

Wm. H. H. H.

No. *228*

APPLICATION FOR ALLOWANCE

FOR THE MONTH, OCT. 1900

Not

General Receipts

Applicant *Wm. H. H. H.*

County *Chickasaw*

Amount *500*

Date of Payment *Sept 1900*

Entered on Record

Chickasaw

RECEIVED BY THE DEPARTMENT

Office

PLATES

Application for Allowance
 No. 228
 FOR YEAR ENDING OCT. 31, 1864.
 General Receipt
 Applicant: *Henry B. Martin*
 County: *Fullton*
 Amount: *500*
 Date of Warrant: *Sept 1864*
 Entered on Record: *Oct 1864*
 Secretary: *W. H. H.*
 Official: *[Signature]*

STATE OF GEORGIA,

Fullton County.

I, *W. L. Leachman* Ordinary of said county, do certify that I am well acquainted with *Henry B. Martin*, 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: *E. J. Smith and*

W. L. Asher

are persons of respectability, and that their statements are worthy of full credit and belief.

I further certify that *Henry B. Martin* before whom the foregoing affidavits were made, and power of attorney was signed, is a *Fullton* day of *February* 1864, of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this *8th* day of *February* 1864.

W. L. Leachman

Ordinary *Fullton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fullton County.

KNOW ALL MEN BY THESE PRESENTS, That I, *Henry B. Martin* of

county, in said State, do hereby appoint

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

In witness whereof I have hereunto set my hand and seal, this

day of *February* 1864.

Executed in the presence of us:

(L. S.)

NOTES.

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

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

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

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

5. If application is for loss of fingers or toes the proofs must be made to show the number, and points where amputated.

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

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

***LIGHT PRINT AND, OR HAD COPY ***

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears *Henry B. Brown* of *Fulton* county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continuously since the *27* day of *March* 1891; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of *1st* Regiment of *Georgia* Volunteers, *Johnson*'s Brigade; that whilst engaged

in such military service, at the battle of *Franklin* in the State of *Tennessee*, on the *30* day of *November* 1864, he was wounded as follows: *Two gun shot wounds, one ball entering in front of left side above groin and passing out in rear crossing the spine another ball fragment left arm in middle third. The other suffered from several wounds and is permanently disabled & substantially & essentially rendered incapable of performing labor in the ordinary sense of the word.*

Dependent 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 *8* day of *February* 1889, *H. B. Brown*
W. L. G. Brown

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

STATE OF GEORGIA,

Fulton County.

PERSONALLY comes before me *H. L. Cannon* Ordinary of said county, *W. L. G. Brown* and *W. L. G. Brown*, both known to me as reputable physicians of said county, who, being severally sworn, say on oath that they have carefully examined *H. B. Brown* and after such examination

say that the applicant has been injured as follows: *Two gun shot wounds, one ball entering in front of left side above groin and passing out in rear crossing the spine another ball fragment left arm in middle third. The other suffered from several wounds and is permanently disabled & substantially & essentially rendered incapable of performing labor in the ordinary sense of the word.*

Sworn to and subscribed before me, this *8* day of *February* 1889, *W. L. G. Brown*
W. L. G. Brown
Ordinary.

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

STATE OF GEORGIA,

Fuller County.

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

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

Given under my official signature and seal, this *4th* day of *January* 189*8*

W. L. Latham
Ordinary *Fuller* County.

STATE OF GEORGIA,

Fuller County.

I, *W. L. Latham* Ordinary of said County, do certify that I am well acquainted with *Henry B. Martin* 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 *7th* day of *Feb* 189*1*.

W. L. Latham
Ordinary *Fuller* County.

1890.

APPLICATION FOR ALLOWANCE.

No. *262*

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

1891.

APPLICATION FOR ALLOWANCE.

No. *424*

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

Wm. L. Latham

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fuller County.

PERSONALLY appears *Henry B. Williams* of *Fuller* county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been since the *2nd* day of

April 1864; that he enlisted in the military service of the Confederate States (or of the State of

) during the war between the States, and served as a *Private* in Company *A*, of *1st* *Regiment*

of *Georgia* Volunteers *Jackson's* Brigade; that whilst engaged in such military service, at the battle of *Franklin* in the State

of *Tenn*, on the *30* day of *November* 1864, he was

wounded as follows: *shot through the body, left leg & right shoulder and left arm. Said wounds rendering him incapable of performing the ordinary manual avocations of life.*

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

Sworn to and subscribed before me, this the *4* day of *January* 1890, *W. B. Martin*

W. B. Martin

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

POWER OF ATTORNEY.

STATE OF GEORGIA

Fuller 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 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 *4* day of *January* 1890

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fuller County.

PERSONALLY appears *Henry B. Williams* of *Fuller* County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the *2nd* day of

April 1864; that he enlisted in the military service of the Confederate States (or of the State of

) during the war between the States, and served as a *Private* in Company *A*, of *1st* *Regiment*

of *Georgia* Volunteers *Jackson's* Brigade; that whilst engaged in such military service at the battle of *Franklin* in the State

of *Tenn*, on the *30* day of *November* 1864, he was

wounded as follows: *shot through the body, rendering him incapable of performing the ordinary manual avocations of life.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of *Five* dollars, for *1890*

Sworn to and subscribed before me, this the *4* day of *January* 1891, *W. B. Martin*

W. B. Martin

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fuller 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 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 *4* day of *January* 1891.

Executed in the presence of us:

[L. S.]

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

STATE OF GEORGIA.

Fulton County.

I, *W. L. G. Galtman* Ordinary of said county,

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

Given under my official signature and seal, this *3rd* day of *March* 1892

W. L. G. Galtman

Ordinary. *Fulton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I

of *Fulton* County, State of Georgia, do hereby appoint

W. B. Martin 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 and all moneys that may be issued by the Governor, or for any sum of money which may be coming to me for the reason aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this *3rd* day of *March* 1892.

Executed in the presence of us:

W. B. Martin *W. L. G. Galtman*

Send money to me as follows, by

W. B. Martin to *Fulton* P. O.

County, Georgia.

Fulton Co
Martin, W. B.
No. 448

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name *W. B. Martin*
County *Fulton*
Disability *Dis. from war*
Amount \$ *50*
Entered on record *Oct 3* 1892.

W. H. HARRISON,
Secretary of Legation Department,
AGENT.
Applicant

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

Martin, W. B.
Fulton Co

1893.

Fulton
Application for Allowance
No. 1217
W. B. Martin
Applicant
County
Amount
Date of Warrant
Entered on record
3/10
1893
W. B. Martin
Applicant

STATE OF GEORGIA.
FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,

Fulton County, }
PERSONALLY appears *H. B. Martin*
of *Fulton* County, State of Georgia, who, being duly sworn, says
on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously
since the *27th* day of *March* *1846*; that he enlisted
in the military service of the Confederate States (or of the State of
during the war between the States, and served as a *Private* in Company *A*
of *1st Regiment of Georgia* Volunteers *Jackson's*
Brigade; that whilst engaged in such military service at the battle of *Franklin*
in the State of *Tennessee*, on the *30th* day of
November *1864*, he was wounded as follows: *gun shot*
wounds through the lower part of the
body; also through left arm and
right shoulder; said wounds rendering him incompetent to perform
the ordinary manual vocations of life

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

Five Dollars for *1891*
Sworn to and subscribed before me this *3rd* day of *March* *1893*,
M. L. Calhoun Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Know all Men by these Presents, That I,
of

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

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

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

[L. S.]

P. O.

For Applicants Heretofore Allowed Pensions.
STATE OF GEORGIA,

Fulton County, }
PERSONALLY appears *H. B. Martin* 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 *27th*
day of *March* *1846*; 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 *1st Regiment*
of *Georgia* Volunteers *Jackson's* Brigade; that whilst engaged in
such military service at the battle of *Franklin* in the State
of *Tennessee*, on the *30th* day of *November* *1864*, he was
wounded as follows: *gun shot wounds through the lower part of the*
body; also through left arm and right shoulder; said wounds render-
ing him incompetent to perform the ordinary manual vocations of
life

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

Five dollars, for *1892*
Sworn to and subscribed before me, this, *3rd* day of *March* *1893*,
M. L. Calhoun Ordinary.

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

STATE OF GEORGIA,

Fulton County, }

I, *W. L. Calhoun* Ordinary of said County,
do certify that I am well acquainted with *H. B. Martin* 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 the foregoing affidavits were made, and power of attorney was signed, is a
true and correct copy of the original of said County, and the said affidavits and
signatures thereto are genuine.

Given under my official signature and seal, this *15th* day of *March* *1893*,
M. L. Calhoun
Ordinary *Fulton* County.

STATE OF GEORGIA,

POWER OF ATTORNEY

POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

County, State of Georgia, do hereby appoint

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

IN WITNESS WHEREOF, I have hereto set my hand and seal, this day of 1894.

Executed in the presence of us

DIRECTIONS.

Send money to me as follows, by

to County, Georgia.

P. O.

(For Those Already Enrolled.)

No. 1209

Soldier's Pension.

1894.

Name N.B. Martin

County Fulton

Disability 100%

Amount, \$

1894.

3/12

W. H. HARRISON,

Secretary Executive Department.

WARRANT HANDSD TO

Mrs. L. S. Martin

Geo. W. Harrison, State Printer, Atlanta.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

KNOW ALL MEN BY THESE PRESENTS, That I,

County, State of Georgia, do hereby appoint

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

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

Executed in presence of us

DIRECTIONS.

Send money to me as follows, by

to County, Georgia.

P. O.

(For Those Already Enrolled.)

No. 92

SOLDIER'S PENSION.

1895.

Name F. E. Martin

County Fulton

Disability 100%

Amount, \$

1895.

3/4

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDSD TO

Mr. L. S. Martin

Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Henry County, }

PERSONALLY appears H.B. Martin of Henry.

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 27th day of March 1848; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company A, of 12th Regiment of Ga Volunteers Jackson's Brigade; that whilst engaged in such military service at the battle of Franklin in the State of Tenn, on the 30th day of Nov 1864, he was wounded as follows: by gunshot, wound through the body ball entering just above left groin and coming out on the right side permanently and substantially disabling Applicant to perform Manual Labor

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

Sworn to and subscribed before me, this, the 3rd day of March 1894. H.B. Martin
Wm. A. Nelson

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, }

Henry County, }

I, Wm. A. Nelson Ordinary of said County, do certify that I am well acquainted with H.B. Martin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. at the present time

Given under my official signature and seal, this 3rd day of March 1894.



Wm. A. Nelson
Ordinary Henry County.

Georgia - Fulton County - J. W. L. Nelson
Ordinary of said County, do certify that I am well acquainted with H.B. Martin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County. at the present time

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County, }

PERSONALLY appears H.B. Martin 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 27th day of March 1848; that he enlisted in the military service of the Confederate States (or of the State of) during the war between the States, and served as a Private in Company A, of 12th Regiment of Ga Volunteers Jackson's Brigade; that whilst engaged in such military service at the battle of Franklin in the State of Tenn, on the 30th day of Nov 1864, he was wounded as follows: by gun shot wound through the body ball entering just above left groin and coming out on the right side, permanently and substantially disabling Applicant to perform Manual Labor

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the 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 1893

Sworn to and subscribed before me, this, the 3rd day of March 1895. H.B. Martin
W. L. Nelson Ordinary

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

STATE OF GEORGIA, }

Fulton County, }

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

Given under my official signature and seal, this 3rd day of March 1895.



J. L. Nelson
Ordinary Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1896.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1897.

[L. S.]

Executed in presence of _____

(For These Already Enrolled.)

No. 296

SOLDIER'S PENSION.

1896.

Name H. B. Martin

County Fulton

Disability 80% sound

Amount, \$ 226

1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Gen. W. H. Harrison, State Printer, Atlanta.

No date

(For These Already Enrolled.)

No. 661

INVALID

SOLDIER'S PENSION.

1897.

Name H. B. Martin

County Fulton

Disability 80% sound

Amount, \$ 500.00

1897.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDED TO

Gen. W. H. Harrison, State Printer, Atlanta.

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton

County.

Personally appears H.B. Martin 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 March 1848; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company A, of 1st Regiment of Georgia Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Florida, on the 30th day of November 1864, he was wounded, injured or diseased as follows: by gun shot wound through the body the ball entering just above left groin and coming out on the right side, permanently and substantially disabling applicant to perform manual labor

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

Sworn to and subscribed before me, this, the 26th day of Feb 1896.

M.L. Calhoun, ordy

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

STATE OF GEORGIA,

Fulton

County.

I, M.L. Calhoun

Ordinary of said County,

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

Given under my official signature and seal, this 26th day of Feb 1896.



M.L. Calhoun

Ordinary

Fulton

County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears H.B. Martin 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 March 1848; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company A, of 1st Regiment of Georgia Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Florida, on the 30th day of November 1864, he was wounded, injured or diseased as follows:

Gun shot wound through the body, permanently & substantially disabling applicant to perform manual labor

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1897. I have heretofore under said law as a resident of Fulton county been allowed an invalid pension of Fifty Dollars, for the year 1896.

Sworn to and subscribed before me, this, the 26th day of Feb 1897.

M.L. Calhoun POST OFFICE

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

STATE OF GEORGIA,

Fulton County.

I, M.L. Calhoun Ordinary of said County,

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

Given under my official signature and seal, this 26th day of March 1897.



M.L. Calhoun

Ordinary

Fulton

County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1898.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1899.

[L. S.]

Executed in presence of _____

Martin, H. B.
Hulton Co.

ACT OF 24 OCT. 1887.

(For Those Already Enrolled.)

No. 22574

**INVALID
SOLDIER'S PENSION.
1898.**

Name *H. B. Martin*
County *Spalding*
Disability *totally disabled*
Amount, \$ *50.00*

2/7 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

affid

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

M. data

Martin, H. B.
Hulton Co.

ACT OF 24 OCT. 1887.

(For Those Already Enrolled.)

No. 1878

**INVALID
SOLDIER'S PENSION.
1899.**

Name *H. B. Martin*
County *Spalding*
Disability _____
Amount, \$ *50.00* 1899.

2/6 1899.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

affid

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

M. data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears H. B. Martin 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 27th day of March 1848; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company C. of 1st Regiment of Geo. Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 30th day of Nov. 1864, he was wounded, injured or diseased as follows:

gun shot wound in body
permanently disabling him.

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, 1898. I have heretofore under said law as a resident of Fulton county been allowed an invalid pension of Twenty Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 17th day of July 1898, H. B. Martin POST-OFFICE

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

STATE OF GEORGIA,

Fulton County.

I, W. H. Hulsey, 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 17 day of July 1898.

Ordinary Fulton County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears H. B. Martin 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 27 day of March 1848; that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served as a private in Company C. of 1st Regiment of Geo. Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Georgia, on the 30 day of Nov. 1864, he was wounded, injured or diseased as follows:

gun shot wound in body
disabling him.

Deponent makes application for the pension to which he is entitled for the year ending October 20th, 1898. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of \$ 50.00 Dollars, for the year 1897.

Sworn to and subscribed before me, this, the 16 day of July 1898, H. B. Martin POST OFFICE

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

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 16 day of July 1898.

Ordinary Fulton County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

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

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

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

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

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

[L. S.]

Executed in presence of _____

(For These Already Enrolled.)

No. 644

INVALID

SOLDIER'S PENSION.

1900.

Name A. B. Martin
County Fulton
Disability _____
Amount, \$ 50

Warrant issued March 5 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

44

Geo. W. Harrison, State Printer, Atlanta.

no data

(For These Already Enrolled.)

No. 303

DISABLED

SOLDIER'S PENSION.

1901.

Name A. B. Martin
County Fulton
Disability Wound in body
Amount, \$ 50

Warrant issued July 15 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

44

Geo. W. Harrison, State Printer, Atlanta.

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears H. B. Martin of Fulton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State and County, and has resided therein continuously ever since the day of March 1848; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 1 th Regiment of Co. Volunteers, Fulton's Brigade; that whilst engaged in such military service in the State of Georgia, on the 30 day of Nov. 1864, he was wounded, injured or diseased as follows:

Gun shot wound in body

Deponent makes application for the pension to which he is entitled for the year ending October 30th, 1900. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of \$ 500 Dollars, for the year 1899.

Sworn to and subscribed before me, this, H. B. Martin day of March 1900, POST OFFICE

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

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 5 day of March 1900.

W. H. W. W.
Ordinary Fulton County.



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears H. B. Martin 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 March 1848; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company B, of 1 th Regiment of Georgia Volunteers, Fulton's Brigade; that whilst engaged in such military service in the State of Georgia, on the 30 day of November 1864, he was wounded, injured or diseased as follows:

Gun shot wound in body

Deponent makes application for the pension to which he is entitled for year ending October 30th, 1901. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of \$ 500 Dollars, for the year 1900.

Sworn to and subscribed before me, this the 3rd day of January 1901. Postoffice Atlanta
W. H. W. W.

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

Given under my official signature and seal, this 3rd day of January 1901.

W. H. W. W.
Ordinary Fulton County.



POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

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

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

[L. S.]

Executed in presence of _____

NAME SECTION 13A
(FOR THOSE ALREADY ENROLLED.)

No. 191

**DISABLED
SOLDIER'S PENSION
1902.**

Name Ed B Martin
County FULTON
Co. A Regiment 1st Reg
Disability Body wound
Amount, \$ 50.00

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

ONE W. HARRISON, 1000 FULTON, ALABAMA.

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

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

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

[L. S.]

Executed in presence of _____

NAME SECTION 13A
(FOR THOSE ALREADY ENROLLED.)

No. 174

**DISABLED
SOLDIER'S PENSION
1903.**

Name Ed B Martin
County FULTON
Co. A Regiment 1st Reg
Disability Body wound
Amount, \$ 50.00

1903.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

ONE W. HARRISON, 1000 FULTON, ALABAMA.

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

FULTON County.

Personally appears H. B. Martin 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 March 1848; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a private in Company A, of 1st Regiment of Ga Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Fla, on the 30th day of Nov 1864, he was wounded, injured or diseased as follows:

Wounded in body

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 Fulton County, been allowed an invalid pension of Eighty Dollars, for the year 1901.

Sworn to and subscribed before me, this 14th day of Jan 1902, H. B. Martin Post-office Fulton.

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



John P. Wilkinson
Ordinary

FULTON County.

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

Note.—All vouchers and affidavits must bear date after January 1, 1902.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

FULTON County.

Personally appears H. B. Martin 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 March 1848; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a private in Company A, of 1st Regiment of Ga Volunteers, Jackson's Brigade; that whilst engaged in such military service in the State of Fla, on the 30 day of Nov 1864, he was wounded, injured or diseased as follows:

Wounded in body

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 Fulton County, been allowed an invalid pension of 50 Dollars, for the year 1902.

Sworn to and subscribed before me, this 14th day of JAN 21 1903, H. B. Martin Post-office Fulton.

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

Given under my official signature and seal, this

day of JAN 21 1903.



John P. Wilkinson
Ordinary

FULTON County.

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

Note.—All vouchers and affidavits must bear date after January 1, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

by _____

at _____

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

day of _____, 1904.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

by _____

at _____

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

day of _____, 1905.

[L. S.]

Executed in the presence of _____

Martin H. B.
Fulton Co.
COUS SECTION 129.
(FOR THOSE ALREADY ENROLLED.)

No. 14

DISABLED
SOLDIER'S PENSION
1904.

Name *H. B. Martin*
County *Fulton*
Co. *A* Regiment *1st*
Disability *body wound*
Amount, \$ *75.00*
1904.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

off

Gen. W. Lindsey, State Printer, SAVANNAH.

no date

Martin H. B.
Fulton Co.
COUS SECTION 129.
(FOR THOSE ALREADY ENROLLED.)

No. 48

DISABLED
SOLDIER'S PENSION
1905.

Name *H. B. Martin*
County *Fulton*
Co. *A* Regiment *1st*
Disability *body wound*
Amount, \$ *50.00*
1905.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

off

Gen. W. Lindsey, State Printer, SAVANNAH.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears H. B. Martin 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 Mar 18 48 that he enlisted in the military service of the Con-
federate States (or of the State of Geo) during the war between the
States, and served as a Private in Company A, of 1st Regiment
of Geo Volunteers Jackson's Brigade; that whilst engaged
in such military service in the State of Tenn, on the 30 day
of Nov 1864, he was wounded, injured or diseased as follows:

Wounded in body.

Deponent makes application for the pension to which he is entitled for the year
ending October 29th, 1904. I have heretofore, under said law, as a resident of
50 Fulton County, been allowed an invalid pension of
Dollars, for the year 1903.

Sworn to and subscribed before me, this the
day of JAN 21 1904.

John R. Wilkinson Post-office Atlanta
State fully the nature of the wound or character of disease which causes the disability, and explain
particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton County.

I, John R. Wilkinson Ordinary of said County,
do certify that I am well acquainted with H. B. Martin
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 1904.

John R. Wilkinson
Ordinary Fulton County.

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



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally appears H. B. Martin 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 Con-
federate States (or of the State of Georgia) during the war between the
States, and served as a Private in Company A, of 1st Regiment
of Geo Volunteers Jackson's Brigade; that whilst engaged
in such military service in the State of Tenn, on the 30 day
of Nov 1864, he was wounded, injured or diseased as follows:

Body wound. Franklin, Tenn.

Deponent makes application for the pension to which he is entitled for the year
ending October 29th, 1905. I have heretofore, under said law, as a resident of
Fifty Fulton County, been allowed an invalid pension of
Dollars, for the year 1904.

Sworn to and subscribed before me, this the
day of JAN 21 1905.

John R. Wilkinson Post-office Atlanta
Note.—State fully the nature of the wound or character of disease which causes the disability, and explain
particularly the extent of the disability resulting from the wound or disease.

STATE OF GEORGIA,

Fulton COUNTY.

I, John R. Wilkinson Ordinary of said County,
do certify that I am well acquainted with H. B. Martin
the applicant in the foregoing affidavit, and am well satisfied that the statements made
by him in his said affidavit are true, and I know 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 1905
day of 1905.

John R. Wilkinson
Ordinary Fulton County.

Note.—Fill all blanks and of Company and Regiment.
Note.—All vouchers and affidavits must bear date after January 1, 1905.



STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to _____
by _____
at _____

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

[L. S.]

Executed in the presence of

**DISABLED
SOLDIER'S PENSION
1906.**

Name *W. B. Martin*
County *Fuller*
Co. *A. Regiment 1st Ea*
Disability *Body Wound*
Amount *\$2000*

Amount, \$50.00

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

WARRANT HANDED TO

[illegible]

ms. Dutta

Martin, H. B. Fulton Co.

U761 MONROVIA NOV J

CODE SECTION 120.
FOR THOSE ALREADY ENROLLED)

No. 29

DISABLED SOLDIER'S PENSION 1907.

Name, W. C. Martin
County Fulton
Co. A. Regiment 1. Ga.
Disability Body wound
Amount, \$ 50.00

1907

JOHN W. LINDSEY,
Commissioner of Pensions.

Commissioner of Pensions.

WARRANT HANDED TO

Doc W. H. Bennett, President, Bennett & Bennett, Inc.

STATE OF GEORGIA,

— COUNTY.

I, _____ hereby authorize

_____ of _____
to receive and receipt for the pension paid hereon, and request that he remit same to
_____ by _____
at _____

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

[L. S.]

Executed in presence of

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County,

Personally appears H. B. Martin 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 28 day of March 1844; that he enlisted in the military service of the Confederate States, (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 1th Regiment of Sta. Volunteers Jackson's's Brigade; that whilst engaged in such military service in the State of Tenn., on the 30 day of Nov. 1864, he was wounded, injured or diseased as follows:

Body Wound. Franklin Tenn.

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

Sworn to and subscribed before me, this the

day of JAN 1 1906 1906.

John R. Wilkinson Notary Public for Georgia.
State full the nature of the wound or character of disease which causes the disability, and explain particularly the extent of the disability resulting from the wound or disease.

State of Georgia,

Fulton County,

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

Given under my official signature and seal, this JAN 1 1906

day of JAN 1 1906.

John R. Wilkinson Ordinary, Fulton County.



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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County,

Personally appears H. B. Martin 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 all life 18 ; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company A, of 1th Regiment of Ga Volunteers Jackson's's Brigade; that whilst engaged in such military service in the State of Tenn., on the 30 day of Nov. 1864, he was wounded, injured or diseased as follows:

Body wound. Franklin Tenn.

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

Sworn to and subscribed before me, this the

day of JAN 2 1907.

John R. Wilkinson

Postoffice Atlanta Ga.

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

State of Georgia,

Fulton County,

I, John R. Wilkinson Ordinary of said County, do certify that I am well acquainted with H. B. Martin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 JAN 2 1907.



John R. Wilkinson Ordinary, Fulton County.

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

Georgia }
Fulton County } Know all men by these
present, that J. Henry
B. Martin of the City of Atlanta
said County, late a member of Company
A. 1st Confederate Regiment Georgia
Volunteers, do hereby constitute and
appoint Mrs. Leva Jane Blunkett of
the City of Atlanta said County my true
and lawful Attorney in fact for me
and in my name to receive and accept
for the pension of \$50 (\$50) dollars
due me for the year 1894 on account
of a severe shot wound through the
body. This power of Attorney is accom-
panied with such an interest in
the said Attorney in fact as to be
irrevocable. Now I hereby satisfy
and confirm all acts done by
my said Attorney in fact as fully
and completely as if done by myself
this 15th day of July 1894.

Witness my hand and seal
Signed sealed & delivered } J. B. Martin
in presence of }
Mary G. Martin }
John Brown }
W. B. Fulton C. G. }
J. B. Martin

Mary J. Martin }
 L. B. Martin }
 N. B. Martin }
 C. G. Martin }

Audited Feb. 10 1891.
 Wm. S. Smith
 COMPTROLLER GENERAL

Martin, N. B.
 1891.
 Maimed Soldiers.
 Voucher No. 427
 Amount \$ 50.00
 Paid to N. B. Martin
 For Body Maimed.
 Feby 10 1891.

Included in warrant No.
 issued to Treasurer.
 1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

Audited Feb. 5 1890
 Wm. S. Smith
 COMPTROLLER GENERAL

Maimed Soldiers.
 Voucher No. 262
 Amount \$ 50
 Paid to N. B. Martin
 For Disabled by
 Body Maimed
 Feby 5 1890

Included in warrant No.
 issued to Treasurer.

18

WARRANT CLERK.

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

Applicant

1891.

No. 1127

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT. }

Atlanta, Ga. Feby 10 1891.

Mr. H. B. Martin of the County
of Fulton having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
body wounds
He is entitled to receive the sum of Fifty Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

W. J. Martin
GOVERNOR.

By the Governor.

SEC'Y EXECUTIVE DEPARTMENT.

\$ 50

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

Fifty Dollars,
per above voucher, this 10 of Feby 1891.
H. B. Martin

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 267 -
Atlanta, Ga., Feb 5th 1890

Mr. *H B Martin* of the County
of *Fulton* having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,

approved, Dec. 24, 1888, and the same having been examined and allowed for

Disables by body wound -
He is entitled to receive the sum of *Fifty 00/100* Dollars
for such disability, the same being the allowance for the year ending October 24, 1890.

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

By the Governor.

W H Harrison
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty 00/100 Dollars
per above voucher, this *5* of *Feb* 1890

H. B. Martin

Audited *Feb. 8th* 1889.
Wm Amgler
COMPTROLLER GENERAL.

Fulton
Claimed Soldiers.

Voucher No. *228*

Amount. \$ *50.*

Paid to *Henry B Martin*
For *General disability*
from body wound
Feb 8. 1889.

Included in Warrant No.

issued to Treasurer.

1889.

WARRANT CLERK.

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

Applicant

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

No. 228

Atlanta, Ga. Febry 8 1889

Mr. Henry B. Martin of the County
of Fulton having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Act,
Dec. 24, 1888, and the same having been allowed for

General disability from body wounds
He is entitled to receive the sum of \$500.00 Dollars
for such disability, the same being the allowance due for the year ending October 24, 1889.

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

W. H. Gordon
GOVERNOR.

By the Governor

W. H. Hansen

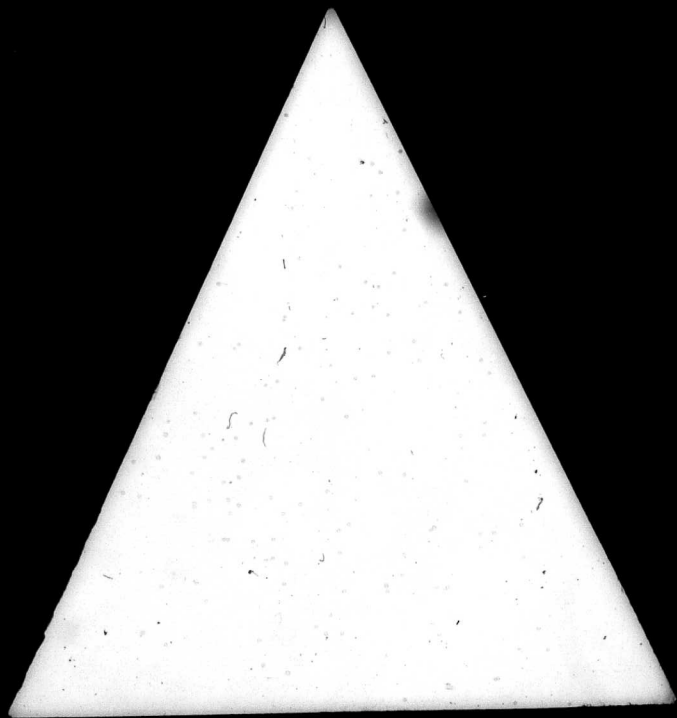
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER R. L. HARDEMAN,

\$50.00 Dollars,
per above voucher, this 8th of Febry 1889.

H. B. Martin

St. John's



Martin, H. W.
Fulton County

OK for 1913
O No.

**Confederate
Soldier's Application.**

☒ UNDER ACT 1910.

County *Fulton*

Name *H. W. Martin*

Company *D*

Regiment *10. Va. cav-*

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAR. F. BYRD, State Printer, ALBANY.

10/18-1912
ENTERED ROSTER OFFICE

ENLARGED ROSTER OFFICE

CHAS. F. BROWN, STATE PRINTER, ALABAMA.

J. W. LINDSEY,
Commissioner of Pensions

Approved _____

Regiment _____

Company _____

Name H. H. Martin

County Wilkes

UNDER ACT 1910

Soldier's Application

Confederate

October 1913

Martin, H. H.
Wilkes County

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 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). H. H. Martin
Wilkes County, Wilkes County, Georgia
2. How long and since when have you been a continuous resident citizen of this State? About Eighteen years
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865? Yes, enlisted a volunteer of Confederate States.
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service). 1861 Company D 10th Georgia Cavalry Wilkes County, Ga.
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge). From 1861 to 1865 at Appomattox in 1865.
6. When and where was your Company and Regiment surrendered or discharged from the Service? Did not surrender, but disbanded at Appomattox, Va. April 9, 1865.
7. Were you actually present with your Command when it was surrendered or discharged? Yes when disbanding.
8. If you were not actually present, state specifically and clearly where you were. Was present at time was discharged.
9. Where was your Command when you left it? at Appomattox, Va.
10. What was the command of your Command? was the command of 10th Georgia Cavalry.
11. When did you leave the Command? at the Surrender at Appomattox, Va.
12. For what cause did you leave? Command Surrendered to Federal Troops.
13. By whose authority did you leave? By order of my superiors.
14. For how long was your leave granted? In what way? No time mentioned. Indefinite.
15. Why did you not return to your Command after leave expired? Was away at an early date.
16. In what way were you prevented? He was away at an early date.
17. What effort did you make to return? None.
18. Were you captured during the war? No.
19. If so, when, and where? In what prison were you held and when were you released? Was not captured or even wounded.
20. 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). A little home hold & kitchen furniture worth probably \$100.
21. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price? None whatever.
22. 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). Nothing but a little home hold furniture cash value probably \$75.
23. What annual or monthly income or earnings of yourself and wife and the source derived have you? None.
24. Are you drawing a pension of any amount from this State or the United States? No.
25. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? No. This is first application.

Sworn to and subscribed before me, this the _____ day of _____ 1913.
H. H. Martin
of _____ County.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

County.

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

1. What is your name and where do you reside? W. C. Harris Nelson County, Va.
2. How long and since when have you known W. C. Harris the applicant? Knew him since 1864
3. Where does he now reside, and since when has he been a bona fide, continuing resident in this State and how do you know? He resides in Georgia
4. When, where and in what Company and Regiment did W. C. Harris enlist during war from 1861 to 1865? (Give date and place) 1861. Morris Co. Va. 510th Cavalry
5. How did you obtain your information of this Service? Member of Company 510th Cavalry under Lieutenant W. C. Harris
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) During whole time of war
7. When and where was his Command surrendered or discharged (give date and place) Disbanded at Appomattox, Va.
8. Were you personally present at the Surrender? Yes Appomattox, Va.
9. If not, where were you and how came you there? when disbanded
10. Was the applicant personally present with his Command at surrender? Yes present
11. If not where was he and how came him there?
12. When did he leave his Command? 1865 Where was his Command when he left it? Appomattox, Va. for what cause did he leave? Wounded then
By whose authority did he leave? to spare authority and how long was he granted leave? to me indefinite 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? There was no command How do you know?

14. What effort did he make to return to his Command and how do you know? None

15. Was applicant captured as a prisoner? No If so, when and where? In what prison was he held? None and when released?

Sworn to and subscribed before me, this the 13th day of Oct 1911. W. C. Harris
O. H. Fitzpatrick J. P. Ordinary,
of Nelson County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

County.

Personally before me comes W. C. Harris who on oath says that they are freeholders residing in said County and we know W. C. Harris the applicant for pension and we know the property that is now in the use, possession and control of himself and wife and of its cash value to wit: (Make List by items and value.) none

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov 1908? (State it fully by items.) None

2. When and to whom was it sold or given to? None

3. What was the price paid or stated to be paid? None

4. What relation is the party to applicant? None

5. What disposition was made of the proceeds of the sale? None

6. Was the disposition of this property made in good faith and full values or was it made to obtain a pension? Yes

Sworn to and subscribed before me, this the 13th day of Oct 1911. W. C. Harris
John P. Wilkinson Ordinary,
of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

County.

John P. Wilkinson Ordinary of said County, certify that I know the applicant W. C. Harris for Pension is the person he represents himself to be and resides in said County. That I also know W. C. Harris the witness swearing to the service and W. C. Harris who are freeholders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Fulton Co shows that W. C. Harris and wife value for tax is in 1908, \$ 1500 for 1909 \$ 1500 for 1910 \$ 500

Sworn under my hand and official seal of office this 16 day of Oct 1912. John P. Wilkinson Ordinary, Fulton County.

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

13. In what way was he prevented from returning to his Command? *There was no command.*
How do you know? *None*
14. What effort did he make to return to his Command and how do you know? *None*
15. Was applicant captured as a prisoner? *No*. If so, when and where?
In what prison was he held? *None* and when released?

Sworn to and subscribed before me, this the *13th* day of *Oct*, 1911
O. H. Fitzpatrick J.P. Ordinary,
of *Nelson* County.

said County. That I also know *W. P. Martin & J. W. Birdrup* the witness swearing to the service and *W. P. Martin & J. W. Birdrup* who are freeholders; that they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Returns of *Fulton Co* shows that *H. W. Martin* and wife value for tax is in 1908 \$ *1500* for 1909 \$ *1500* for 1910 \$ *500*

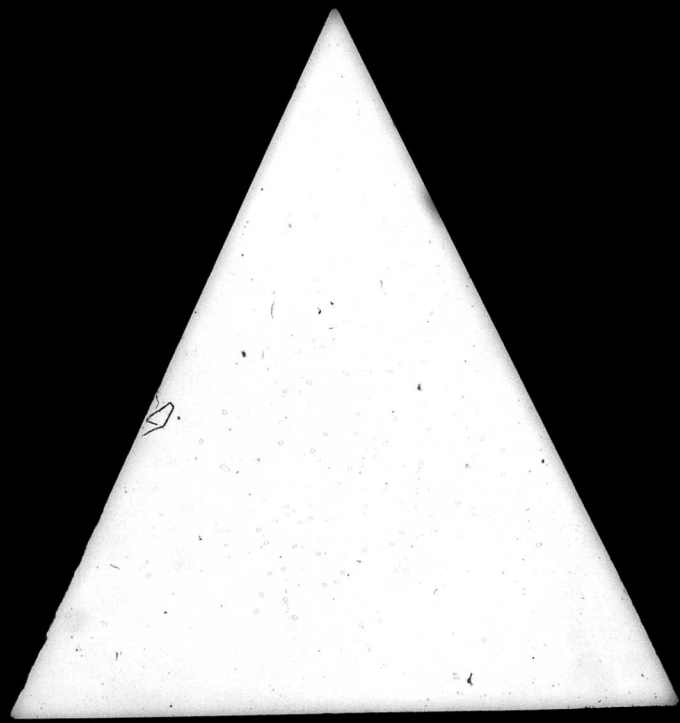
Sworn under my hand and official seal of office this *16* day of *Oct* 1912
John R. Peterson Ordinary, *Fulton* County.

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

Providence
Mr. H. W. Martin. Dec 11/1911
Dear Sir:-
Enclosed find
find your property papers
any time I can get them
shown, do not hesitate to
ask me
Yours truly
J. Darnett

I Frank Darnett do hereby
certify that I was a member
of Co F 10th Va Cavalry during the
Civil war and that H. W. Martin
was a member of the same
company and was a Lieutenant
in the Co during the war.
Given under my hand and seal
this 11th day of Dec 1911

Frank Darnett (SS)
Providence
Dec 11/1911



POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, _____, hereby authorize

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

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

Executed in presence of _____ [L.S.]

Martin, James
Indigent Pension
No. *OK for 1908*

INDIGENT PENSION.

1907

Name *James L. Martin*
County *Spalding*
Co. *K-17458 Ala* Regt.
Approved _____ 190_____

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

4/30/07

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fullton COUNTY.

Thos W Melch of said State and County, having been presented as a witness in support of the application of Geo S Martin 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? Thos W Melch
Fullton Co Ga
2. Are you acquainted with Geo S Martin, the applicant; if so, how long have you known him? 20 years
3. Where does he reside, and how long and since when has he been a resident of this State? Fullton Co Ga - Veterans or none
4. When, where and in what company and regiment did he enlist, and how do you know?
5. Were you a member of the same company and regiment?
6. How long did he perform regular military duty?
7. When and where was his command surrendered?
8. Were you present when it surrendered?
9. Was applicant present?
10. If he was not present, where was he?
11. When did he leave his command? For what cause?
12. By what authority he left? How do you know all of that?

11. What property, effects or income has the applicant? (Give your means of knowledge.)

None - Live near him - receive all along

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907,

None

and what disposition, if any, did he make of same? None

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

None

14. What is the applicant's occupation and physical condition? Nothing - Blind - do anything - had sound in his head - health from medicine - old & infirm

15. Is the applicant unable to support himself by labor of any sort; if so, why? He is unable for reasons stated above

16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?

By his own children

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

None

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. Sound - old & infirm - had health - usually

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

Self and wife - nothing

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

Sworn to and subscribed before me, this the 8th day of Sept 1904

John R. Wickman Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fullton COUNTY.

Personally came before me J. B. Palmer and J. W. Carmichael, and

both known to me as reputable physicians

of said County, who, being severally sworn, say on oath that they have examined carefully Mr

James S. Martin, applicant for pension under Section 1254, Code, and after

such personal examination say that his precise physical condition is as follows:

Suffering from the effects of a gunshot wound in the left leg inflicting the bone and disabling him from walking or working. He also suffers from Piles and general debility

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the 8th day of Sept 1904.

John R. Wickman Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fullton COUNTY.

I, John R. Wickman Ordinary, in and for said County, hereby certify

that the applicant J. S. Martin resides in said County, and has

been a bona fide resident of this State since the 1st day of 1898

and that the witness, viz: Thos W Melch

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 heron prescribed, and that the full text of the affidavit was read to the applicant and witness before same was signed.

I further certify that the tax digest of _____ County shows that applicant

returned for taxation in his name in 1901 _____ Dollars of

property, and in 1902 _____ Dollars of property; in 1903

_____ Dollars of property; in 1904

_____ Dollars of property; in 1905

_____ Dollars of property; in 1906

_____ Dollars of property; in 1907

_____ Dollars of property.

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

Witness my hand and seal of office, this 8th day of Sept 1904.

John R. Wickman Ordinary.

of Fullton County.

NOTED.

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

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

3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

Self and saddle - nothing

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

Sworn to and subscribed before me, this the

22 day of Sept 1906

John K. Peterson

Ordinary.

Witness.

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

2. Additional affidavit may be attached if blank space are insufficient.

3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

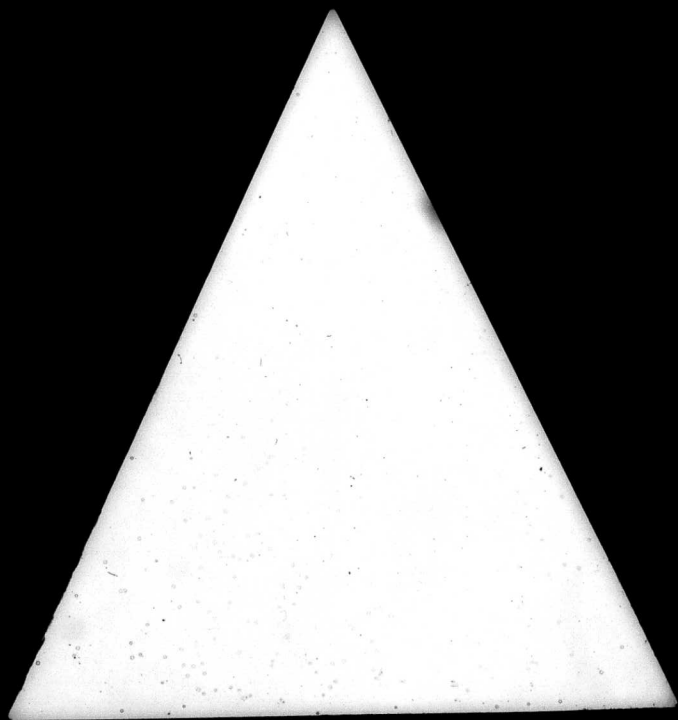
The State of Alabama,)
Jefferson County.)

I, C. M. Kelley, of Birmingham, in said County and State, hereby certify that I was Brigadier General in the army of the Confederate States of America; that J. L. Martin was First Sergeant of Company K, 17th Alabama Regiment, in my brigade; and later, was First Lieut. in the combined regiment composed of the 33rd and 17th Alabama in the same Company; that he was honorably paroled on the 3rd day of May, 1865, at Greensboro, N.C.,

This 23rd day of July, 1906.

Sworn to and subscribed before me,)
this 23rd day of July, 1906.)

S. E. Hance
Judge of Probate.



Application for Allowance

FOR

Right leg shorter

Applicant Jos. P. Martin

County Fulton

Amount. 24 1/2

Date of Warrant. May 9. 89

~~Entered on Record,~~

May 9 1889

W. H. C.

Secretary Executive Department

Applicant

STATE OF GEORGIA, }
Fulton County }

PERSONALLY appears *J.P. Martin* of *Fulton* county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such since the *3rd* day of *January* 1864; that he enlisted in the military service of the Confederate States (of the State of *Georgia*) during the war between the States, and served, as a *Private* in Company *A*, of *12th Battalion* Volunteers *1st Cavalry* Brigade; that whilst engaged in such military service, at the battle of *Monocacy* in the State of *Maryland*, on the *9th* day of *July* 1864, he was wounded as follows: *in the right leg between the knee and ankle. Geygnelle set in and destroyed portions of spine and nerves of back leg. Gangrene has appeared at different times, shocking the whole nervous system and paralyzing portions of foot & leg so immediate removal of the leg is absolutely & inevitably possible.*

Dependent 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.

Subscribed before me, this *6th* day of *January* 1888 } *J.P. Martin*
Wm. A. Hall
Notary Public, Fulton County, Georgia.
Note: State fully nature of wound or character of disease which causes the disability, and explain particularly the extent of the disability.

