dete

WARRANT HANDED TO

14

State of South Carolina.) County of Spartanburg.

I,T.a.Trimmier, Clerk of the Carcuit Court, in and for the County and State aforesaid, do hereby certify that Chas. ret ty whose benaine signature appears to the foregoing instrument, hereto attached was at the time of signing the same a Notary Public daly commissioned under the laws of this State, and that his offical acts as suen are entitled to full faith and credit.

Witness my hand and seal of said Court at Spar anburg Court mouse,

Clerk of Circuit Court

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

A CONTRACTOR OF THE PARTY OF TH
State of Georgia, Fulton County.
Personally appears . Land of Fulton.
County, State of Georgia, who, being duly sworn, says on oath that he is a bona fide citizen
and resident of said State, and has resided therein continuously ever since the
day of 1870 1884; that he emisted in the military service of the Con-
federate States, (or of the State of) during the war between the
States, and served as a forward in Company la, of 11 th Regiment
of 's Brigade; that whilst engaged
in such military service in the State of, on the day
of 1864, he was wounded, injured or diseased as follows:
X A STATE
Desabled Urm, uggle Hill, Va.
,
AND 10111 - 10
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
County, been allowed an invalid pension of
One Mundred Dollars, for the year 1905.
Sworn to and subscribed before me, this the
Day of 1906. Post-Office
John Mille Musical
FormState folly the nature of the wound or character of disease which causes the disability, and explain
particularly the extent of the disability resulting from the wound or disease.
State of Georgia,
Fulton. County.
I, Ordinary of said County
do certify that I am well acquainted with I . Jaud.
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know he is the individual he represents himself
to be, and that he resides in this County.
Given under my official signature and seal, this JAN 1 1906
day of
John Alvel Surrow
Affin To 11
ordinary 11110n. County.

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

Nors.—All vouchers and affidavits must hear date after January 1st, 1906.



State of Georgia.

Examine Department

Allanta Ca May 24 1893

Surgin Personathy Course Sultin County De & Might County De & Might Come and concernathy against and wind the Secretary of the Secretary of the Cocoon and their control of the Cocoon and and secretary second about

Cham & volutsenber Q. F. might before me, mayn 1893

Gom & gal.

State of South Carolina,)
County of Spartanburg. *)

I,T.R.Trimmier, Clerk of the Carolit Court, in
and for the County and State aforesaid, do hereby certify that Chas. let
ty, whose Lenuine signature appears too the foregoing instrument, hereto attaced, was at the time of signing the same a Notary Public duly

FOR Fried of Circuit Court

STATE OF GEORGIA.

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wybow's				Execute	me to me	
Indigent Pension.		4		d in preser	#C	
71901.				oce of Ordin		
Namolatilaa & Landry.				day of	County, to	
Widow of John Odansers Al Alyers Male D	;, ={				by	ereby authori
Approved				•	his check	
JOHN W. LINDSEY, Commissioner of Pensions.					or register	
WARRANT HANDED TO				;	ed mail.	
100.				- -	and that	
Geo. W. Harrison, State Printer, Atlanta,				, 9 0	b	1

1, .	(1	hereby authorize			
of		to receive and receipt for t		that he	
remit the same to me at		by his check or	r registered mail.		
Witness my hand	I this day of		190		
Executed	in presence of				,
	Ordinary,			L. S.	t
	County.				į.
(SEAT)			/		1
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	ä 13	1901	**************************************		
	Sion.	1901.	of Passion.		
S.A	Chsion.	Teleso 12 1901.	ED TO	T. Allentais.	
S.M(Pension.	Chings Jake 6 1901.	Committee of Presidents WARRANT HANDED TO	Thomas Atmost	

Questions for Applicant.

STATE OF GEORGIA,
hullon County.
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.) Malilon
2. How long and since when have you been a resident of this State?
3. When and where were you born? In Stall County Ga Sun 17 1824
4. When and where was your bushand born-state his full name, and when were you and be married? 21. Security Grantly Hold 24 1849
5. When and where and in what Company and Regiment did your husband enlist or serve during the
was between the States the Company I. Statusorth Dilly State . May 186 4.
6. How long did your husband serve in said Company and Regiment?
7. When and where did your husband's Company and Regiment surrender and was discharged?
8. Was your husband present at the time and place when his Company and Regiment surrendered?
9 If not with his command at surrender, state clearly and specifically where he was, when he left com-
mand, for what cause, and by what authority? De was present and
Durcher will this company.
10. When and where did your husband die? In Albunda August.
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: poverty infirmity
12. If upon the first ground, state how long you have been in such a condition that you cannot earn your support. If upon the second give a full and complete history of the infirmity and its priest. If upon tone third, state whether you are torsely blind, and when and where you lost your sight. I have computed the state whether you are torsely blind, and when and where you lost your sight. I have computed the state of
Claims wally upon get the ground. Can see a little
13. What has been your occupation since your husband's death? I there not decrease or or
14. How much can you carn gross, by your own exertion or labor? Mothing
14. How much can you carn groaf, by your own exertion or labor? Mothering 15. What property, real or personal, or income do you have or possess, and its gross value?
16. What property, real or personal, did you personal death of busband 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? He lift a file of the same of the
Lace which was cold on his debt to metal after
lace where the work of the last of the delt of the delt of the second segment of the last
18. Hoy have you been supported since death of nose and 1900?
19. How much did your support cost for each of those years, and how much did you contribute by your own labor or income? - Could Coutribule - Coul throw West in
20. What was your employment during 1899 and 1900-how much did you receive for each year?
21. Have you a family? If so, who composes such family? Give their means of support. Have they
21. Have you a family? If so, who composes such family? Give their means of support. Have they any lands or other property? I have no Januth my daughter who in husely my so
22. Have you ever made an application for pension before?
23. How many applications have you made for a Pension, and ander what class?
Sworn to and subscribed before me this 2 w
day and when 100 July Ell & anders
John C. Williams on Ordinary,