COMMISSIONED OFFICER'S AFFIDAVIT.

STATE OF GEORGIA, }
Fulton County }

PERSONALLY came before me *George M. Hanvey* of the county of *Fulton* State of Georgia, who, being duly sworn, says that he was a commissioned officer in Company *A*, of *12th Battalion* Volunteers, and that dependent knows *J.P. Martin* and that he received the wounds (or contracted the disease) in the military service as stated in his foregoing affidavit, and that wounds (or disease) permanently disables the said *J.P. Martin*, as stated by him in said affidavit. Dependent further states that said *J.P. Martin* is a *bona fide* citizen of this State, and resides in *Fulton* county.

Sworn to and subscribed before me, this *6th* day of *January* 1888
Wm. A. Hall
Notary Public, Fulton County, Georgia.
Geo. M. Hanvey
Major 1st Cavalry

The foregoing affidavit, changed to suit the facts, should be made by a commissioned officer of the Company or Regiment. If the affidavit of such an officer is not obtainable, the following affidavit of three responsible citizens should be furnished:

Application for Allowance

Right by *Wm. A. Hall*
Applicant *Jos. P. Martin*
County *Fulton*

Amount *\$100*

Date of Warrant *May 1888*

Entered on Record

May 1888

Secretary Executive Department

affidavit

STATE OF GEORGIA,

County.

PERSONALLY COMES

citizens of

county, in said State,

who, being duly sworn, say that they are acquainted with

and know that he received the wounds (or contracted the disease) in the military service, as stated by him in the foregoing affidavit; that said wounds (or disease) permanently disables applicant, as stated by him; that said applicant is a bona fide citizen of this State, and resides in County, and we are well satisfied that all the statements in his affidavit are true.

Sworn to and subscribed before me, this

day of

188

STATE OF GEORGIA,

County.

PERSONALLY COMES before me W. L. Cochran Ordinary of said county,

R. L. Word and E. van Gortonne, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have carefully examined Joseph P. Martin and after such examination say that the applicant has been injured as follows:

The Muscles of the calf of right leg lacerated and contracted from gun shot wound causing shortening so that the leg can not be brought to the ground paralyzing 3 toes and permanently and substantially impairing the use of the hand

Sworn to and subscribed before me, this

7th day of January 1888

W. L. Cochran

ORDINARY.

NOTE.—The physicians will state fully the extent of the wound and the disability resulting therefrom.

STATE OF GEORGIA,

County.

I

W. L. Cochran

Ordinary of said county,

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

I further certify that Mark R. Hall before whom the foregoing affidavits were made and power of attorney was signed, is a Mary P. P. Ordinary of said county, and that the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this

7th day of January 1888

W. L. Cochran

Ordinary

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

Know all men by these presents, That I

of

county, in said State, do hereby appoint

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

In witness whereof I have hereunto set my hand and seal, this

day of

188

[L. S.]

Executed in the presence of us:

STATE OF GEORGIA,

Fulton County.

I, *W. L. Calhoun*

Ordinary of said county,

do certify that I am well acquainted with *J. P. Martin* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

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

Given under my official signature and seal, this *4th* day of *Feb* *1890*

W. L. Calhoun

Ordinary

Fulton

County

STATE OF GEORGIA,

Fulton County.

I, *W. L. Calhoun*

Ordinary of said County,

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

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

Given under my official signature and seal, this *4th* day of *Feb* *1891*

W. L. Calhoun

Ordinary

Fulton

County

1890.

Martin, J. P.

No. *122*

APPLICATION FOR ALLOWANCE.

THE TALL TALK OFFICE IN 1891.

Right Leg disabled

Applicant *J. P. Martin*

County *Fulton*

Amount *50*

Date of warrant *Feb 4*

Entered on record

Feb 4 *1890*

W. L. Calhoun

WARRANT IS VALID 30

Applicant

1891.

Martin, J. P.

No. *17*

Application for Allowance

THE TALL TALK OFFICE IN 1891.

Leg disabled

Applicant *J. P. Martin*

County *Fulton*

Amount *50*

Date of Warrant *Feb 3*

Entered on record

Feb 3 *1891*

W. L. Calhoun

SECRETARY EXECUTIVE DEPARTMENT.

WARRANT HANDLED TO

THE TALL TALK OFFICE IN 1891.

Applicant

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears *J. P. Martin* of said county, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has been such continually since the *birth* day of *Jan'y* 1844; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *B*, of 125th *Regiment of Georgia* Battalion Volunteers *Evans*'s Brigade; that whilst engaged in such military service, at the battle of *Monocacy* in the State of *Maryland*, on the *9th* day of *July* 1864, he was wounded as follows: *by a gunshot wound in the right leg between the knee and ankle, gangrene having set in the calf, a number of small bones were in large degree, causing paralysis of the right foot, rendering said limb substantially and essentially useless, and thereby disabling applicant from doing active manual labor.*

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

Sworn to and subscribed before me, this *4th* day of *February* 1890.

W. L. Seaborn

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

KNOW ALL MEN BY THESE PRESENTS, That I,

county, in said State, do hereby appoint

of *J. P. Martin* 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 *4th* day of *February* 1890.

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

PERSONALLY appears *J. P. Martin* 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 *birth* day of *Jan'y* 1844; that he enlisted in the military service of the Confederate States (or of the State of *Georgia*) during the war between the States, and served as a *Private* in Company *A*, of 125th *Battalion of Georgia* Volunteers *C. A. Evans*'s Brigade; that whilst engaged in such military service at the battle of *Monocacy* in the State of *Maryland*, on the *9th* day of *July* 1864, he was wounded as follows: *in the right leg below the knee, gangrene destroyed the muscles of said leg and, paralyzing the foot and rendering the leg essentially and substantially useless.*

Deponent desires to participate in the benefits of the Act, approved October 24, 1887, and the acts amendatory thereof, and makes application for the allowance to which he is entitled for the year ending October 26, 1891. I have heretofore been allowed a pension of *Five* dollars, for 1890.

Sworn to and subscribed before me, this *3rd* day of *February* 1891.

Joseph P. Martin

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

Know all Men by these Presents, That I,

of *Fulton* County, State of Georgia, do hereby appoint

of *J. P. Martin* 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 *3rd* day of *February* 1891.

Executed in the presence of us:

DIRECTION.

Send money to me as follows, by

to

County, Georgia.

P. O.

POWER OF ATTORNEY. STATE OF GEORGIA.

Know all Men by these Presents, That I

County, State of Georgia, do hereby appoint

my true and lawful attorney in fact, for
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 accept 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

Executed in the presence of us:

Send money to me as follows, by

STATE OF GEORGIA

County, Georgia.

P. O.

Martin, Joseph B.
Chilton Co.

1893

June 10

No. 121
Application for Allowance

Received by
Applicant, Joseph B. Martin

County, Chilton

Date of Warrant, 3/15/93

Entered on record, 3/15/93

Warrant Number 121

Approved

No later

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA, }

Fulton County, }

PERSONALLY appears Joseph P. Martin 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 January 1844; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company 4, of 12 th Regiment of Georgia Volunteers C. R. Evans's Brigade; that whilst engaged in such military service at the battle of Maricao in the State of Maryland, on the 9 day of July 1864, he was wounded as follows: shot with a rifle ball below the knee, gangrene set in destroying the muscles of the leg, and paralyzing the foot rendering the said limb essentially and substantially useless, rendering defendant unable to follow the ordinary avocations of life

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

Twenty dollars, for

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

W. L. Calhoun Ordinary

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

STATE OF GEORGIA, }

Fulton County, }

I, W. L. Calhoun Ordinary of said County,

do certify that I am well acquainted with Joseph P. Martin 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, in a County of said County, and the said affidavits and signatures thereto are genuine.

Given under my official signature and seal, this 15 day of March 1893.

W. L. Calhoun Ordinary

Fulton County.

STATE OF GEORGIA
POWER OF ATTORNEY

STATE OF GEORGIA.

Fulton County.

I, *W. L. Leath* Ordinary of said county,

do certify that I am well acquainted with *Joseph P. Martin* the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and that he is disabled, to the extent he claims, and I know he is the individual he represents himself to be, and that he resides in this county.

Given under my official signature and seal, this *1st* day of *March* 1892.

W. L. Leath
Ordinary *Fulton* County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

Know all Men by these Presents, That I,

of

County, State of Georgia, do hereby appoint

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

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

[L. S.]

Executed in the presence of us _____

DIRECTIONS.

Send money to me as follows, by _____

to _____

P. O.

County, Georgia.

SOLDIER'S PENSION.

1892.

FOR THE YEAR ENDING OCTOBER 31, 1892.

Name *J. P. Martin*
County *Fulton*
Disability *Dr. Leg*
Amount, \$ *50*
Entered on record *Mar 2* 1892.
W. H. HARRISON,
Secretary of Executive Department.
No. 1708
AGENT.
applicant
Geo. W. Harrison, State Printer, Atlanta, Ga.

Soldier's Pension.

1894.

Name *Joseph P. Martin*
County *Fulton*
Disability *Disabled Leg*
Amount, \$ *50*
1894.
W. H. HARRISON,
Secretary Executive Department.
applicant
Geo. W. Harrison, State Printer, Atlanta.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County, }
 PERSONALLY appears Joseph P. Martin
 of Fulton County, State of Georgia, who, being duly sworn, says
 on oath that he is a *bona fide* citizen and resident of Georgia, and has been such continuously
 since the 3rd day of January 1844; that he enlisted
 in the military service of the Confederate States (or of the State of Georgia)
 during the war between the States, and served as a private in Company E
 of 12th Regiment of Georgia Volunteers Sam C. Adams's
 Brigade; that whilst engaged in such military service at the battle of Monocacy
 in the State of Maryland, on the 9th month day of
July 1864, he was wounded as follows:

Shot with a rifle ball below the knee, gangrened and destroying the muscles of the leg, paralyzing the foot rendering the said limb essentially and substantially useless, and rendering dependent unable to follow the ordinary avocations of life.

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

Fifty \$50.00 Dollars for such disability

Sworn to and subscribed before me this the

2nd day of March 1892.

W. L. Calhoun Ordinary.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County, }

Know all Men by these Presents, That I,

County, in said State, do hereby appoint

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

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

Executed in the presence of:

Send money to me as follows, by

DIRECTION.

to

P. O.

County, Georgia.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County, }

PERSONALLY appears Joseph P. Martin of Fulton County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 3rd day of January 1844; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company A, of 12th Regiment of Georgia Volunteers C. A. Adams's Brigade; that whilst engaged in such military service at the battle of Monocacy in the State of Maryland, on the 9th day of July 1864, he was wounded as follows: *shot with a rifle ball below the knee, gangrened and destroying the muscles of the leg and paralyzing the foot rendering the said limb essentially and substantially useless, and rendering dependent unable to follow the ordinary avocations of life.*

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

Sworn to and subscribed before me, this, the

13th day of March 1894.

W. L. Calhoun Ordinary.

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

STATE OF GEORGIA,

Fulton County, }

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

Given under my official signature and seal, this 13th

day of March 1894.



W. L. Calhoun

Ordinary Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

KNOW ALL MEN BY THESE PRESENTS, That I,

of

County, State of Georgia, do hereby appoint

of

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

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

day of 1895.

Executed in presence of us

[L. S.]

DIRECTIONS.

Send money to me as follows, by

to

County, Georgia.

P. O.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, hereby authorize

of

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

by

at

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

day of 1896.

[L. S.]

Executed in presence of us

(For Those Already Enrolled.)

No. 91

SOLDIER'S PENSION.

1895.

Name Joseph P. Martin

County Fulton

Disability Disabled leg

Amount, \$ 50

344

1895.

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

all

Gen. W. Harrison, State Prison, Atlanta

No date

(For Those Already Enrolled.)

No. 997

SOLDIER'S PENSION.

1896.

Name Joseph P. Martin

County Fulton

Disability Disabled leg

Amount, \$ 50

246

1896

RICHARD JOHNSON,

Secretary Executive Department.

WARRANT HANDLED TO

all

Gen. W. Harrison, State Prison, Atlanta

No date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton

County.

Personally appears

Joseph P. Martin

of

Fulton

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 3rd day of January 1844; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company A, of 12th Battalion of Georgia Volunteers, C.A. Evans' Brigade; that whilst engaged in such military service at the battle of Monocacy in the State of Maryland, on the 9th day of July 1864, he was wounded as follows: shot with a rifle ball below the knee, pangrene set in destroying the muscles of the leg, and paralyzing the foot rendering the said limb essentially and substantially useless, rendering deponent unable to follow the ordinary vocations of life.

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

Sworn to and subscribed before me, this, the

9th day of March

1895.

M.L. Calhoun Ordinary

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

STATE OF GEORGIA,

Fulton

County.

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

Given under my official signature and seal, this

day of March

1895.



M.L. Calhoun

Ordinary

Fulton

County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton

County.

Personally appears

Joseph P. Martin

of

Fulton

County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said State, and has resided therein continuously ever since the 3rd day of January 1844; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a private in Company A, of 12th Battalion of Georgia Volunteers, C.A. Evans' Brigade; that whilst engaged in such military service in the State of Maryland, on the 9th day of July 1864 he was wounded, injured or diseased as follows: shot with a rifle ball below the knee, gangrene set in destroying the muscles of the leg, and paralyzing the foot rendering the said limb essentially and substantially useless, rendering deponent unable to follow the ordinary vocations of life.

Deponent desires to participate in the benefits of the Act, approved October 24th, 1887, and the acts amendatory thereof, and makes application for the pension to which he is entitled for the year ending October 26th, 1890. I have heretofore as a resident of Fulton county been allowed a pension of Fifty dollars, for the year 1889.

Sworn to and subscribed before me, this, the

26th day of Feb'y

1890.

M.L. Calhoun Ordinary

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

STATE OF GEORGIA,

Fulton

County.

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

Given under my official signature and seal, this

day of

Feb'y

1890.



M.L. Calhoun

Ordinary

Fulton

County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1897.

[L. S.]

Executed in presence of _____

(For Those Already Enrolled.)

No. 662

INVALID

SOLDIER'S PENSION.

1897.

Name *Joseph B. Martin*

County *Fulton*

Disability *Disabled Leg*

Amount, \$ *50.00*

2/19 1897.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDSD TO

aff'd.

OFFICE OF THE COMMISSIONER OF PENSIONS, STATE OF GEORGIA.

Mo date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1898.

[L. S.]

Executed in presence of _____

(For Those Already Enrolled.)

No. 2253

INVALID

SOLDIER'S PENSION.

1898.

Name *Joseph B. Martin*

County *Fulton*

Disability *Disabled Leg*

Amount, \$ *50.00*

2/17 1898.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDSD TO

aff'd.

OFFICE OF THE COMMISSIONER OF PENSIONS, STATE OF GEORGIA.

Mo date

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Joseph P. Martin of Fulton County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 3rd day of Jan. 1844; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 12th Regiment of Geo. Volunteers, Chatham's Brigade; that whilst engaged in such military service in the State of Virginia, on the 9th day of July 1864, he was wounded, injured or diseased as follows:

Shot with a rifle ball below the knee, causing gangrene, rendering him unable to follow the ordinary vocations of life.

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

Eighty Dollars, for the year 1896.

Sworn to and subscribed before me, this, 10th day of Aug. 1897, POST OFFICE

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

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 19th day of Aug. 1897.



J. M. Hickey
Ordinary Fulton County.

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears Joseph R. Martin of Fulton County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said State, and has resided therein continuously ever since the 3rd day of Jan. 1844; that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served as a Private in Company A, of 12th Regiment of Geo. Volunteers, Chatham's Brigade; that whilst engaged in such military service in the State of Virginia, on the 9th day of July 1864, he was wounded, injured or diseased as follows:

Shot below knee, causing gangrene, rendering him unable to follow ordinary vocations of life.

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

Eighty Dollars, for the year 1897.

Sworn to and subscribed before me, this, 10th day of Aug. 1898, POST OFFICE

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

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 17 day of Aug. 1898.



J. M. Hickey
Ordinary Fulton County.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1899.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1900.

[L. S.]

Executed in presence of _____

(For Those Already Enrolled.)

No. 35

INVALID

SOLDIER'S PENSION.

1899.

Name J. P. Martin

County Fulton

Disability

Amount, \$ 500

1899.

RICHARD JOHNSON,

Commissioner of Pensions.

WARRANT HANDED TO

apch

Geo. W. Harrison, State Printer, Atlanta.

(For Those Already Enrolled.)

No. 551

INVALID

SOLDIER'S PENSION.

1900.

Name J. P. Martin

County Fulton

Disability

Amount, \$ 500

Warrant issued July 2, 1900.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

apch

Geo. W. Harrison, State Printer, Atlanta.

No data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Franklin County.

Personally appears Joseph Johnston of Florida
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 there continuously ever since the 1st day
of June 1864; 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 K of 1st Regiment
of Fla Volunteers, _____'s Brigade; that whilst engaged
in such military service in the State of Virginia, on the 9th day
of July 1864, he was wounded, injured or diseased as follows:

Was nowise with a rifle & all in
the right way between the three and
another - After some garzant action
and so in front his leg as to another.
It is practically useless for any other
action and sending him in order
to make a way of this letter

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1899. I have heretofore under said law as a resident of

Fusion County been allowed an invalid pension of

fig- Dollars, for the year 189

Sworn to and subscribed before me, this, the 4th day of July, 1904, at St. Louis, Mo.

25th day of Jan 1899. POST OFFICE _____

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

STATE OF GEORGIA.

Fuller County.

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

Given under my official signature and seal, this 25-12-

day of Jan 1899

7-11-1966

Calligraphy



For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA.

Fallon Country

Personally appeared Joyce P. Martin of Talmer
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
beginning of his life 1864; 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 private in Company D, of 12th
Battalion Inf. Vols. Volunteers, _____'s Brigade; that whilst
engaged in such military service in the State of Kentucky on the 90
day of July 1864, he was wounded, injured or diseased as follows:

Wounded in right leg between
knee & ankle disabling him

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

Talton County been allowed an invalid pension of

\$ 372. Dollars, for the year 1899.

Sworn to and subscribed before me, this, the 10 March 1941

2 day of March 1900. } POST OFFICE

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

STATE OF GEORGIA.

Salmon County

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

Given under my official signature and seal, this 2

day of March 1900.

W. W. W.

Ordinary 7 11 2



POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of

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

by

at

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

day of _____ 1901.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

of

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

by

at

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

day of _____ 1902.

[L. S.]

Executed in presence of

CODE SECTION 104.
(For Those Already Enrolled.)

No. 800

DISABLED

**SOLDIER'S PENSION.
1901.**

Name J. P. Martin

County Fulton

Disability lost and in right leg

Amount, \$ 50.00

Jan 16 1901,

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

[Signature]
Gen. W. Harrison, War Prisoner, Atlanta.

no data

CODE SECTION 104.
(FOR THOSE ALREADY ENROLLED.)

No. 110

DISABLED

**SOLDIER'S PENSION
1902.**

Name J. P. Martin

County FULTON

Co. A Regiment 24th Reg

Disability lost and in right leg

Amount \$ 50.00

Jan 16 1902,

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

[Signature]
Gen. W. Harrison, War Prisoner, Atlanta.

no data

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears J. P. Martin 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 18th day of July 1864; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company A, of 12th Regiment of Ga Volunteers, 5th Brigade; that whilst engaged in such military service in the State of Maryland, on the 9th day of July 1864, he was wounded, injured or diseased as follows:

Wounded in right leg between knee and ankle disabling him

Deponent makes application for the pension to which he is entitled for year ending October 26th, 1901. I have heretofore under said law as a resident of Fulton County been allowed an invalid pension of \$500.00 Dollars, for the year 1900.

Sworn to and subscribed before me, this 1st day of January 1901. J. P. Martin Postoffice Atlanta

John R. Wilkinson

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 1st day of January 1901. John R. Wilkinson Ordinary Fulton County.



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

FULTON County.

Personally appears J. P. Martin 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 18th day of July 1864; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a Private in Company A, of 12th Regiment of Ga Volunteers, 5th Brigade; that whilst engaged in such military service in the State of Ind, on the 9th day of July 1864, he was wounded, injured or diseased as follows:

Wounded in right leg between knee and ankle

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 FULTON County, been allowed an invalid pension of Fifty Dollars, for the year 1901.

Sworn to and subscribed before me, this 1st day of JAN 13 1902 1902. J. P. Martin Postoffice Atlanta

John R. Wilkinson

STATE OF GEORGIA,

FULTON County.

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

Given under my official signature and seal, this 1st day of JAN 13 1902 1902. John R. Wilkinson Ordinary FULTON County.



NOTE.—Filing of this and of Company and Regiment.
NOTE.—All vouchers and affidavits must bear date after January 1, 1902.

BOOK OF VICTORIES

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1903.

[L. S.]

Executed in presence of _____

NAME SECTION 130.
(FOR THOSE ALREADY ENROLLED.)

No. 176

DISABLED

SOLDIER'S PENSION
1903.

Name *J. P. Martin*
County _____
Co. *A* Regiment *24th*
Disability *awarded in Aug*
Amount, \$ *50.00*
1/21 1903

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDLED TO _____

Gen. W. Harrison, State Printer, Atlanta

No data

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize _____

of _____

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

by _____

at _____

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

day of _____ 1904.

[L. S.]

Executed in presence of _____

NAME SECTION 130.
(FOR THOSE ALREADY ENROLLED.)

Art 2 No. 574

DISABLED

SOLDIER'S PENSION
1904.

Name *J. P. Martin*
County _____
Co. *A* Regiment *24th*
Disability *awarded in Aug*
Amount, \$ *50.00*
1/21 1904

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO _____

Gen. W. Harrison, State Printer, Atlanta

No data

STATE OF GEORGIA

FOR APPLICANTS HERETOFORE ATTORNEY PENSION

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears J. P. Martin 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 Birth 18 ; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a private in Company A, of 12 th Regiment of Ga Volunteers, Ma's Brigade; that whilst engaged in such military service in the State of Ma, on the 9 day of July 1864, he was wounded, injured or diseased as follows:

Wound in right leg

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1903. I have heretofore, under said law, as a resident of 50 County, been allowed an invalid pension of 50 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 9 day of July 1903. Post-office J. P. Martin

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

Given under my official signature and seal, this 9 day of July 1903.

John R. Wilkinson Ordinary County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton, County.

Personally appears J. P. Martin 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 Birth 18 ; that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served as a private in Company A, of 12 th Regiment of Ga Volunteers, Ma's Brigade; that whilst engaged in such military service in the State of Ma, on the 9 day of July 1864, he was wounded, injured or diseased as follows:

Wound in right leg

Deponent makes application for the pension to which he is entitled for the year ending October 28th, 1904. I have heretofore, under said law, as a resident of 50 Fulton, County, been allowed an invalid pension of 50 Dollars, for the year 1903.

Sworn to and subscribed before me, this the 9 day of July 1904, J. P. Martin Post-office John R. Wilkinson

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

STATE OF GEORGIA,

Fulton, County.

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

Given under my official signature and seal, this 9 day of July 1904.

John R. Wilkinson Ordinary Fulton, County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I,

hereby authorize

of

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

by

at.

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

day of 1905.

[L. S.]

Executed in the presence of

State of Georgia 1905.
(FOR THOSE ALREADY ENROLLED.)

No. 13

DISABLED

SOLDIER'S PENSION

1905.

Name J. P. Martin

County Fulton

Co. A. Regiment 1st

Disability Right by disabled

Amount, \$50.00

117 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

for the purpose of receiving the pension money due to the soldier named above.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I,

hereby authorize

of

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

by

at.

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

day of 1906.

[L. S.]

Executed in the presence of

State of Georgia 1906.
(FOR THOSE ALREADY ENROLLED.)

No. 94

DISABLED

SOLDIER'S PENSION

1906.

Name J. P. Martin

County Fulton

Co. A. Regiment 1st

Disability Right by disabled

Amount, \$50.00

118 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

for the purpose of receiving the pension money due to the soldier named above.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. COUNTY.

Personally appears J. P. Martin 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 Confederate States (or of the State of Georgia) during the war between the States, and served as a Volunteer in Company A, of 12th Regiment of Ca's Brigade; that whilst engaged in such military service in the State of Ind., on the 9 day of July 1864, he was wounded, injured or diseased as follows:

Right leg disabled. Monocacy, Md.

Deponent makes application for the pension to which he is entitled for the year ending October 26th, 1905. I have heretofore, under said law, as a resident of Fulton County, been allowed an invalid pension of Fifty Dollars, for the year 1904.

Sworn to and subscribed before me, this the

day of JAN 2 1905.

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

STATE OF GEORGIA,

Fulton. COUNTY.

I, J. P. Martin Ordinary of said County, do certify that I am well acquainted with J. P. Martin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1905.

Ordinary Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton. County.

Personally appears J. P. Martin 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 Confederate States, (or of the State of Georgia) during the war between the States, and served as a Volunteer in Company A, of 12th Regiment of Ca's Brigade; that whilst engaged in such military service in the State of Ind., on the 9 day of July 1864, he was wounded, injured or diseased as follows:

Right leg disabled. Monocacy, Md.

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

Sworn to and subscribed before me, this the

day of JAN 1 1906.

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

State of Georgia,

Fulton. County.

I, J. P. Martin Ordinary of said County, do certify that I am well acquainted with J. P. Martin the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 1906.

Ordinary Fulton County.

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



Ordinary Fulton County.

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



to be, and that he resides in this County.
Given under my official signature and seal, this JAN 1 1906
day of 1906
John P. Martin
Ordinary Fulton County.

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

Audited

1889.

COMPTROLLER GENERAL.

Fulton

Maimed Soldiers.

Voucher No. 2210

Amount, \$ 50.00

Paid to Joseph P. Martin
For Disability of right Leg

May 9, 1889.

Included in Warrant No.
issued to Treasurer.

1889.

WARRANT CLERK.

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

Maimed Soldiers.

Voucher No. 122

Amount \$ 50.00

Paid to J. P. Martin
For Right Leg
disabled

July 11 1890

Included in warrant No.
issued to Treasurer.

1890.

WARRANT CLERK.

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

Applicant

Martin, J. P.
Fulton

1891.

Maimed Soldiers.

Voucher No. 17

Amount \$ 50

Paid to J. P. Martin
For Leg d.

July 3 1891.

Included in warrant No.
issued to Treasurer.

1891.

WARRANT CLERK.

Geo. W. Harrison, State Printer, Atlanta.

Applicant

No. 2210

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. May 9. 1889.

Mr. Joseph P. Martin of the County of Shulton having filed his application in the Executive Department for an allowance under the Act approved October 24, 1887 as amended by Act, Dec. 24, 1888, and the same having been allowed for *Disability of right leg*

He is entitled to receive the sum of *Fifty + 00/100* Dollars for such disability, the same being the allowance due for the year ending October 24, 1889.

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

By the Governor.

J. B. Gordon
GOVERNOR.
J. P. Martin
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty + 00/100 Dollars,
per above voucher, this *9th* of *May* 1889.

J. P. Martin

No. 122

STATE OF GEORGIA,
EXECUTIVE DEPARTMENT.

Atlanta, Ga. *Feb 4 1890*

Mr. J. P. Martin of the County of Shulton 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

Right leg disabled
He is entitled to receive the sum of *Fifty + 00/100* Dollars for such disability, the same being the allowance due for the year ending October 24, 1890

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

By the Governor,

J. B. Gordon
GOVERNOR.
W. H. Harrison
CLERK EXECUTIVE DEPARTMENT.

RECEIVED OF STATE TREASURER, R. U. HARDEMAN,

Fifty + 00/100 Dollars,
per above voucher, this *4th* of *Feb* 1890.

J. P. Martin
Witness - *W. H. Harrison*

1891.
No. 17
STATE OF GEORGIA. }
EXECUTIVE DEPARTMENT. } Atlanta, Ga. July 3 1891.

Mr. J. P. Martin of the County
of Dillon having filed his application in the Executive
Department for an allowance under the Act approved October 24, 1887, as amended by Acts
approved Dec. 24, 1888 and Nov. 11, 1889, and the same having been examined and allowed for
Leg dis
He is entitled to receive the sum of Eight Dollars
for such disability, the same being the allowance due for the year ending October 24, 1891.

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

By the Governor,

C. O. W. Harrison
SEC'Y EXECUTIVE DEPARTMENT.

\$ 50

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

Eight 50 Dollars,
per above voucher, this 3 of Oct 1891.

J. P. Martin

Joseph P. Keith

Mr. J. P. Martin Comes to
me for an amendment to my
Statement in regard to his injuries.
He is in a worse condition
than when I first examined
him and I am not able
to concur in the statement
of Dr. Hammond & Asher that
the leg is substantially and
essentially healed as their
words are interpreted in
Note 3 in front of the case of
Applicant for Pension.

Wm. May 2nd 1889

R. B. Word M.D.
Sworn to and subscribed before
me, May 2nd 1889,
P. N. Calhoun
C. C. O.

State of Georgia, }
Fulton County: }

Personally appeared before
me, an acting ~~justice of the~~
~~peace~~, ~~Notary Public~~, in and for said ~~State~~
~~and~~ County, Dr. J. P. Hammond, and Dr. W. C.
Asher, both reputable physicians of said State
and County, and upon oath before me depose
and say, they have carefully examined Joseph P. Keith,
and after such examination say that the applicant
has been injured as follows:— There are eviden-
ces that he sustained an injury of the leg,
(the right leg,) which we believe to be a gun shot
wound, and resulting in atrophy of the muscles of
the said right leg. The Tendo Achillis is contracted,
and the tissue of other muscles so seriously injured,
their use and physical integrity so impaired, that
his said right leg is substantially and essentially
useless. His general health is, evidently, also
impaired, and his ability for usefulness, as to
compete with healthier and younger men
greatly compromised.
James D. Schenck Defendant
This May 8, 1889. }
J. P. Keith
Not Pub. Fulton Co. Georgia

Dr. J. P. Hammond,
W. C. Asher M.D.

Simon H. & Subsequent Defendants. J. F. Hammond, Jr.
May 8, 1889. 3 W. C. Baker M. J.
W. L. Phillips
Chas. Rich Sutton & Son

60 May 15, 62
 Approved Sergt.
 7-1914
 C. J. Smith, 20, 65
 1918

May 15, 1920
 No. 7 Fulton County

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton
 Name Wm. Kate Martin
 Widow of Wm. Martin
 Company A
 Regiment 34 Ga
 Approved _____

ENTERED REGISTER, GEORGIA

J. W. LINDSEY,
 Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-23-1919

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY,

I, W. D. DeLoach

Ordinary of said County, do certify

that I know Wm. Kate Martin the applicant for pension. She

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

and was on the 4th November 1908; Wm. Martin

was duly sworn by me before signing the foregoing affidavit and that Wm. Martin are truthful, trust-

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

Sworn under my hand and official seal of office this 15th day of May 1919

(SEAL) W. D. DeLoach Ordinary, County.

NOTES: 1. Before any application is made for the Ordinary shall swear applicant and the witness to the following words:
 "You do solemnly swear that you will be true to the truth, to help you God."
 2. Only widows who married prior to January 1st, 1918, are entitled.
 3. Only widows who married prior to January 1st, 1918, are entitled.
 4. Affidavit must be made before the Ordinary of the person to be sworn and certified by
 5. Affidavit certified copies of marriage license if obtainable. If not, prove marriage by some person, or by general
 evidence.

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, T. H. D. Higgins Ordinary of said County, do certify

that I know Mrs. Kate Martin the applicant for pension. She

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

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

the witnesses who assisted in the making of husband; that both of them are now residents of said County and

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

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

Sworn under my hand and official seal of office this 15 day of Sept 1919

(SEAL)

Ordinary,

Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. No help you did."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1861, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

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

1. What is your name, and where do you reside? Mrs. Kate Martin
64 North St., Atlanta Ga
2. How long and since when have you been a continuing resident of the State of Georgia? all my life
3. When, where and to whom were you married? May 5, 1878 - Atlanta Ga
to Marshall S. Martin
- 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.) May 17, 1862 - Whitfield Co Ga Co A 34 Ga Reg
5. When and where did the commands of your husband surrender or discharge from the army? Do not know when or where, but something in 1865
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes
7. If he was not present state clearly where he was? _____
8. Where was his command when he left? _____
- a. For what cause did he leave his command? _____
- b. By whose authority did he leave his command? _____
- c. For how long was he granted leave of absence? _____
- d. What was his physical condition when he left his command? _____
- e. What effort did he make to return to his command? _____
- f. In what way was he prevented from going back to Command? _____
- g. Was he captured by the enemy at any time? No
- h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- j. When and where did your first husband die? Dec. 1918 - Atlanta Ga
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? _____
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No
- If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me this the

15 day of Sept 1919

William B. Martin Ordinary
of Fulton County.

(SEAL)

Widow's Pension

Under Act 1910 - as Amended by Act of 1919.

County Fulton

Name Mrs. Kate Martin

Widow of Marshall S. Martin

Company A

Regiment 34 Ga

Approved _____

ENTERED

J. W. LINDSEY,

Commissioner of Pensions,

Revol. Printing Co., State Printing, Atlanta.

10-23-1919

Application for Expenses of Last Illness and Funeral

(UNDER ACT OF 1919)

THOS. H. JEFFRIES Ordinary

For: **MRS. KATE MARTIN**
(Name of Deceased)

Date of Death: **July 21, 1932**

Amount: \$ **127.00**

PAID TO ORDINARY ON THIS CLAIM:			
DATE	FUND FROM WHICH PAID	AMOUNT	
7/27/32	1930	127.00	
A			
B			
C			
TOTAL			127.00

Approved, and ordered paid,

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

Pay \$127.00 ✓
No. 6009

of **Fulton** County.
(SEAL)



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

1. PLACE OF DEATH **Fulton** County, **1061** Middle District (Number and Name) State of Georgia
City or Town **Atlanta** Length of residence in this city or town: Yrs. Mos. Da. NON-RESIDENT (Yes or No) _____
Street and Number (No. **87** (Street) **14th St. N.E.** Ward _____
(If death occurred in a hospital, give its name instead of street and number)

2. FULL NAME **Mrs. Catherine Harvill Martin**
Residence (City or Town) **87 14th St. N.E.** (Street and Number) (State) _____

PERSONAL AND STATISTICAL PARTICULARS				MEDICAL CERTIFICATE OF DEATH	
3. SEX Female	4. COLOR or RACE White	5. MARRIAGE Widowed	6. DEATH July 21, 1932	7. DATE OF DEATH 7/21/32	8. TIME OF DEATH 7/20/32
9. DATE OF BIRTH (month, day, year) 2/20/1857	10. AGE 75 Years 5 Months 1 Day	11. OCCUPATION None	12. CAUSE OF DEATH Carcinoma of liver	13. I HEREBY CERTIFY, That I attended the deceased from 7/6/32 to 7/20/32	14. I last saw the deceased alive on 7/20/32 at 8P (Hour)
(a) Trade, profession or particular kind of work done, or business, service, occupation, etc.			(b) Total years spent in this occupation		
(c) Date deceased last worked at this occupation (month and year)			(d) Total years spent in this occupation		
15. BIRTHPLACE (P.O. Address) Ga.			16. BIRTHPLACE (P.O. Address) New Hampshire		
17. MAIDEN NAME (P.O. Address) Lucinda Sanders			18. BIRTHPLACE (P.O. Address) Ga.		
19. INFORMANT (Signed) Mrs. George Brown (Address) 87 14th St. N.E.			20. REGISTRAR (Signed) C. W. Strickler (Address) 125 Forrest Ave. N.E.		
21. BURIAL PLACE (Cemetery) Oakland Cem. (Interment) Atlanta, Ga. 7/22/32			22. UNDERTAKER (Signed) Brandon-Bond-Condor Co. (Address) by Jas. F. Condon		

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

GEORGIA,
FULTON COUNTY.

I hereby certify that the foregoing is a true and correct copy of the record of death Number **2729**
of the series of **1932** for **Mrs. Catherine Harvill Martin**
as appears on file in the office of the Registrar of Vital Statistics of the City of Atlanta.

SEAL

(Signed)

LOCAL REGISTRAR.

Application for Payment of Expenses of Last Illness and Funeral

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

GEORGIA, FULTON County:

Before me, the Ordinary of said County, comes BRANDON-BOND - CONDON

of said County, who, after being duly sworn, on oath says that he knew MRS. KATE MARTIN late of said County, a Confederate pensioner, and that said person is the identical person named and described in the attached certified copy of burial certificate; and that said pensioner LEFT NO WIDOW and NO ESTATE of ANY KIND OR VALUE sufficient to pay the expenses of last illness and funeral, which amounted to the sum of \$ 127.00, as shown by sworn statements FULLY and COMPLETELY ITEMIZED, hereto attached.

Sworn to and subscribed before me,
this the 21 day of MAR, 1935.
Brandon Bond - Condon, Ordinary.

CERTIFICATE OF THE ORDINARY

GEORGIA, FULTON County.

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

Given under my hand and seal of office, this the 21 day of MARCH, 1935.
(Seal of Ordinary) Brandon Bond - Condon, Ordinary.

INSTRUCTIONS:

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

BRANDON-BOND-CONDON FUNERAL DIRECTORS

820 PEACHTREE ST., N. E. PHONE HEMLOCK 8001
ATLANTA, GA.

AMBULANCE SERVICE

SOLD TO Mr. George Brown

87 1/2 N. St. N.E.

Funeral expenses Mrs. Kate Martin
July 21/1935

Report	3.50
Funeral base	10.00
Embalming	15.00
Spices	10.00
Coffin	2.00
Hearse	15.00
Funeral Notices	5.00

June 5/35 - By Cash \$407.00
Balance due \$286.00

Personally appeared before me
Brandon Bond - Condon
who swears this bill as due & unpaid

Belle Bond
Ordinary, Fulton County, Georgia.
My Commission Expires May 15-1935

Received of Thomas H. Jeffries, Ordinary, \$127.00

to apply on account of Mrs. Kate Martin

I certify that this account has not been paid and is now owing to me.

This 21 day of April 1935.

Brandon Bond - Condon
Mr. George Brown

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
MRS. KATIE MARTIN, who upon oath says:

That she is the widow of Melville C. Martin, who died
Dec. 19, 1918. That said Melville C. Martin was a member of C. A. 34th
Ga. Reg. and served in the Confederate Army from May 12, 1862 to April
1865.

That she has made every effort to locate some member
of the same company and regiment but has been unable to locate any.
That she now knows of no living member of said company and regiment
and is, therefore, unable to secure affidavits to the service of her
husband in the Confederate Army.

Sworn to and subscribed before me
this Sept. 30, 1919.

Arthur B. Laurent
C C Ordinary, Fulton Co., Ga.

Mrs. Katie Martin

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
ARTHUR B. LAURENT, who upon oath says:

That he knows Mrs. Katie Martin and knew her husband,
Melville C. Martin, deceased; that he knows of his own personal know-
ledge that Mrs. Katie Martin and Melville C. Martin lived
together for many years before the death of said Mel-
ville C. Martin, who died in Atlanta, Ga., on December 19, 1918; that
the said Mrs. Martin has not remarried since the death of her
husband and is now his lawful widow.

Sworn to and subscribed before me
this September 30, 1919.

Arthur B. Laurent
C C Ordinary, Fulton Co., Ga.

Arthur B. Laurent

MARRIAGE LICENSE

State of Georgia--Fulton County.

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to Solemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony

M. C. Martin

and

Charan S. Harville

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 1st day of February, 1873. M.

DANIEL PITTMAN L. S.
Ordinary.

I hereby certify that

M. C. Martin

and

Charan S. Harville

were joined together in the HOLY BANS OF MATRIMONY

on the 5th day of February 1873, by me. E. W. Warren, M.C.

State of Georgia,
Fulton County.

ORDINARY'S OFFICE

S. S.

ATLANTA, GA., Sept. 30th 1919.

I, ARTHUR R. MARBUT, 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

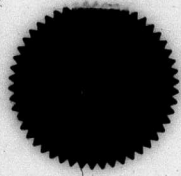
M. C. Martin

and Charan S. Harville

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.

Arthur R. Marbut
Clerk Court of Ordinary.



M. C. Martin

Charan S. Heryille

and
as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.

William R. Heryille

Clerk Court of Ordinary.

Martin, Lola P. (Mrs.)
Fulton County



Widow's Application

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

County... FULTON
Name... Mrs. Lola P. Martin
Widow of Benjamin Scott Martin
Date of Marriage... Mar. 15, 1868
Date of Husband's Death... Sept. 8, 1928
Company...
Regiment...
Approved... 1939
Director...

Intro - Fultons
no data

RECEIVED

MAR 17 1939
TOM WISDOM
DIRECTOR

STATE OF GEORGIA.

Ordinary's Certificate

County... Fulton COUNTY.

I, Wm. A. Jones Ordinary of said County, do certify that I know Mrs. Lola P. Martin 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, 1930; that I also know Benjamin Scott Martin the witness who swears to the ~~existence of husband and wife~~ marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavit, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 17th day of March 1939.

(SEAL OF ORDINARY)

[Signature]
Ordinary,
County.

INSTRUCTIONS:

- Before any questions are answered the Ordinary shall read the following words: "You do solemnly swear that you are the person named in the questions asked you and the evidence you shall give will be the truth." So help you God."
- Answers shall be given in the English language.
- Only persons who married prior to January 1st, 1930, are entitled to pension.
- At least one of the witnesses 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 each copy of marriage license if obtainable. If not, prove marriage by some person, or by general reputation.
- Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
- Do not take an application from any widow who is already receiving a pension.

Mrs. Lola P. Martin
Hwy. 100
Hwy. 100



Widow's Application

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

County: Fulton
Name: Mrs. Lola P. Martin
Widow of Benjamin Scott Martin
Date of Marriage: Mar. 15, 1898
Date of Husband's Death: Sept. 6, 1928
Company: _____
Regiment: _____
Approved: _____
Director: _____

RECEIVED

MAR 17 1939
TOM WISDOM
DIRECTOR

Ordinary's Certificate

STATE OF GEORGIA,
Fulton COUNTY.

I, Mrs. H. J. Anderson, Ordinary of said County, do certify that I know Mrs. Lola P. Martin 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 Mrs. Benjamin Anderson the witness who swears to the service of husband and to 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 13th day of March, 1939.
(SEAL OF ORDINARY) [Signature] Ordinary.
of Fulton County.

INSTRUCTIONS:

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

Fulton COUNTY.

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

SECTION I.

- What is your name, and where do you reside? (Give Post Office and County.) Lola P. Mrs. B. S. Martin, 1311 Westmont Terrace, Atlanta 2, Ga.
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? Continuously since birth Jan. 26, 1872.
- Give date, or year, of your birth. Jan. 26, 1872.
- (1) When, (2) where and (3) to whom were you married? Sept. 6, 1898 to Benjamin Scott Martin.
 - Have you married since the death of first and soldier husband? No.
 - When and where did your first husband die? Atlanta Ga. Sept. 6, 1928
 - Were you residing together when he died? Yes
 - If not, how long had you resided apart? Yes
 - Are you now a widow? Yes
 - Have you or your husband heretofore been paid a pension by the State? No
 - If so, when and for what cause were you or your husband placed on the roll? _____

SECTION II.

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

- When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
Don't know.
- When and where did the Commands of your husband surrender or discharge from the Service?
Don't know.
- Was your husband personally present with his Command when it was surrendered or discharged?
No.
- If he was not present, state specifically and clearly where he was?
He was in prison at Atlanta because of being a deserter.
- When did he leave the Command?
Don't know.
- For what cause did he leave?
Desertion.
- By whose authority did he leave?
Don't know.
- For how long was his leave of absence granted? Definite. d. In what way?
Don't know.
- What was his physical condition when he left his Command?
Good.
- What effort did he make to return to his Command?
He made every effort to return to his Command but was prevented from doing so because of his desertion.
- In what way was he prevented from going back to his Command?
He was captured by the enemy and held in prison.
- Was he captured by the enemy at any time?
Yes.
- If so, when and where? In what prison was he held and when was he released?
Don't know.