Ouestions for Witnesses. STATE OF GEORGIA, Hullou County. my Finelin Frakorowford of said State and County, having been presented as a witness in support of the Application of Mrs. Matildu & Landy 1900, and after having been duly sworn true answers to make to the for a Pension under the Act of tollowing questions, deposes and answers as follows: * A Louller 1. What is your name and where do you reside? Where does she regile, and how long and since when has she been a resident of this State? If the live is a Melinite and four lever resident out of Georgies When and where was she born? In Sale County go Sourly 1824 In reods County th 5 Were you ever acquainted with her hu-hand? 6. Where did he reside in 1861? When and to whom was be married Muried in fullow ga ful 26 184). 8. When and where was he bon? In Duny Co in May 1828.
9. How long have you known him? Horly 10. When and where did. It will be called up enlist in the war between the States, and in what Company and Regiment did he enlist and how do you know this " lay 1864, Les A " Billying I Sah Walt Work W A Halling Company 11. Were you a negotier of the same Company and Regiment? I was Calland . 12 How long did be perform regular military duty? Que Year 13. When and where was his Company and Regiment surrendered and discharged from service? +11 Aclarata May 1864 14. Were you with the command when it surrendered? 11 Was Lolen to Lander the husband of applicant present? 16 It not present, where was he? The was frement 17 When and where did be leave his Command? Allaufu For what cause of Denne serve at Close of war By whose authority he lets War had ended How do you know all the " (State fully and clearly.) I was his Ceptain From french. de la John le Landey 18 When and where did In Silanta 19 Where did he reside at his death and how long had he been a resident of Georgia at his death? In Maun. All his life le Landey . The first the lawful wildow of John 21. Has she remained unmarried since her soldier husband's death, and is now his widow? The " in never unice fine fanding dies. 22. What properly, effects or income has the applicant, if any, and how do you know this of your own knowledge? I'm has nothing whatever 23. What property, effects or income did applicant possess in 1899 and 1900 and what disposition did she make of it? The had nothing + therefore 24. Has applicant conveyed any property in last two years or given any away, if so what was it and to , The has wister sold nor from my thing own What is applicant physical condition and her chances and ability to earn a support !

· she is nearly blind

38. Is applicant able to earn a support at labor of any sort, if not why? The is not is
and is nearly blind
27. How was she supported for 1899 and 1900? 129 her dangleter
28. How much did applicant contribute to her support for last two years? 21 or thing
29. Give a full and complete statement of applicant's physical condition? The is at
henry buble old and nearly blind
30. What interest have you in the recovery of this pension by the applicant? It make the the factor of a good thus follows.
Sworn to and subsoftbed before me this
day of Mich 1901 It A Processor V.
day of
I show R gold were many, A Coll rawford
Gullan County. Witnesses.
Affidavits of Physicians.
STATE OF GEORGIA,
Dorgia County 1
Personally before me comes Seo G Merce and
both known to me te be reputable
physicians of said county, who, being severally sworn, say on ogth that they have examined carefully Mrs.
M Examples applicant for Revision under Act of 1990, and after
such personal examination say that her physical condition is this Mant applicant
hartestly Blind Dall of which trendered
her From lasning at support for heartel
and we have no interest in said pension if allowed.
Sworn to and subscripted before me this
day of Meh 1901), Slo, J. Succe
John R. Williams Williams
Fullan County.
ORDINARY'S CERTIFICATE.
STATE OF GEORGIA,)
3
1. And R weldingar , Ordinary in and for said county, hereby
certify that the applicant, Mrs
county, and has been a bona fide resident of this State since day of
18.24 and that the witnesses, Ar. warulle
Tales under the statements are of trustworthy character, and that their statements
are entitled to full faith and ordit. 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 1899.
of property, and in 1900 dollars worth of property. Witness my hand and official seal, this of day of the 1904
(SEAL)
County.
Norks-1. Before any questions are answered, the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly awar that you will true answers make to each of the questions select 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.
3. All affidavits must be made before Ordinary. 4. Only widows who were the wives of the dead husbands while they were soldiers need anniv—and are now
Norss—I. 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, 2. Additional affiliative may be attached; if thank spaces are insufficient. 8. All affidavits must be made before Ordinary. 4. Only widows who were the wives of the dead hubbands while they were soldiers need apply—and are now widows. Those married since 20th April, 1950, not entitled. 5. Witnesses and two Physicians are necessary to inake out claims.