Sworn to and subscribed before me, this 13th day of March, 1939.
H. J. Anderson C. C., Ordinary
of Fulton County.
(SEAL OF ORDINARY)

Mrs. Lola P. Martin
Applicant.

An Affidavit

(Read carefully before making this affidavit.)

State of Georgia,

County of Fulton

Before me, the Ordinary of said County, comes Mrs. Lola P. Martin who, after being duly sworn, deposes and says:

1. That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers;
2. That her deceased husband was not a pensioner of the State of Georgia at the time of his death, and, therefore, his Confederate military service has not heretofore been proven in connection with an application for pension;
3. That she is unable to obtain from any person or source evidence as to the Confederate military service of her deceased soldier husband;
4. That this affidavit is being made to authorize the use, as evidence, of any official record of said Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of the Adjutant-General, Washington, D. C.

Sworn to and subscribed before me, this the

13 day of March, 1939.

H. J. Kemp, O. C., Ordinary,

Fulton County.

Mrs. Lola P. Martin

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA,

Fulton COUNTY.

Mrs. Minnie Vanderson of said State and County is hereby presented as a witness in support of the application of Mrs. Lola P. Martin for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County) Mrs. Minnie Vanderson - 266 Boulevard S. E. Atlanta, Ga.
2. How long and since when have you known Mrs. Lola P. Martin applicant Continually for 10 years
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? 1811 Washington Wy. N. E. Atlanta - she has been resident for 10 years
4. When and to whom was she married? 3/13/18 26 S. N. E. Atlanta How do you know same point
5. How long and since when did you know about 10 years B. J. Martin her husband?
6. When and where did about 1918 at 189 Stanton St. N. E. Atlanta the husband of applicant, die?
7. Were the applicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death? never lived apart

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 did enlist? (Give date and place)
10. How did you obtain your information of this service?
11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give 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? and how came him there? When, where and for what cause did he leave his Command? (Give date.) By whose authority did he leave his Command? and how long was he granted leave? How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically)
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?
16. What effort did he make to return to his Command and how do you know this?
17. Was he captured as a prisoner? If so, when and where? In what prison was he held? and when released?

Sworn to and subscribed before me, this the

13 day of March, 1939.

H. J. Kemp, O. C., Ordinary

of Fulton County.

(SEAL OF ORDINARY)

Mrs. Minnie Vanderson
(Witness)

I, George R. Martin, age 38, being a resident of Asheville, N. C. do hereby make the following affidavit for the purpose of being used in the Court of Ordinary of Fulton County, Georgia, and by the Director of Veterans Service Office of the State of Georgia.

I am one of the children of the late Benjamin Scott Martin and his widow, Lola F. Martin. Prior to my father's death, September 6, 1923, I heard him tell many times about his service in the Confederate Army. He told of being furloughed home because of sickness and of the War ending before he was well enough to return to his Regiment.

It is a matter of family knowledge and pride that he did serve in the Confederate Army at his very early age, and it has always been discussed as an accepted fact by the family and by friends of the family.

As I was not born until thirty-five years after the Civil War and because my father was very young at the time of his service the names of the people he served with and of his regiment had been forgotten by the time I came along, or else I have forgotten them if they were discussed in my presence. He was a resident of Oglethorpe County during the War and I think he must have enlisted from that county or from the adjoining Clark County.

George R. Martin

Sworn to and subscribed before me
this 7th day of December, 1938.

James Stennard

my com. expires 7/26/39

I, Mrs. J. R. Moore, age 86 of Clark County, Georgia, does hereby state that the following facts are true:

I am the niece of Benjamin Scott Martin and my only knowledge of Benjamin Scott Martin having served in the Confederate Army was obtained from my mother who stated to me that the Martin ran away from home and joined the Army a short time before the War ended.

During the time of the War I was living with my parents in Deaton County, Georgia.

Witness my hand this 24th day of Feb. 1939

Mrs. J. R. Moore

Sworn to and subscribed
before me this 24th
day of Feb. 1939

Chas. Emory Smith
N.P. Clarke County, Georgia

Sworn to and subscribed before me
this 7th day of December, 1938.

Jess Stearns
my com. expires 7/26/39

O.C.

I, Wm. Kinsey, of 295 Henderson Ave., Athens, Ga. do make
the following affidavit for the purpose of adding of
being of use in the Court of Ordinary of Fulton County,
Georgia and the Director of the Veterans Service Office
of the State of Georgia.

I knew Mr. Benjamin Scott Martin for ~~approximately~~ about
~~about~~ 16 years before his death and have known his widow
Mrs. Lola P. Martin who married Mr. Martin prior to 1920.

I do not of my own knowledge know that Mr. Benjamin Scott
served with the Confederate Army during the Civil War but
Mr. Martin discussed with me on several occasions that
he did serve and was disabled. Mr. Martin was a resident of
Oglethorpe County during the Civil War.

Mr. Martin was a resident of Athens and Clarke County
Georgia for a good many years prior to 1919 and it is
my information that although he WAS A peddler, he did not
pay a license to do business in Clarke County in view
of the fact that he was a Confederate Veteran. I have
examined the records of Clarke County and do not find
any record of any free license issued to Confederate
Veterans. I am reasonably sure however he was issued a
free license to do business in Clarke County.

Wm. Kinsey

Sworn to and subscribed before me
this the 6 day of December, 1938.

J. J. Carr
Notary Public, Ga. Clarke County

State of Virginia, to-wit;
City of Richmond,

Before me, Arthur C. Runge a Notary Public for the aforesaid City, in the State of Virginia, personally appeared Beulah Martin Jones, who made oath that she is the oldest living child of Lola P. Martin and the (deceased) Benjamin Scott Martin.

The said Beulah Martin Jones further states under oath that during her father's life time he often spoke of his experience as a Confederate soldier in the Civil War, and also heard her paternal Aunts, now (deceased), speak of her father being a soldier in the Civil War.

The said Beulah Martin further states under oath that it to be her belief her father was a Confederate soldier in the Civil War, which would entitle her mother to a pension.

Mrs. L. L. Jones (Beulah Martin)

Subscribed and sworn to before me this 2nd day of March 1939.

Arthur C. Runge
Notary Public

My Commission Expires
Oct. 14, 1941

GEORGIA,
CLARKE COUNTY:

Prior to 1919 Mr. Benjamin Scott Martin came to me and requested that I aid him in obtaining a pension that was being paid to Confederate Veterans.

As I remember he served with a state organization something on the order of our National Guard. He was very young as I recall at the time and had not been inducted into the regular Confederate Army. He was able to satisfy the ordinary of the various counties in which he operated that he was a Confederate Veteran and was given free licenses to canvass for different articles. He likewise did considerable and valuable work at the end of the war in connection with the organization known as the Kuklux Klan.

This was some twenty odd years ago and the requirements for pensions were much stricter at that time than they are at the present time according to my information. I have no doubt that he was entitled to a pension under the present requirements. On account of the length of time that has passed all records pertaining to his case have been mislaid or destroyed.

Arthur C. Runge

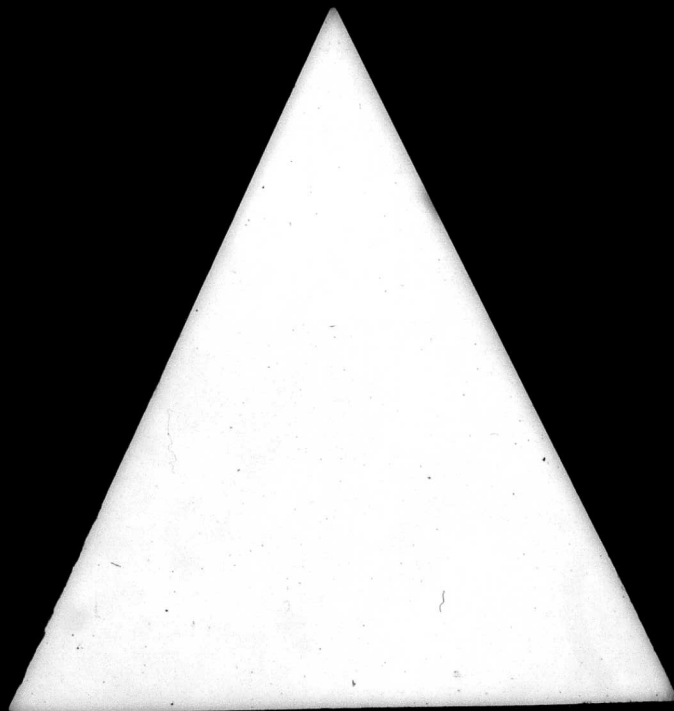
Sworn and subscribed to before me
this the 3rd day of December, 1938.

L. B. Anderson
N. P. State of Georgia

My Commission Expires
Oct 14, 1941

Sworn and subscribed to before me
this the 3rd day of December, 1938.

L. B. Entwistle
N. P. State of N. Y.



Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, Thos H Jeffries Ordinary of said County, do certify that I know Margaret C. Martin the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; ~~that I also know~~ he is my dear husband here the witness who swears to the service of husband; that ~~both of them are~~ he is now residents of said County and were duly sworn before signing the foregoing affidavits and that ~~they both are~~ he is truthful, trustworthy, and ~~their~~ his statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 15 day of Sept 1922
(SEAL) Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. No help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1861, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton
Name Margaret C. Martin
Widow of Edwin Martin
Company A
Regiment 7th Ga. Cav.
Approved, John R. Toland
Commissioner of Pensions
11-15-22

J. W. LINDSEY,
Commissioner of Pensions.
First Printing Co. State Printer, Atlanta.

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name, and where do you reside? Mrs. Margaret C. Martin, 122 Copenhill Ave., Atlanta, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? All my life, except 2 yrs in the 80's spent in Fla.
3. When, where and to whom were you married? Dec. 10 1873 in Perry, Ga. to Edwin Martin
- 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.) October 1864 in Perry, Ga. in Co. "A" 7th Ga. Cav. (Forrest Cav.)
5. When and where did the commands of your husband surrender or discharge from the army? Rome, Ga., April 1865
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes
7. If he was not present state clearly where he was? Never left command until after
8. Where was his command when he left? surrender
- a. For what cause did he leave his command?
- b. By whose authority did he leave his command?
- c. For how long was he granted leave of absence?
- d. What was his physical condition when he left his command?
- f. What effort did he make to return to his command?
- g. In what way was he prevented from going back to Command
- h. Was he captured by the enemy at any time? No
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- j. When and where did your first husband die? Jacksonville Fla. Oct. 1898
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? Never resided apart
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No.
- If so, when and for what cause were you or your husband placed on the roll? Never applied

Sworn to and subscribed before me this the

8 day of August 1922
Margaret C. Martin Ordinary
Fulton County.
(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

County.

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

1. What is your name and where do you reside? Marshburn
2. How long and since when have you known Edwin applicant? Since 1860
3. How long and since when has she continuously resided in this State? (Give date.) Since 1860
4. When and to whom was she married? Edwin How do you know? Edwin
5. How long and since when did you know Edwin her husband? Since 1860
6. When and where did Edwin the husband of applicant, die? Edwin
7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? No
9. Were they divorced? No
9. When, where and in what Company and Regiment did Edwin enlist? October 1860, Co. 1st Regt. Ga. Heavy Art. 4th Regt.
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 1860 to April 1865
12. When and where did his Command surrender, and was discharged? Rome Ga
13. Were you personally present when it was surrendered? Yes If not, where were you Yes and how came you there? Yes
14. Was the husband of applicant personally present at surrender? Yes If not, where was he? Yes When, where and for what cause did he leave Command? (Give date.) Yes By whose authority did he leave his Command? Yes And how long was he granted leave? Yes How do you know all this? By own knowledge
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? Yes
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? Yes

Sworn to and subscribed before me this the

1st day of Aug 1862
Edwin Ordinary
 of Rich County.
 (SEAL)

J. J. Marshburn

And how
long was he granted leave? Of my own knowledge How do you know all this?
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Com-
mand?
16. What effort did he make to return to his Command and how do you know this? Of your own
knowledge or how?

Sworn to and subscribed before me this the
1st day of Aug 1922 } J. J. Marshburn
of Cherokee Ordinary
of Polk County }
(SEAL)

Georgia Doastm County, Court of Ordeman
J. J. Woodard, Ordeman of said County, and
Ex-officio Clerk of the Court of Ordeman,
certify that the within marriage and printing is a
true copy of marriage license as the same appears
of record and file in this office.
Witness my hand and seal of the Court, this
May 2 1922
J. J. Woodard
Ordeman and Ex-officio Clerk,

MARRIAGE LICENSE.

To any Judge, Justice of the Peace or Minister of the Gospel: State of Georgia,
Houston County.

YOU ARE HEREBY AUTHORIZED TO JOIN

Kevin Martin and *Maggie L. Mann*.

In the Holy State of Matrimony, according to the Constitution and Laws of this State, and for so doing this shall be your sufficient License. And you are hereby required to return this License to me, with your certificate hereon of the fact and date of the marriage.

Given under my hand and seal this 10 day of December 1873

A. D. Giles

[L. S.]
ORDINARY.

GEORGIA,
HOUSTON COUNTY.

I CERTIFY THAT

Kevin Martin

and *Maggie L. Mann*

this 10 day of December

Eighteen

Hundred and

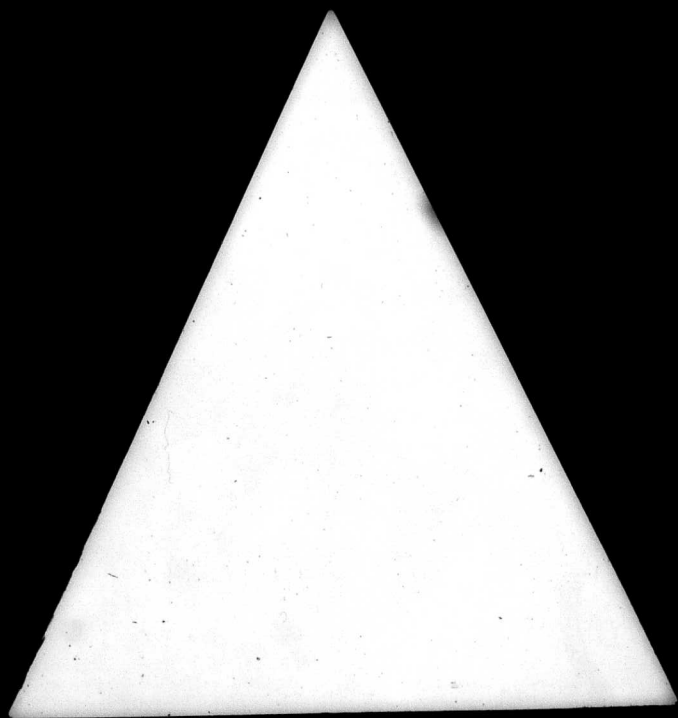
73, (1873).

RECORDED

A. D. Giles

ORDINARY.

Walter Knox, M. H.



Pension office 11/23/22 11/2/23
Husband's testimony does not show a 6 months actual military service as
required by new Act. Make out claim on pale blue widow's blanks and have
prove term of service as required without reference to husband's name.
J. W. Lindsey, Co. of Penn
on file.

an
R

No.

Widow's Application

To Be Put on Roll in Her Own Right, when
Husband Was on Roll at Death.

County *Fulton*

Name *Margaret E. Martin*

Widow of *Joseph P. Martin*

Approved

J. W. LINDSEY
Commissioner of Pensions

Chas. F. Byrd, State Printer, Atlanta.

10/24/11

Pension office 11/1/1910
 Husband's testimony does not show a 6 months actual military service as
 required by new Act. Make out claim on pale blue widow's blanks and prove
 term of service as required without reference to husband's proof
 on file.
 J.W. Lindsey, Cor. Of Penn

Widow's Application
 To Be Put on Roll in Her Own Right, when
 Husband Was on Roll at Death.
 Name Elizabeth C. Martin
 County Fulton
 Widow of John P. Martin
 Approved
 J. W. LINDSEY
 Commissioner of Pensions
 CHAS. F. BURN, STATE PRINTER, ATLANTA

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Fulton County,

Personally before me comes Mrs J. P. Martin of said County,
 who, after being duly sworn, on oath says, that she is the widow of J. P. Martin to whom
 in the County of Converse State of Georgia she was married on the 23rd
 day of June 1869 and that she remained his wife, and resided with him to the date of his death
 in March 1890 and that she has not since his death remarried. At the time of his death
 he was a resident of Fulton County, in Atlanta said State of Georgia, and he
 was on the Founders & Soldiers Pension Roll of the State and paid a pension of \$ 50
 in Fulton County for 1806 per annum, on account of being a soldier in Company
A 12th Ga. Regiment, C&A (Volunteers of Conf. War)
Evans Brigade, Gordon's Div., 2nd Corps, Army of N. Va.

At the death of J. P. Martin he was in the use and possession of the following
 property nothing whatever

of the cash value of \$
 What property of any kind and of any value have you in your use, control and possession now, and
 the cash value, (State fully.) none

Acres land none \$
 Horses and Mules none \$
 Hogs, Cows, etc. none \$
 Total Cash value of all property 700.00 \$

That she is now a bona fide resident citizen of said County of Fulton and she
 has so continuously resided since 1 day of September 1890

Sworn to and subscribed before me, this the 6th day of October 1890
Marcellus Anderson CC Ordinary,
 of Fulton County.

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

STATE OF GEORGIA,

Fulton County,

Personally before me come See Monaghan, Linnell & Cofford of Ordinary
 and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their
 own personal knowledge Mrs. J. P. Martin who made the foregoing affidavit, is
 the lawful widow of J. P. Martin who died in Fulton County in
 said State of Georgia on 22nd day of March 1890 and that she
 has not since remarried. That she became the wife of J. P. Martin on the 23rd day June
 of 1869 and that she and he had resided together as man and wife continuously since
1869 day of 1869 and that the said Martin was the
 same man who was on the pension roll of said State Georgia from Fulton County
 when he died.

Sworn to and subscribed before me, this the 6th day of Oct 1890
Marcellus Anderson CC Ordinary,
 of Fulton County.

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes Anna Martin who, after being sworn on oath says, that they are freeholders of said County, and that they know Geo. Martin of said County and knew her said husband Geo. Martin at his death on the 22^d day of March 1908 that she and he were in the use, possession and control of the following property at his death to wit: Had no property real or personal

of the value of \$ That she is now in the use, possession and control of the following property to wit: Had no property real or personal

of the value of \$ Sworn to and subscribed before me, this the 6th day of Oct 1910 Marcellus Johnson Ordinary, of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

John R. Johnson Ordinary of said County, do certify, that, I know Mr. Geo. Martin 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 22^d day of March 1908

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

That the tax Books of Fulton County shows that Geo. Martin returned property to the amount of none for 1908 \$ none for 1909 \$ none for 1910 \$ none

Sworn under my hand and official seal of office this 6th day of Oct 1910 Marcellus Johnson Ordinary, of Fulton County.

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

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

STATE OF GEORGIA,

Fulton County.

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

1. What is your Name, and where do you reside? Mrs. J. P. Martin 54 Hayden St. Atlanta, Ga.
2. How long and since when have you been a continuing resident in the State of Georgia? Since my birth.
3. When, where and to whom were you married? June 23, 1867, Herman H. J. Martin
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army? (State the arms and class of Service). April 1862, at Augusta Ga. Co. Company A. 12th Ga. Battalion. 5th Navy. Call. No. 1000000000
5. When and where did the Commands of your husband surrender or discharge from the army? At Appomattox VA. April 9, 1865
6. Was your husband personally present at the time of the surrender or discharge of this Command? I have heard my husband say he was present at surrender.
7. If he was not present, state clearly where he was? He was here I have.
8. Where was his Command when he left? At Appomattox VA.
- a. For what cause did he leave his command? Could not fight the battle any longer.
- b. By whose authority did he leave his Command? By authority of his Commanding Officer.
- c. For how long was he granted leave of absence? Until the end of the war.
- e. What was his physical condition when he left his Command? Suffering from wounds.
- f. What was the cause of his leaving his Command? By the demands of his own mind.
- g. What way was he prevented from going back to Command? By the demands of his own mind.
- h. Was he captured by the enemy at any time? No.
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? Released at Montgomery Maryland. Left on 10th of May 1865. Released at Ft. Belvoir.
- j. When and where did your husband die? March 22, 1906 54 Hayden St.
- k. Were you residing together when he died? Yes.
- l. If not, how long had you resided apart? Yes.
9. What property of any description did you own, hold or control for your use and its cash value, Nov. 4, 1908. (State same by items). none
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value). None
11. What property of any description of any value have you now? Nothing at all.
12. What are your annual earnings or income and their value? I have no income.
13. Have you heretofore been paid a pension by the State? No.
- If so, when and for what cause were you struck from the Roll? Never been on the pension roll.

Subscribed before me this the 2nd day of July 1911 at Atlanta Ga. Mrs. Margaret Martin Ordinary. of Fulton County.

Widow's Pension

UNDER ACT 1910.

Records filed in
Register of
Fulton 11/25-1911

Name Mrs. Margaret E. Martin

Widow of James P. Martin

9-12-12 In Act

ENTERED ROSTER OFFICE
J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Byrd, State Printer.

9/26/11 54

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County,

Personally before me comes R.N. Fickel & J.H. Taskel who on oath says that they are freeholders of said County and that they know Margarette Martin of said County and know what property she owned on 4th Nov. 1908, and its cash value to be as set out by Schedule (A) as follows:

Personal property None \$
Notes and accounts due None \$
Total None \$

Schedule (B).

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

Personal property None \$
Money, Notes and accounts None \$

Schedule (C).

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

Acres of land worth None \$
Horses and Mules None \$
Cows and Hogs None \$
Other property None \$
Income and earnings None \$
Total Value of all property and effects None \$

Sworn and subscribed before me this the

January 23 day of Jan 1911, at Fulton County, Georgia.
Harrell M. Anderson Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County,

I, John Breckinson Ordinary of said County do certify that I know Margarette Martin the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1908.

That I also know R.N. Fickel & J.H. Taskel the witness who swears to the service of husband, and who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Fulton County Returned for Tax is for 1908 \$ None for 1910 \$ None

Sworn under my hand and official seal of office this 23 day of Jan.

1911/ John Breckinson Ordinary,
Fulton County

(SEAL)

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

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

STATE OF GEORGIA,

County,

Personally before me comes Henry D. Cahers who after being duly sworn true answers to make, to the following questions, answers as follows:

1. What is your name and where do you reside? Henry D. Cahers 224 Chestnut Atlanta Ga
2. How long and since when have you known Mrs J.P. Martin applicant? Since April 1865
3. How long and since when has she continuously resided in this State? (Give date.) I have known her since for several years -
4. When and to whom was she married? John P. Martin How do you know? Since
5. How long and since when did you know J.P. Martin her husband? Since April 1865, when he enlisted in my Command
6. When and where did John P. Martin the husband of Applicant die? in Atlanta, Ga. March 2nd 1906
7. Were the Applicant and her husband living together as husband and wife at the date of his death? Yes
8. If not, how long did they live apart before his death? Never parted but by death

Were they divorced? Never

9. When, where and in what Company and Regiment did J.P. Martin enlist? In Co. H 12th Ga. Battalion City, at Augusta Ga. 1865

H.D. Cahers Commanding

10. Were you a member of the same Company? Commanded the Battalion

11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From date enlistment until his surrender & his death in my Command

12. When, and where did his Command surrender, and was discharged? On the 9th April 1865 at Appomattox R.V.

13. Were you personally present when it was surrendered? Yes If not where were you? In Hospital with wounds and how came you there? By order of Surgeon General - but kept in touch with my Command

14. Was the husband of applicant personally present at surrender? Yes If not where was he? He was always faithful when, where and for what cause did he leave Command? (Give date.) April 9 1865 at Appomattox R.V. By whose authority did he leave his Command? By authority of his Commanding Officer and how long was he granted leave? Until discharge How do you know all this?

I had the honor of Commanding the 12th Ga. Battalion, and
know J.P. Martin to be one of the bravest & truest men in the ranks

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? By the terms of Surrender of Sec. Army

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? He was discharged on a furlough and immediately came to report for duty & was asked a furlough

Sworn and subscribed before me this the 23 day of Jan 1911

Harrell M. Anderson Ordinary,

Fulton County.

the foregoing affidavits and that they all, to truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns Fulton County Returned for Tax is for
1908 \$ None for 1910 \$ None
Sworn under my hand and official seal of office this 1st day of Sept

1911 / John P. Robinson Ordinary,
Fulton County
(SEAL)

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

I had the honor of Commanding the 12th Regt. Cavalry, and
had the honor to be one of the board of trial men on the rank

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? By the terms of Surrender of Lee Army.

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? He is known to be a prisoner and has been sent to
Prison for duty & was sent a prisoner
Sworn to and subscribed before me this the 2nd day of Sept 1911
Walter D. Capers Ordinary,
Fulton County.

STATE OF GEORGIA,
COWETA COUNTY.

In the Court of Ordinary.

I, L. A. PERDUE, Ordinary of said County, and Ex-Officio Clerk of the Court of Ordinary, certify that the attached and foregoing Dec 1 pages

of printing and writing contain a full, true, and complete copy of Marriage License

& certificate of J. P. Martin & M. B. (or M. E.) Brown,
Marriage Record "D" Page 158,

as the same appears of record and file in this office.

Witness my hand and the seal of said Court at Newnan, Ga.,

this Sept 14 th 1906

L. A. Perdue

L. A. PERDUE,

Ordinary and Ex-Officio Clerk.

STATE OF GEORGIA, } In the Court of Ordinary.
COWETA COUNTY.

I, L. A. PERDUE, Ordinary of said County, and Ex-Officio Clerk of the Court of Ordinary, certify that the attached and foregoing cell pages of printing and writing contain a full, true, and complete copy of Marriage License ✓ certificate of J. P. Martin & M. A. (or M. E.) Brown, Marriage Record "D" Page 158, as the same appears of record and file in this office.

Witness my hand and the seal of said Court at Newnan, Ga.,
this Sept. 14 th 1906

L. A. Perdue

L. A. PERDUE,
Ordinary and Ex-Officio Clerk.

****LIGHT PRINT AND, OR BAD COPY ****

MARRIAGE LICENSE.

§ § §

STATE OF GEORGIA,
COUNTY OF COWETA.

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

YOU ARE HEREBY AUTHORIZED TO JOIN

J. P. Martin
and
M. B. Brown

In the Holy State of Matrimony, according to the Constitution and Laws of this State, and for so doing this shall be your License. And you are hereby required to return this License to me, with your Certificate hereon of the fact and date of the Marriage

Given under my hand and seal, this *22nd* day of *June*

J. H. Cooke
(L. S.)
ORDINARY.

CERTIFICATE.

GEORGIA,

COUNTY.

I Certify that

J. P. Martin

and

M. B. Brown

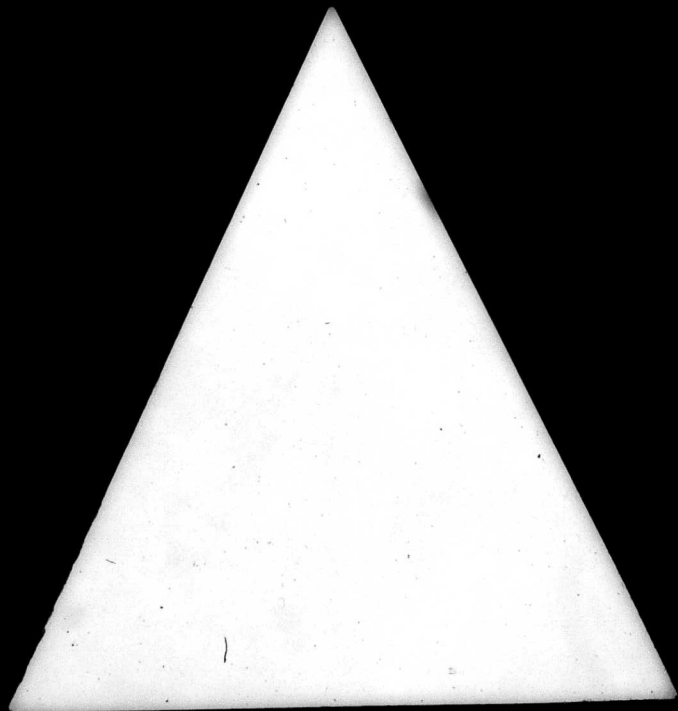
were joined in Matrimony by me, this *23* day of *June* *Nineteen Hundred and 1869*

J. P. Hood

M. B.

Recorded: *Aug. 27-1869* Ordinary.

Recorded: *Aug. 27 - 1897* Ordinary.



MARTIN - FULTON CO.
Martin Mary (Mrs)
Widow of Henry B. Martin



Widow's Application

Under Act of 1910 - As Amended by Act of
1919, and Constitutional Amendments
of 1920 and 1927
1852 and 1853

County FULTON
Name MRS. MARY MARTIN
Widow of HENRY BUD MARTIN
Date of Marriage SEPT 27th 1928
Date of Husband's Death JAN 1929
Company Co. 1st Confederate
Regiment Georgia
Approved Feb 18, 1903
William Henderson
Director.

CONFEDERATE DIVISION
State Department of Public Welfare

Confederate Pension
and Record Dept.

Altamaha, Ga. Feb. 18, 1851
KOC State Capital

Henry Bud Martin
enlisted as a private
in Co. A, 1st Confederate
Regt. Inf. Apr. 18, 1862.
Promoted to
captured at Trenton,
Tenn. Dec. 17, 1864.
Released at Aquiaville,
Ky. June 17, 1865.
William Henderson
Director
Fulton County
1890.

MARY - FULTON CO.

Martin, Mary (Mrs.)
McNair, Mary B. Martin

Atlanta, Ga. Feb. 18/93
400 State Capital Bldg.

Henry Bud Martin
enlisted as a private
in Co. A, 1st Confederate
Regt. Inf. Apr. 10, 1862

Remained at front
until he was
killed at Peachtree
Bluff, Dec. 17, 1864.

Released at Savannah
May, June 17, 1865.

William H. Hudson
Director

See Fulton County
1890.



Widow's Application

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

1912 and 1913

County FULTON

Name MRS. MARY MARTIN

Widow of HENRY BUD MARTIN

Date of Marriage SEPT. 21st 1928

Date of Husband's Death JUN 1928

Company Co. A, 1st Confederate

Regiment Infantry

Approved Feb 18, 1903

William H. Hudson
Director.

CONFEDERATE DIVISION
State Department of Public Welfare

Confederate Pension
and Record Dept.

"E"

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

FULTON COUNTY.

Personally appeared before me, MRS. MARY MARTIN of said State and County, and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after being duly sworn, true answers to make to the questions propounded, answers as follows, to-wit:

SECTION I.

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

Mrs. Mary Martin - 121 Ramsey Pl. S.W. - Atlanta, Ga.

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

Twenty years

Give date, or year, of your birth. Sept. 17, 1893 Age? 60

3. (1) When, (2) where and (3) to whom were you married? Henry Bud Martin, September 25, 1928

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

b. When and where did your soldier husband die? Soldiers Home Hospital

c. Were you residing together when he died? YES

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

e. Are you now a widow? YES

f. Have you or your husband heretofore been paid a pension by the State? YES

g. If so, in what county was first pension drawn and what year were you or your husband placed on rolls? ALREADY ON ROLLS IN SEPTEMBER 1928

See Fulton County, 1890.

SECTION II.

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

DONT KNOW

2. When and where was the Command of your husband surrendered?

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

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

5. When did he leave the Command?

a. For what cause did he leave?

b. By whose authority did he leave?

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

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

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

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

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

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

Sworn to and subscribed before me, this the 16th day of FEBRUARY, 1933.

Mary Martin Ordinary

of FULTON County.

(SEAL OF ORDINARY)

Mrs. Mary Martin HER MARIC & Martin Applicant.

Questions for Witness as to Marriage

STATE OF GEORGIA,

FULTON COUNTY.

MRS. ELLA CARTER of said State and County is hereby presented as a witness in support of the application of MRS. MARY MARTIN for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1927, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County) Mrs. Ella Carter, 121 Rawson St. SW. - Atlanta, Ga.
2. How long and since when have you known Mrs. Mary Martin applicant Before Her Marriage and after in fact all of her life.
3. Where does she now reside, and since when has she been continuously, a bona fide resident citizen of this State? 121 Rawson St. SW. - ATLANTA, GA.
4. When and to whom was she married HENRY BUD MARTIN How do you know? I was present
5. How long and since when did you know HENRY BUD MARTIN her husband? UNTIL HIS DEATH SOLDIERS HOME - JAN. 1927
6. When and where did SOLDIERS HOME - JAN. 1927 the husband of applicant, die? ATLANTA, GA.
7. Were the applicant and her husband living together as husband and wife at the date of his death? YES
8. If not, how long did they live apart before his death?

Were they divorced? NO

Sworn to and subscribed before me, this the

16TH day of FEBRUARY, 1927

Eugene Gunby Ordinary

of FULTON County.

(SEAL OF ORDINARY)

(Witness)

Ordinary's Certificate

STATE OF GEORGIA,

FULTON COUNTY.

I, JUDGE EUGENE GUNBY, Ordinary of said County, do certify that I know MRS. MARY MARTIN 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 MRS. ELLA CARTER the witness who swears to the service of husband and/or the marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavit, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 16TH day of FEBRUARY, 1927.

(SEAL OF ORDINARY)

Eugene Gunby Ordinary

FULTON County.

INSTRUCTIONS:

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

Martin, Mary (Mrs)
Widow of Henry B. Martin
53
Fulton
County

Widow's Application

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

County FULTON
Name MRS. MARY MARTIN
Widow of HENRY BUD MARTIN
Date of Marriage SEPT 25th 1878
Date of Husband's Death JAN. 1929
Company Co. 1st Georgia
Regiment Infantry
Approved Jan 16 1933
Director.

CONFEDERATE DAVIDSON
State Department of Public Welfare
Department of Confederate
Pensions & Records

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

FULTON COUNTY.

Personally appeared before me, MRS. MARY MARTIN of said State and County, and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after being duly sworn, true answers to make to the questions propounded, answers as follows, to-wit:

SECTION I.

1. What is your name, and where do you reside? (Give Post Office and County)
Mrs. Mary Martin, 128 W. 11th St. Atlanta, Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? Sixty years
3. Give date, or year, of your birth Sept. 17, 1893 Age? 60
4. (1) When, (2) where and (3) to whom were you married? Sept. 25, 1878
Henry Bud Martin
5. a. Have you married since the death of first and soldier husband? No
6. b. When and where did your soldier husband die? Soldiers Home Hospital
7. c. Were you residing together when he died? YES
8. d. If not, how long had you resided apart? —
9. e. Are you now a widow? YES
10. f. Have you or your husband heretofore been paid a pension by the State? YES
11. g. If so, in what county was first pension drawn and what year were you or your husband placed on rolls? ALREADY ON ROLLS IN SEPTEMBER 1928.

SECTION II.

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

2. When and where was the Command of your husband surrendered?
3. Was your husband personally present with his Command when it was surrendered?
4. If he was not present, state specifically and clearly where he was?
5. When did he leave the Command?
 - a. For what cause did he leave?
 - b. By whose authority did he leave?
 - c. For how long was his leave of absence granted? d. In what way?
6. e. What was his physical condition when he left his Command?
7. f. What effort did he make to return to his Command?
8. g. In what way was he prevented from going back to his Command?
9. h. Was he captured by the enemy at any time?
10. 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

16th day of FEBRUARY, 1933
[Signature] Ordinary
of FULTON County.
(SEAL OF ORDINARY)

Mrs Mary Martin
Applicant.

Questions for Witness as to Marriage

STATE OF GEORGIA,

FULTON COUNTY.

MRS ELLA CARTER

of said State and County is hereby presented as a witness in support of the application of MRS. MARY MARTIN for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1987, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County)
Mrs. Ella Carter, 121 Rawson St. SW - Atlanta, Ga.
2. How long and since when have you known Mrs. Mary Martin applicant
Before her marriage and after in fact all of her life.
3. Where does she now reside, and since when has she been, continuously, a bona fide resident citizen of this State? 121 Rawson St. SW - Atlanta, Ga.
4. When and to whom was she married? Henry Bud Martin How do you know? I was present
5. How long and since when did you know HENRY BUD MARTIN her husband? Until his DEATH - JAN. 1929
6. When and where did SOLDIERS HOME - JAN. 1929 the husband of applicant, die? ATLANTA, GA.
7. Were the applicant and her husband living together as husband and wife at the date of his death? YES.
8. If not, how long did they live apart before his death? No

Were they divorced? No

Sworn to and subscribed before me, this the _____ day of _____, 193____

Eugene Gunby Ordinary
of _____ County.
(SEAL OF ORDINARY)

(Witness)

Ordinary's Certificate

STATE OF GEORGIA,

FULTON COUNTY.

I, JUDGE EUGENE GUNBY, Ordinary of said County, do certify that I know MRS. MARY MARTIN 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 MRS. ELLA CARTER the witness who swears to the service of husband and/or the marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing affidavit, and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 16th day of FEBRUARY, 1933.
(SEAL OF ORDINARY) Eugene Gunby, Ordinary
of FULTON County.

INSTRUCTIONS:

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

Given under my hand and seal of office this 16th day of FEBRUARY 1963
(SEAL OF ORDINARY) Eugene M. Harty Ordinary
of FULTON County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1930, are eligible.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copy of marriage license if obtainable. If not, prove marriage by some person, or by general reputation.
6. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.
7. Do not take an application from any widow who is already receiving a pension.

Martin, Mrs. Mary C.
Fulton Co.
D. 19. 1926 - E -
WIDOW'S APPLICATION

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

County *Fulton*
Name *Mrs. Mary A. Martin*
Widow of *Geo. H. Martin*
Date of Marriage *Nov 18* 1868.
Company *F.*
Regiment *4th Ala. Cavalry*
Approved *John W. Clark*
JAN 22 1926

Commissioner of Pensions.

1-19-26-E.

Ordinary's Certificate

STATE OF GEORGIA.

Fulton COUNTY.

I, *Thos H. Phillips*, Ordinary of said County, do certify that I know *Mrs Mary A. Martin* 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 she is~~ *that she is* ~~the widow of the person named in the certificate of husband~~ *my dear* ~~that she is now residing at said~~ *now residing at said* County and were duly sworn by *my dear* before signing the foregoing affidavits, and that ~~they are~~ *they are* truthful and trustworthy and ~~the~~ *my dear* statements are entitled to full faith and credit.

Given under my hand and official seal of office this *19* day of *Jan* 1926
(SEAL OF ORDINARY) *Thos H. Phillips* Ordinary.
Fulton County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witnesses in the following words: "You shall give me the truth, so help you God." To each of the questions asked you and the evidence you shall give will be the whole truth, so help you God. This is my duty as Ordinary."
2. Only widows who were married before January 1st, 1920, are eligible.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to in the presence of the Ordinary.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be sworn to in the presence of the Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage by some person, or by affidavit.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

WIDOW'S APPLICATION

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

County: Fulton
 Name: Mrs. Mary A. Martin
 Widow of: John H. Martin
 Date of Marriage: Nov 18 1868
 Company: F
 Regiment: 4th Ala. Calvary
 Approved: John W. Colvard
JAN 22 1926

Commissioner of Pensions

Ordinary's Certificate

STATE OF GEORGIA,

FULTON COUNTY.

I, Thos H. Jeffries, Ordinary of said County, do certify that I know Mrs Mary A. Martin 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~~ she is a the witness who swore 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 truthful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and official seal of office this 19 day of Jan 1926.
 (SEAL OF ORDINARY) Thos H. Jeffries, Ordinary.
Fulton County

Instructions:

- Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
- Additional affidavits may be attached if blank spaces are insufficient.
- Only widows who married prior to January 1st, 1861, are entitled.
- All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
- Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
- Fill out the back of the application carefully.
- Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

APPLICATION FOR PENSION BY A WIDOW

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,
 FULTON COUNTY.

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

- What is your name, and where do you reside? (Give Post Office and County)
Mrs. Mary A. Martin, Atlanta, Ga. Fulton Co., 247 Sells Ave.
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia?
Since October 1, 1920

3. When, where and to whom were you married? November 18, 1868
Florence, Ala. Lauderdale Co., John H. Martin, Deceased

- Have you married since the death of first and soldier husband? No
- When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service, and give name of Colonel and Captain.) Month of July 1862; Florence, Ala. in Company F. 4th Ala. Calvary, U.S.A. Private

5. When and where did the commands of your husband surrender or discharge from the Service?
May 1st, 1865 at Pond Spring in Lawrence Co., Ala.

- Was your husband personally present with his command when it was surrendered or discharged? Yes
- If he was not present, state specifically and clearly where he was?
- When did he leave the Command?
 - For what cause did he leave?
 - By whose authority did he leave?
 - For how long was his leave of absence granted? In what way?

- What was his physical condition when he left his command?
- What effort did he make to return to his Command?
- In what way was he prevented from going back to Command?
- Has 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 your first husband die?
- Were you residing together when he died? Yes
- If not, how long had you resided apart?
 - Are you now a widow? Yes
- Have you or your husband heretofore been paid a pension by the State Yes, both by Alabama
If so, when and for what cause were you or your husband placed on the roll? Merit
My husband was on the roll in Ala. many years & after his death I was
placed thereon & dropped because I became a non-resident of the State
of Alabama.

Sworn to and subscribed before me, this the 19th day of January, 1926.
William K. Martin G. O. Ordinary
 of Fulton County.
 (SEAL OF ORDINARY)

Mrs Mary A. Martin
 Applicant.

Questions for Witness as to Service of Husband and Marriage

STATE OF GEORGIA, Alabama

Lauderdale COUNTY.

Mitchell Malone of said State and County is hereby presented as a witness in support of the application of Mrs. Mary A. Martin for the pension provided by the Act of 1910, as amended by the Act of 1918 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? Mitchell Malone
Hawthorn Street #220 Florence, Alabama
2. How long and since when have you known Mrs. Mary A. Martin applicant
More than 60 years - since during the war of 1861-5
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? Augusta Ga. Since October 1st 1920
4. When and to whom was she married? Nov 18th 1863 How do you know? I was there
5. How long and since when did you know Jr. H. Martin her husband? About 46 years since 1867 or 8
6. When and where did John H. Martin the husband of applicant, die? In Florence Alabama on March 11th 1911
7. Were the applicant and her husband living together as husband and wife at the date of his death? Yes

8. If not, how long did they live apart before his death? Yes
Were they divorced? No
9. When, where and in what Company and Regiment did Jr. H. Martin enlist?
(Give date and place) July 1862 At Florence Ala in Co. F, 4th Ala Cav
10. How did you obtain your information of this service? Was in the same Co all the time
11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) July 1862 to May 18 - 1865
12. When and where was his Command surrendered or discharged? (Give date and place)
At Camp Spring in Lawrence Co Ala on May 18 - 1865
13. Were you personally present with this Command when it was surrendered? Yes
If not, where were you and how came you there? Yes

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.) War was over
By whose authority did he leave his Command? Yes
and how long was he granted leave? Yes
How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically). Yes, he belonged to same Co & was present at same time. We grew up together & married in same family.
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? Yes
16. What effort did he make to return to his Command and how do you know this? Yes

17. Was he captured as a prisoner? No If so, when and where? Yes
In what prison was he held? and when released? Yes

Sworn to and subscribed before me, this the 11 day of April, 1924. Mitchell Malone (Witness)
J. W. Clure Notary Public Ordinary,
of Lauderdale County, Ala

(SEAL OF ORDINARY)

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? No If so, when and where? ✓

In what prison was he held? _____ and when released? ✓

Sworn to and subscribed before me, this the

11 day of April, 1924.

Mitchell Malone
(Witness)

J. M. Clark Notary Public
of Lauderdale County Ala

(SEAL OF ORDINARY)

Martin, Mrs Mary A.
v 3

For Fulton County

1929

**Application for Pension
Due Deceased Pensioner**

(UNDER ACT 1904)

(To pay expenses of last illness and funeral)

Thos H. Jeffries Ordinary

For Mrs Mary A. Martin

Date of Death Sept 30 1929

Amount \$180.00

Approved and ordered paid

Dec. 18, 1929 E. dat. Lawrence

Commissioner of Pensions

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

AUGUSTA, GA. Nov 27th, 1929

In Estate of Mary A. Martin,

Augusta, Ga.

FOR Mrs. Mary A. Martin

IN ACCOUNT WITH

Platt's Funeral Home

J. D. CURTIS, PROP.

FUNERAL DIRECTORS

Sept. 30-To Jacket & Services
" Embalming

\$200.00
25.00
\$225.00

Personally called J. D. Curtis, Prop. of Platt's Funeral Home, who on oath says that the above account is correct, true, and correct.

Signed J. D. Curtis

The above and foregoing account is rendered for funeral expenses of Mrs. Mary A. Martin, deceased ----- who died without owning sufficient property to pay this bill.

Sworn to & subscribed before me this 7th day of December, 1929.

Charles R. R.
Ordinary, Richmond County, Ga.

Application for Pension Due to a Deceased Pensioner

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

GEORGIA, Richmond County.

Personally before me, the Ordinary of said County, comes J. D. Curtis, Proprietor of Pratt's Funeral Home of said County, who, after being sworn, on oath says that he knew Mrs. Mary A. Martin of said County, and that said Pensioner was on the Pension Roll of Fulton County at the time of death, which occurred in Richmond County, in this State, on the 30th day of September, 1929, and that pensioner ~~left no widow surviving, and~~ no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 225.00, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
Wm. H. Eys Ordinary
Richmond County
(Seal of Ordinary)

Pratt's Funeral Home
J. D. Curtis Proprietor

CERTIFICATE OF ORDINARY

GEORGIA, Richmond County.

I, Oswell R. Eys Ordinary of said County, do certify that I personally know J. D. Curtis, of Pratt's Funeral Home, 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 believe~~ while in life and that this was ~~the same person whose name appears on the Pension Roll of~~ the same person whose name appears on the Pension Roll of ~~and~~ and ~~was paid expenses of~~ (\$ 225.00) Dollars ~~in said County for 1929, 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 16th day of December, 1929,
(Seal of Ordinary) Wm. H. Eys Ordinary
Richmond County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____, who died without owing sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. 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.

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, Richmond County.

Personally before me, the Ordinary of said County, comes Mrs. Harry Robinson of said County, who, after being sworn, on oath says that he knew Mrs. Mary B. Martin of Fulton County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Richmond County, in this State, on the 30th day of September, 1929, and that pensioner left no widow surviving, and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ _____, per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me,
Wm. H. Eys Ordinary
Richmond County
(Seal of Ordinary)

Mrs. Harry Robinson

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos. H. Jeffries Ordinary of said County, do certify that I personally know _____ 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 believe~~ while in life and that this was ~~the same person whose name appears on the Pension Roll of~~ the same person whose name appears on the Pension Roll of ~~and~~ and ~~was paid expenses of~~ (\$ 50.00) Dollars ~~in said County for 1929, 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 17th day of December, 1929,
(Seal of Ordinary) Thos. H. Jeffries Ordinary
Fulton County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____, who died without owing sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. 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.

(Seal of Ordinary)

..... 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 for funeral expenses, as the case may be) of who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

(Seal of Ordinary)

..... 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 for funeral expenses, as the case may be) of who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

Ordinary's Certificate

STATE OF GEORGIA,

Fulton

COUNTY.

I, *Arthur R. Vincent Esq*, Ordinary of said County, do certify that I know *Mrs Mary E Martin*, the applicant for pension. She

is the person who represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 31st November 1906: *that I also know*

the evidence who swears to the service of husband, that said evidence were now residents of said County and

were duly sworn by me before signing the foregoing affidavits and that they were true, truthful, true, worthy, and their statements are entitled to full faith and credit.

(SEAL)

Sworn under my hand and official seal of office this *17* day of *Oct* 19*11*

Arthur R. Vincent Esq Ordinary,
Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You shall give what you know to the truth. So help you God." 2. Only witnesses who married before the 1st January 1907 are admissible. 3. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by him. 4. Attach certified copies of marriage licenses if obtainable. If not, prove marriage by some person, or by general reputation.

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County *Fulton*

Name *Mrs. Mary E. Martin*

Widow of *John A. Martin*

Company *E*

Regiment *7th Regt*

Approved _____

File with which application approved has been approved for 1921.

J. W. LINDSEY,
Commissioner of Pensions.
Royal Printing Co., State Printer, Atlanta.

10-31-1921

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, William R. Marble Ordinary of said County, do certify that I know Mrs. Mary E. Martin the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; ~~that I also know~~ she is the person who swears to the service of husband, that she is now residents of said County and were duly sworn by me before signing the foregoing affidavits and that she is truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 17 day of Oct 1919

(SEAL)

William R. Marble Ordinary,
Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the truth. No help you find."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1861, are entitled.
4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.

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

1. What is your name, and where do you reside? Mrs. Mary E. Martin, P'tree Hgts Park Atlanta, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? Feb. 22, 1866, Winnett County, Ga. to John A. Martin
- 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). 1861 DeKalb County, Ga. in Co. "E", 7th Ga. Reg.
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?
7. If he was not present state clearly where he was?
8. Where was his command when he left?
- a. For what cause did he leave his command?
- b. By whose authority did he leave his command?
- c. For how long was he granted leave of absence?
- e. What was his physical condition when he left his command?
- f. What effort did he make to return to his command?
- g. In what way was he prevented from going back to Command
- h. Was he captured by the enemy at any time?
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- j. When and where did your first husband die? April 18, 1905, Atlanta, Ga.
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? Never resided apart
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No

If so, when and for what cause were you or your husband placed on the roll? Never applied

Sworn to and subscribed before me this the

14 day of November 1919

Mary E. Martin Ordinary

of Fulton County.

(SEAL)

Widow's Pension

Under Act 1910-as Amended by Act of 1919

No.

County Fulton

Name Mrs. Mary E. Martin

Widow of John A. Martin

Company E

Regiment 7th Ga. Regt

Approved [Signature]

J. W. LINDSEY

Commissioner of Pensions

State Printing Co. State Printing House.

10-31-1921

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, Thos H. Jeffries Ordinary of said County, do certify that I know Mary E. Martin the applicant for pension. She

is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know N. P. Gueffroy

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

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

(SEAL)

Thos H. Jeffries Ordinary,
Fulton County.

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

No.

Widow's Pension

Under Act 1910 - as Amended by Act of 1919.

County Fulton
Name Mary E. Martin
Widow of John A. Martin
Company E
Regiment 7th Co., Reg
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co. State Printer, Atlanta.

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, Thos H. Jeffries Ordinary of said County, do certify that I know Mary E. Martin the applicant for pension. She

is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know Virgil A. Wilson

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

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

(SEAL)

Thos H. Jeffries Ordinary,
Fulton County.

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

Widow's Pension

Under Act 1910 - as Amended by Act of 1919.

County Fulton
Name Mary E. Martin
Widow of John A. Martin
Company E
Regiment 7th Co., Reg
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.
Byrd Printing Co. State Printer, Atlanta.

10-30-1920

Private, July 14, 61
Penn. App.

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Fulton COUNTY.

Personally before me comes N. S. Culpepper who, after being duly sworn, true answers to make to the following questions, answers as follows:

1. What is your name and where do you reside? N S Culpepper, Atlanta, Ga.
2. How long and since when have you known Mrs. Mary E Martin applicant? Don't know her
3. How long and since when has she continuously resided in this State? (Give date.)
4. When and to whom was she married? John A. Martin How do you know? Since 1861
5. How long and since when did you know John A. Martin her husband? Since 1861
6. When and where did the husband of applicant, die?
7. Were the applicant and her husband living together as husband and wife at the date of his death?
8. If not, how long did they live apart before his death?
9. When, where and in what Company and Regiment did John A. Martin enlist? May 31, 1861, Atlanta, Ga., Co. "E", 7th Ga. Reg. Inf.
10. Were you a member of the same Company? I was in Co. "G" same regiment
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From enlistment to surrender
12. When and where did his Command surrender, and was discharged? Appomattox Court House, April 9, 1865
13. Were you personally present when it was surrendered? Yes If not, where were you and how came you there?
14. Was the husband of applicant personally present at surrender? Yes If not where was he? When, where and for what cause did he leave Command? (Give date.) By whose authority did he leave his Command? I was in some regiment and saw him constantly in service until after surrender And how long was he granted leave? How do you know all this?
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the

14 day of November 1919

N. S. Culpepper Ordinary

Fulton County.

(SEAL)

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

Questions for Applicant

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name, and where do you reside? Mrs. Mary E Martin, 1814 Peachtree Rd
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? Feb 22, 1866, Swinnett Co., Ga., to John A. Martin
4. Have you married since the death of first and soldier husband? No
5. 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.) May 1861 Swinnett Co., Ga., Co. "E", 7th Ga. Reg. Inf.
6. When and where did the commands of your husband surrender or discharge from the army? Appomattox Court House, April 1865
7. Was your husband personally present at the time of the surrender or discharge of this command? Yes
8. If he was not present state clearly where he was? Never left command until after surrender
9. Where was his command when he left? surrender
- a. For what cause did he leave his command?
- b. By whose authority did he leave his command?
- c. For how long was he granted leave of absence?
- d. What was his physical condition when he left his command?
- e. What effort did he make to return to his command?
- f. In what way was he prevented from going back to Command?
- g. Was he captured by the enemy at any time? No
- h. If so, when and where captured and where held as a prisoner, and when and for what cause released?
- i. When and where did your first husband die? April 1905, Atlanta, Ga.
- j. Were you residing together when he died? Yes
- k. If not, how long had you resided apart? Never resided apart
- l. Are you now a widow? Yes
- m. Have you or your husband heretofore been paid a pension by the State? No
- n. 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

4 day of June 1920

Mrs. Mary E Martin Ordinary

Fulton County.

(SEAL)

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Fulton COUNTY.

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

1. What is your name and where do you reside? Virgil A. Wilson, East Point, Ga.
2. How long and since when have you known applicant?
Don't know her
3. How long and since when has she continuously resided in this State? (Give date.)
Don't know
4. When and to whom was she married? John A. Martin How do you know?
Don't know
5. How long and since when did you know her
husband?
John A. Martin
6. When and where did the husband of applicant, die?
Atlanta, Ga.
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?
9. When, where and in what Company and Regiment did John A. Martin enlist?
June 1861 joined Co. "E" 7th Ga. Reg. at Winchester, Va. as a recruit
10. Were you a member of the same Company? Yes
11. How long within your personal knowledge did he perform actual military service with his Company and Regiment? From enlistment to surrender
12. When and where did his Command surrender, and was discharged?
Appomattox East Va. April 1865
13. Were you personally present when it was surrendered? No If not, where were you held as prisoner behind Yankee lines
days before surrender and held as prisoner behind enemy lines
14. Was the husband of applicant personally present at surrender? Yes If not where was he? Never left command until after surrender
When, where and for what cause did he leave Command? (Give date.) _____ By whose authority did he leave his Command? _____ And how long was he granted leave? _____ How do you know all this?
I was member of said company and saw him constantly in service from date of enlistment to April 7, 1865, when I was captured
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? Never left command until after surrender
16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how?

Sworn to and subscribed before me this the

4 day of June, 1920

David B. B. B. Ordinary
of Fulton County,
(SEAL)

Virgil A. Wilson

day of June 1920
of Fulton County
(SEAL)

Georgia, Gwinnett County.

I, G.G. Robinson Ordinary of said county certify that the within writing contains a true and correct transcript from the records of this office, as recorded in marriage book #4 Page 470

Given under my hand and seal of this Court, this 20th day of May, 1920.

G.G. Robinson
Ordinary.

MARRIAGE LICENSE

OF

AND

191

Book

Issued and Recorded on Page

of Marriage Licenses

Ordinary

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
M. G. COUCH, who upon oath says:

That he has known Mrs. Mary E. Martin for about fifty years and knew her husband, John A. Martin, deceased; that during all the time he has known Mr. and Mrs. Martin, they lived together continuously as man and wife up to the date of the death of said Mr. Martin in April 1905; that the said Mrs. Mary E. Martin has not remarried since the death of her husband and is now his lawful widow.

Sworn to and subscribed before me
this June 9, 1920.

Walter R. Wadsworth cco

M. E. Couch

No. 1710



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

You are hereby authorized to join

Jno A. Martin and Mary E. Liddell,

in the Holy State of Matrimony, according to the Constitution and Laws of this State and for so doing this shall be your License.

And you are hereby required to return this License to me, with your Certificate hereon of the fact and date of the Marriage.

Given under my hand and seal this 20th *day of* February, 1866. ~~xxx~~

G. T. Rakestraw, (L.S.)
Ordinary.

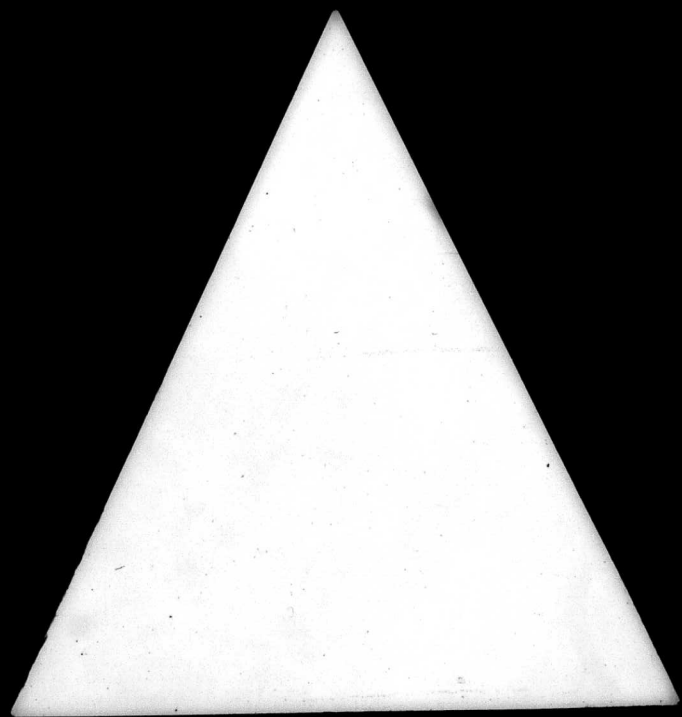
STATE OF GEORGIA **CERTIFICATE** GWINNETT COUNTY

I Certify that Jno A. Martin and Mary E. Liddell

were joined in Matrimony by me this 22nd *day of* February ~~Sixteen~~ Eighteen Hundred and Sixty-Six.

Recorded 191 Daniel M. Byrd, J.P.

Ordinary.



1926
 Martin, Walter B. (Mrs)
 Approved for 30s.
 Fullon
 WIDOW'S APPLICATION

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

County Fullon
 Name Wm. Mollie B. Martin
 Widow of Joel Martin
 Date of Marriage Nov 19 1879
 Company a
 Regiment 30 Bat.
 Approved John W. Glau
22 June 26.

Commissioner of Pensions.

6-11-26 E

Ordinary's Certificate

STATE OF GEORGIA.

Fullon COUNTY.

I, Thos. D. Phillips Ordinary of said County, do certify that I know Wm. Mollie B. Martin, 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, 1909; that I also know Wm. Mollie B. Martin the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by Wm. Mollie B. Martin before signing the foregoing affidavit, 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 Fullon this 19 day of June 1926.)
Thos. D. Phillips Ordinary.
 (SEAL OF ORDINARY)

at Fullon County

Instructions:

1. Before any questions are answered, the Ordinary shall read the questions 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. Only widows, who married prior to January 1st, 1901, are entitled.
3. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by affidavit.
4. Fill out the back of the application carefully.
5. Have the back of the application certified by a Notary Public throughout the State. A note, sample form is here to handle.

1926
Martin, Mollie B. (Mrs)
Approved for John
Widow's Application
Under Act of 1910—As Amended by Act of
1913, and Constitutional Amendment
of 1920.

County Fulton
Name Mollie B. Martin
Widow of John W. Martin
Date of Marriage Nov 17 1879
Company A
Regiment 30 Bat.
Approved John W. Martin
22 June 26

Commissioner of Pensions

6-11-26 E

Ordinary's Certificate

STATE OF GEORGIA,
Fulton COUNTY.

I, Robert Jeffries Ordinary of said County, do certify that I know Mrs Mollie B. Martin 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 Thomas H. A. Redwing the witness who swears to the service of husband; that both of them are now residents of said County and were duly sworn by myself 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 10 day of June 1926.
(SEAL OF ORDINARY) Thomas H. A. Redwing Ordinary.
of Fulton County

Instructions:

1. Before any questions are answered the Ordinary shall swear applicant and the witnesses in the following words: "You do solemnly swear that you will true answers make to each of the questions asked you and the evidence you shall give will be the whole truth. So help you God."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. Only widows who married prior to January 1st, 1861, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

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. Mollie B. Martin 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. Mollie B. Martin, Fairmount App's., Atlanta, Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia? All my life
3. When, where and to whom were you married? Nov. 19, 1879 Atlanta, Ga., to Zach T. Martin
- 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.) Co. A, 30th Battn. Ga. Cavalry, became 11th Regt. Ga. Cavalry later. At Athens, Ga. Capt. Bell.
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? No. Reported to Col. Young at Athens, under Capt. Irwin he was reported sick, and was released soon afterwards.
8. When did he leave the Command? Was captured when on detail Nov. 22, 1864, but was released soon afterwards.
- a. By whose authority did he leave? Commanding officers.
- c. For how long was his leave of absence granted? Do not know In what way?
- e. What was his physical condition when he left his command? Sick, sent out on furlough
- f. What effort did he make to return to his Command? Was out off from command while on furlough, could not reach command, so reported to Col. Young.
- h. Was he captured by the enemy at any time? Yes, in 1864, but was released soon.
- i. If so, when and where? In what prison was he held and when was he released? Was not sent to prison.
- j. When and where did your first husband die? (Moreland) 1888 Newnan, Ga., Oct. 13, 1907.
- k. Were you residing together when he died? Yes.
- l. If not, how long had you resided apart? Yes.
- m. Are you now a widow? Yes.
9. Have you or your husband heretofore been paid a pension by the State? No.
- If so, when and for what cause were you or your husband placed on the roll?

Sworn to and subscribed before me, this the
10th day of June, 1926.
Arthur R. Markert O. O. Ordinary
of Fulton County.
(SEAL OF ORDINARY)

Mrs. Mollie B. Martin
Applicant.

3. Only widows who married prior to January 1st, 1901, are entitled.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides, and must be certified by such Ordinary.
5. Attach certified copies of marriage license if obtainable. If not, prove marriage, by some person, or by general reputation.
6. Fill out the back of the application carefully.
7. Don't use the bulky form of Marriage Certificate in vogue throughout the State. A short, simple form is easier to handle.

of Fulton County,
(SEAL OF ORDINARY)

Mrs. Mollie B. Martin
Applicant.

GEORGIA, FULTON COUNTY.

Personally appeared Mrs. Mollie B. Martin who makes affidavit that she has made diligent search for her witness to the service of her husband Zack Martin, as a Confederate Veteran, other than the affidavit hereto attached by two Confederate Veterans, Dr. T. D. Longine and L. S. Redwine, who proved that he was a member of Camp A. Wheeler's Cavalry at the time of his death.

Sworn to and subscribed before me,
this 10th day of June, 1926.

Arthur R. Mearns
C. C. ORDINARY.

GEORGIA, FULTON COUNTY.

Personally appeared Dr. T. D. Longine and L. A. Redwine who make affidavit that they were personally acquainted with Zack Martin and while they are not familiar with his service as a Confederate Veteran they make affidavit that they know that Mr. Martin applied and was elected to membership in Camp A. Wheeler's Cavalry, which is in which is in their opinion sufficient proof that he was actually in the service of the Confederate army.

Sworn to and subscribed before me,
this 10th day of June, 1926.

Arthur R. Mearns
C. C. ORDINARY.

This is to Certify that a
Cross of Honor was
bestowed upon Mr. Zack
Martin (an experienced
Veteran) by the Atlanta
Chapter U. V. C. the having
properly filled out
Application blanks, some
being endorsed by comrades
of Long White, to which
he was a member
Mr. E. & Scott
Contributors of Crosses
of Honor.

June 29-1926-
W. G. Graham - President
Atlanta Chapter U. V. C.
May 3rd 1926

MARRIAGE LICENSE

State of Georgia--Fulton County

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person authorized to Solemnize.

You are hereby authorized and permitted to join in the honorable state of Matrimony Zack Martin

and Mollie O. Biggers

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 18th day of November 1879

Daniel Pittman L.S.
Ordinary

I hereby certify that Zack Martin

and Mollie O. Biggers

were joined together in the HOLY BANS OF MATRIMONY

on the 19th day of Nov. 1879, by me U. Parks, M. G.

State of Georgia,
Fulton County.

S. S.

ORDINARY'S OFFICE

ATLANTA, GA., June 10 1928

I, Arthur R. Marbut 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

Zack Martin
and Mollie O. Biggers

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.

Arthur R. Marbut
Clerk Court of Ordinary.

Zack Martin

Mollie O. Biggers

and.....
as the same appears of record in this office.

Given under my official Signature and Seal of the Court of Ordinary,
the day and year aforesaid.

Arthur R. Maibut
Clerk Court of Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,
COUNTY, }

I, _____, hereby authorize

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

at _____ day of _____ 1898.

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

Executed in presence of _____

(In S.)

Pension Office 7/17/1899
Unpaid - incomplete
Richard Johnson
Care of Pension

Pension of \$7.24 7/24/99
Florida friends a nation
that will crown that he
was present at that place
of this man Remanded him
that applied was Captain
+ made a pension of 1000
as he has stated - This
fact showed by application
by Morris - Now I am
in state of Morris, being
that application cannot be
accepted at any time
or later
J. D. Linsley
Care of Pension

MARTIN, W. A. a Manilla
Fulton County
36
No. _____

INDIGENT PENSION

~~to 1898~~
Name W. A. Martin
County Fulton
Fulton

Approved _____ 1898.

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT HANDED TO

W. W. HARRISON, STATE PRINTER, ATLANTA.

9/6-1900
1/25-99 1/3-1890

STATE OF GEORGIA.

COUNTY.

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

Executed in presence of

(L. S.)

Quarantine Officer 7/17/1899
Notified - incomplete

Richard Johnson
Co. of Engineers

[illegible]

RICHARD JOHNSON,
Commissioner of the

WARRANT HANDED TO

INDIGENT PENSION

Name _____

County

Approved:

1898

STATE OF GEORGIA.

West - County

1. What is your name and where do you reside? (give State, County and post office.)

1. What is your name and where did you reside? (give State, County and post office).
Wm R Martin Albert County Pa Ellettsville Pa
2. How long and since when have you been a resident of this State?
Since 15 Aug 21 *Sept 1954* *Since 1987*
3. When and where were you born?
In Athens *Camble County Pa*
4. When and where and in what company and regiment did you enlist or serve?
In Athens Pa *18th Pa Regiment Co F* *after was transferred to Co. B. 1st Penna Cav. Butte Camp Pa*
5. How long did you remain in such company and regiment?
2 *years 2*

Every Question MUST be Answered

6. "For how long a period did you discharge regular military duty? *4 years*
7. "When, where and under what circumstances were you discharged from service?
I was captured at Fort Mifflin on Sept 26th 1777 and I was a prisoner until the surrender.
8. What is your present occupation? *Carpentering*
9. How much can you earn (gross) per annum by your own exertions or labor? *I am unable to work*
10. What has been your occupation since 1865? *Carpentering until I was forced out of work*
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmity and poverty," or third, "blindness and poverty"? *Age and poverty*
12. If upon the first ground, state how long you have been in such condition? that you could not earn your support? If upon the second; give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
I have not been able to work any in years
years
13. What property, effects or income do you possess, and its gross value? *I have no property*
14. What property, effects or income did you possess in 1894, 1895, 1896 and 1897, and what disposition, if any, did you make of same? *I did not have any in the above stated years*
15. In what County did you reside during these years, and what property did you then return for taxation?
in Berks County Pennsylvania - I believe not property
16. How were you supported during the years 1896 and 1897? *by my children*

17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? My Father's Contribution with
18. What was your employment during 1886 and 1897? What pay did you receive in each year?
No employment
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have three children, they work on the Western Cattle Ranch. We have no homestead
20. Are you receiving any pension? If so, what amount, and for what disability? No pension

Sworn to and subscribed before me this the

12 day of December, 1898

Applicant.

____ Ordinary
____ County

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Elbert COUNTY.

Personally came before me B. M. Bishop and B. F. Smith, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully W. A. Martin, applicant for pension under the Act of 1894, and after such personal examination say that his precise physical condition is as follows:

He is a volunteer soldier of the
Confederate Army and is now a
physician.

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 27 day of June, 1898. B. M. Bishop and B. F. Smith Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Macdon COUNTY.

I, J. N. Boggio, Ordinary in and for said County, hereby certify that the applicant W. A. Martin resides in said County, and has been a bona fide resident of this State since the 1st day of June, 1898, and that the witnesses, viz: J. H. Bullock

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

I further certify that the tax digests of Macdon County show that applicant returned for taxation in his name in 1896 _____ Dollars of property, and in 1897 _____ Dollars of property.

In my opinion the foregoing claim is made in good faith. Witness my hand and seal of office, this 27 day of June, 1898.

J. N. Boggio Ordinary of Macdon County.

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

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Macdon COUNTY.

J. H. Bullock of said State and County, having been presented as witness in support of the application of W. A. Martin for pension under the Act approved December 16th, 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? J. H. Bullock

2. Are you acquainted with W. A. Martin, the applicant; if so how long have you known him? 40 yrs

3. Where does he reside, and how long and since when has he been a resident of this State? Elbert Co. Ga. Since birth

4. When, where and in what company and regiment did he enlist, and how do you know? 1861 Va. Co. 8th Va. Reg. Was with him

5. Were you a member of the same company and regiment? Yes

6. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? 4 yrs

Good soldier always at his post

7. What property, effects or income has the applicant? (Give your means of knowledge.) Nothing. From his leg

8. What property, effects or income did the applicant possess in 1896 and 1897, and what disposition, if any, did he make of same? Nothing

9. Has he conveyed away any of his property in the last three years, if so, what was it, and to whom? No

10. What is the applicant's occupation and physical condition? No occupation. Invalid. + Rheumatism

11. Is the applicant unable to support himself by labor of any sort, if so, why? No. On account of Invalidity + Rheumatism

12. How was he supported during the years 1896 and 1897? By his children

13. What portion of his support for those two years was derived from his own labor or income? None

14. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under the Act of December 16th, 1894? Invalid + Rheumatism

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

Sworn to and subscribed before me, this 27 day of June, 1898. J. H. Bullock Witness.

J. N. Boggio Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize
_____ of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1901.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize
_____ of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1905.

[L. S.]

Executed in the presence of _____

(For Those Already Enrolled.)

CODE SECTION 104

No. 470

INDIGENT

SOLDIER'S PENSION.
1901.

Name *A. A. Martin*
County *Fulton*

WARRANT ISSUED

Jan 19 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H. H.

JOHN W. LINDSEY, BRIDGE STREET, ALBANY.

no date

(FOR THOSE ALREADY ENROLLED.)

CODE SECTION 104

No. 104

INDIGENT

SOLDIER'S PENSION
1905.

Name *A. A. Martin*
County *Fulton*

Co. *B* Regiment *3rd*

WARRANT ISSUED

118 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. H. H.

THE PENSION OFFICE AND PENSION OFFICE, ALBANY, GA.

no date

Co A 16th Regt. Ga Trans

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Fulton County.

Personally appears W. A. Martin 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 22nd day of May 1899; that he is 64 years old and by occupation a Carpenter that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 4 yrs in Company C, of 34th Regiment of Vol. Inf.; that his physical condition is as follows:

General debility
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 1901. I have heretofore as a resident of Fulton county been allowed a pension for the year 1899.

Sworn to and subscribed before me, this 1st day of Jan 1901.
W. D. Martin
Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this 3rd

day of Jan 1901.

Ordinary

Fulton County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1901.

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears W. A. Martin 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 _____ 1832; that he is 68 years old and by occupation a Carpenter that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 4 yrs in Company C, of 34th Regiment of Vol. Inf.; that his physical condition is as follows:

Age and poverty

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this 1st day of JAN 2 1905.

Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this JAN 2 1905

day of JAN 2 1905.

Ordinary

Fulton County.

Note.—The blank spaces must be filled.

Note.—Affidavit should not be attested before January 1st, 1906.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

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

Witness my hand and seal, this _____ day of _____ 1902.

[L. S.]

. Executed in presence of

Martin, W.A.
Fulton Co

(FOR THOSE ALREADY ENROLLED.)

CONFIDENTIAL

No. *242*

INDIGENT

**SOLDIER'S PENSION
1902.**

Name *W. A. Martin*

County *Fulton.*

Co. *A* Regiment *6 Ga*
transferred to 3d Regt

WARRANT ISSUED

4/4 1902

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. A. Martin
Gen. W. Martin, State Prison, Atlanta.

No date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Tulton. County,

Personally appears W. A. Martin of Tulton.

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 15 day of Dec 1894; that he is 64 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States and served for the term of 1 1/2 years in Company 126, 8th Cal Regiment of Ga; that his physical condition is as follows: Rheumatism

that his property consists of the following items _____

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

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

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

STATE OF GEORGIA,

County.

I, John R. Wilkinson

Ordinary of said County,

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

Given under my official signature and seal, this _____

day of _____ 1902.

Ordinary

County.

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

STATE OF GEORGIA,

_____ County.

I, _____ hereby authorize _____

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

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

Executed in presence of _____ [L. S.]

CODE SECTION 1254.
(FOR THOSE ALREADY ENROLLED.)

No. 306

INDIGENT

SOLDIER'S PENSION 1903.

Name W A Martin

County

உ

Co. U Re

Regiment 162

WARRANT ISSUED

1/20 1903.

JOHN W. LINDSEY

JOHN W. LINDSEY

Commissioner of Pensions.

WARRANT HANDED TO

Geo. Harrison, State Printer, Atlanta.

no data

STATE OF GEORGIA,

— COUNTY

I, _____ hereby authorize

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

WITNESS my hand and seal, this _____ day of _____, 1904

Executed in the presence of

(FOR THOSE ALREADY ENROLLED.)

No. 214

INDIGENT

SOLDIER'S PENSION 1904.

Name JK

County

W

Deciment 16th

WARRANT ISSUED

11/3-1961

JOHN W. LINDSEY.

Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta

no data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears W. A. Martin 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 15 day of Dec 1894; that he is 65 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 2 yrs in Company 16th of 16th Regiment of 16th; that his physical condition is as follows: I & P

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1904, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of _____ county been allowed a pension for the year 1 _____

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

Ordinary.

STATE OF GEORGIA,

County.

I, John A. Wilkinson,

Ordinary of said County,

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

Given under my official signature and seal, this _____ day of _____ 1903.

Ordinary

County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton. County.

Personally appears W. A. Martin 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 15 day of Dec 1894; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 2 yrs in Company 16th of 16th Regiment of 16th; that his physical condition is as follows: I & P

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1904, 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 _____ day of JAN 20 1904.

Ordinary.

STATE OF GEORGIA,

County.

I, John A. Wilkinson,

Ordinary of said County,

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

Given under my official signature and seal, this _____ day of _____ 1904.

Ordinary

County.

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

OFFICE OF
J. J. BURCH
ORDINARY ELBERT COUNTY.

Elberton, Ga. 1899
Georgia
Elbert County } I hereby certify that B. M.
Bishop and F. F. Smith are
} reputable Physicians in good
practice and standing and residents Citizens
of said County & State given under my hand
and seal of office this December 25-1899
J. J. Burch Ordinary
Elbert County
Ga.

Mr. Martin

Your application was returned marked
in complete. I can't see where in it is Bishop & Smith
made affidavit before me, and it was marked
with my seal. and it also had Boggs seal
the very fact of their making affidavit before
me. and using my seal should be sufficient
evidence of their standing &c I hope you may
succeed. but it will in all probability require
a new application. I am very respectfully
J. J. Burch

W A Martin - Indigent Soldier
appears on the roll for pay in 1901
W A Brown

Georgia - Fulton County
Personally came before me J. T.
Golden, known to me as a reputable
Physician of said County, who being
sworn says, on oath that he has ex-
amined carefully Mr A. Martin,
applicant for Pension under the Act
of 1894, and after such personal ex-
amination says that his present phy-
sical condition is as follows:
He is afflicted with Rheumatism
and a Valvular lesion of the heart
and Angina Pectoris. He further says
on oath that the physical condition
of said applicant renders him
unable to labor at any work or
calling sufficient to earn a support
for himself & that he has no interest
in said Pension being allowed
Sworn to and subscribed
before me this 8th
1st, 1900.

W. H. Lewis, J. T. Golden M.D.
Grainey
Fulton County

Georgia - Fulton County
Personally appeared before the undersigned
Samuel B. Dixon, of Atlanta, in said
County, who having been duly sworn says
he at one time was a member of Com-
pany "C" 3rd Geo. Batt. Sharpshooters, 6th Id.
and that he is well acquainted with
William A. Martin, who at one time
was a member of Co. A. 16th Regt. Ga. Vol.
and afterwards of said Co. "C" and
knows that he was captured at Fort
Royal in 1864 and prisoner never
saw him any more until after the sur-
render of the Confederate Army - that
Martin was the orderly Sergeant of
said Co. C & was familiar with all
the members of the Company and
that said Martin was captured
by the Yankees in the battle of
said Fort Royal.

Sworn to and subscribed before me
and I certify that the witness is,
as such, entitled to full pay and
credit Sept 1st 1900.
W. H. Lewis, S. B. Dixon
Grainey
Fulton County

Before me this 1st
1st, 1900.

Mr & Mrs J. T. Golden and
Orang

Fullan Boggs

Sworn to and Subscribed before me
and I certify that the within is,
as such, entitled to full faith and
credit. Sept 1st 1900.

Mr & Mrs J. T. Golden

Orang

Fullan Boggs

RECORD & F. *Miss*
Martyn Alice R. E. for
Fulton County 1938

Widow's Application

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

County Fulton
 Name Mrs. Alice R. Martyn
 Widow of Hobart Perry Martyn
 Date of Marriage Feb. 14, 1911
 Date of Husband's Death Sept. 12, 1921
 Company 1st Light Artillery
 Regiment Conf. Light Artillery
 Approved DEC 27 1937 193
[Signature]
 Director.

State Dept. Public Welfare,
 Atlanta, Nov. 12, 1937.

Robt. P. Martyn enlisted as
 a private in Croft's Battery
 Co. Light Artillery Dec. 20,
 1861. Paroled, Meridian, Miss.
 May 11, 1865.

Lillian Henderson
 Director Confederate Records
 Div.

1915

AUG 19 1937

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, THOMAS H. JEFFRIES

do hereby certify that Mrs. Alice R. Martyn

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 J. D. McZemore

the witness who swears to the validity of said marriage; that both of them are now residents

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

trustful and trustworthy and their statements are entitled to full faith and credit.

Given under my hand and seal of office this 25th day of August, 1937.

(SEAL OF ORDINARY) *[Signature]* Ordinary.

of Fulton County.

INSTRUCTIONS:

1. Before any questions are answered the Ordinary shall serve applicant and the witness in the following manner: "You are hereby sworn to answer the questions asked you and the evidence you shall give will be taken as true unless you can prove to the contrary."
2. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be made in the presence of the Ordinary.
3. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be made in the presence of the Ordinary.
4. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be made in the presence of the Ordinary.
5. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be made in the presence of the Ordinary.
6. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be made in the presence of the Ordinary.
7. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be made in the presence of the Ordinary.
8. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be made in the presence of the Ordinary.
9. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be made in the presence of the Ordinary.
10. All affidavits must be made before the Ordinary of the County in which the applicant or witness resides and must be made in the presence of the Ordinary.

State Dept. Public Welfare,
Atlanta, Nov. 18, 1937.

Robt. P. Martyn enlisted as
Private in Croft's Battery
2d Light Artillery Dec. 20,
1861. He died, Meridian, Miss.
May 11, 1865.

Lincoln
Director Confederate Records
Div.

1915

RECORDED
MARTYN, Alice R.
Fulton County 488

Widow's Application

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

County.....Fulton
Name.....Mrs. Alice R. Martyn
Widow of.....Robert Perry Martyn
Date of Marriage.....Feb. 14, 1911
Date of Husband's Death.....Sept. 12, 1931
Company.....George Patton
Regiment.....1st Cavalry
Approved.....*J. D. Bassmore* 1937
Director

AUG 19 1937

Ordinary's Certificate

STATE OF GEORGIA,
Fulton COUNTY.

I, **THOMAS H. JEFFRIES**, Ordinary of said County, do certify
that I know **Mrs. Alice R. Martyn**, 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 **J. D. Bassmore**,
the witness who swears to the ~~several~~ 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 **24th** day of **August**, 1937.
(SEAL OF ORDINARY) *J. D. Bassmore*, Ordinary,
Fulton County.

INSTRUCTIONS:

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

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. Alice R. Martyn**, 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. Alice R. Martyn, 885 Linwood Ave., N.E., Fulton Co., Ga.
2. How long and since when have you been, continuously, a bona fide resident citizen of the State
of Georgia?.....**69 Yrs.**
- Give date, or year, of your birth.....**March 22, 1868** Age?.....**69**
3. (1) When, (2) where and (3) to whom were you married?
(1) Feb. 14, 1911 (2) Atlanta, Ga. (3) Robert Perry Martyn
- a. Have you married since the death of first and soldier husband?.....**No**
- b. When and where did your first husband die?.....**Sept. 12, 1931**
- c. Were you residing together when he died?.....**Yes**
- d. If not, how long had you resided apart?.....
- e. Are you now a widow?.....**Yes**
- f. Have you or your husband heretofore been paid a pension by the State?.....**Yes**
- g. If so, when and for what cause were you or your husband placed on the roll?.....**As a Confederate
Veteran.... Pension paid in Fulton Co.**

SECTION II.

- Answer the following questions if your husband was not a pensioner:
1. When, where and in what Company and Regiment did your husband enlist as a soldier in
Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infan-
try, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
 2. When and where did the Commands of your husband surrender or discharge from the Service?
 3. Was your husband personally present with his Command when it was surrendered or discharged?
 4. If he was not present, state specifically and clearly where he was?
 5. When did he leave the Command?
 - a. For what cause did he leave?
 - b. By whose authority did he leave?
 - c. For how long was his leave of absence granted?..... d. In what way?
 6. What was his physical condition when he left his Command?
 7. What effort did he make to return to his Command?
 8. In what way was he prevented from going back to his Command?
 9. Was he captured by the enemy at any time?
 10. If so, when and where? In what prison? he held and when was he released?

Sworn to and subscribed before me, this the
23 day of **July**, 1937
J. D. Bassmore, Ordinary
of **Fulton** County.
(SEAL OF ORDINARY)

Mrs. Alice R. Martyn
Applicant.

INSTRUCTIONS:

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

- 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 he held and when was he released?

Sworn to and subscribed before me, this the

23 day of July 1937
O. S. Baulch Ordinary
of Fulton County.
(SEAL OF ORDINARY)

Mrs. Alice R. Martyn
Applicant.

State of Georgia.
County of Fulton.

Personally before the undersigned authority now
comes J. D. BAZEMORE who upon oath
says that he knows Mrs. Alice R. Martyn and
knows that she was living with her husband Robert Perry Martyn
at the time of his death, that she has not remarried since his
death and is now his dependent widow.

Sworn to and subscribed before me
this 23 day of July 1937

R. H. Jeffries
O. O. Ordinary, Fulton Co. Ga.

Court of Ordinary
FULTON COUNTY
STATE OF GEORGIA

CERTIFIED COPY OF
MARRIAGE LICENSE
AND
CERTIFICATE OF MARRIAGE
OF

REV. ROBERT PERRY MARTYN

AND

MISS ALICE HOLLINGSWORTH

Recorded in Book R Page 95

THOS H. JEFFRIES

Ordinary.

MARRIAGE LICENSE

State of Georgia--Fulton County

To any Minister of the Gospel, Judge of Superior Court, Justice of the Peace, or other Person authorized to Solemnize,

You are hereby authorized and permitted to join in the honorable state of Matrimony REV. ROBERT PERRY MARTYN and MISS ALICE HOLLINGSWORTH

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 14 day of Feb. 1911

JOHN R. WILKINSON L. S.
Ordinary

I hereby certify that REV. ROBERT PERRY MARTYN

and MISS ALICE HOLLINGSWORTH

were joined together in the HOLY BANS OF MATRIMONY

on the 14 day of FEB 1911, by me.

H.C. HAMMOND, M.G.

State of Georgia,
Fulton County.

S. B.

ORDINARY'S OFFICE

ATLANTA, GA., JULY 23 1937

I, A.S. BATTERTON 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

REV. ROBERT PERRY MARTYN

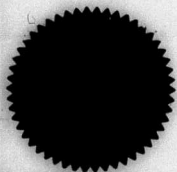
and MISS ALICE HOLLINGSWORTH

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

A. S. BATTERTON
Clerk, Court of Ordinary.



STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. ALICE R. MARTYN, WIDOW OF ROBERT PERRY MARTYN,

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

ORDERED:

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

This, the 27th day of December 1937.

John Green
Director, Confederate Division
State Department of Public
Welfare

State of Georgia
County of Fulton.

Personally before the undersigned authority now comes J.D. BAZEMORE who upon oath says that he knows Mrs. Alice R. Martyn and knows that she was living with her husband Robert Perry Martyn at the time of his death, that she has not remarried since his death and is now his dependent widow. Sworn to and subscribed before me this 25 day of July 1937

R.H. Marshall
C.O. Ordinary, Fulton Co. Ga.

John Green
Director, Confederate Division
State Department of Public
Welfare

Martyn, Robert Henry
Exulton Co
16th Jan 1911

No.

**Confederate
Soldier's Application.**

✓ UNDER ACT 1910.

County

Exulton

Name

Robert P. Martyn

Company

Croft's Battery

Regiment

Approved

6 RO 14 37

J. W. HENNEY,
Commissioner of Records

CHAS. W. BYRD, State Printer, ALBANY

7/2/11

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

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

1. What is your name and where do you reside? (Give County and Post-office).
Robert Perry Martyn, College Park, Fulton County, Ga.
2. How long and since when have you been a continuous resident citizen of this State?
Nearly 40 years - that is since Nov. 18-1865
3. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
In the Army of the Confederate States
4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service).
Dec. 28-1861 in Columbus Ga. Columbus Artillery Later Infantry
5. How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge).
30 days. 4 months & 18 days - discharged by General Order No. 12-1865
6. When and where was your Company and Regiment surrendered or discharged from the Service?
May 10-1865 at Meridian, Miss.
7. Were you actually present with your Command when it was surrendered or discharged?
I was.
8. If you were not actually present, state specifically and clearly where you were.

- a. Where was your Command when you left it?
- 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? Only at Meridian as above stated.
- 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).
Small house and lot in Rome Ga. valued at \$1250.00

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov. 1908. To whom and for what price? Sold above named property to be in - a lot in Atlanta Ga. Price \$1250.00 to Mrs. Will Johnson

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).
Small house and lot in Atlanta for which I paid \$1250.00

12. What annual or monthly income or earnings of yourself and wife and the source derived have you? I am earning about \$25 per mo. by office work - Wife dead.

13. Are you drawing a pension of any amount from this State or the United States? I am not.

14. Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed? I have never applied for Georgia Pension

Sworn to and subscribed before me, this the
30th day of Sept 1910
Marshall McPherson
Ordinary,
of Fulton County.

Robert P. Martyn

Confederate Soldier's Application.

UNDER ACT 1910.

County Fulton
Name Robert P. Martyn
Company 6 regt Artillery
Regiment
Approved
6 Oct 1910
J. W. JENNIST,
Commissioner of Pensions.

CHAS. F. HYATT, STATE PRINTER, ATLANTA.

Handwritten note: To the Editor - I have just received your letter.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Fulton County.

W. A. Callaway of said State and County is hereby presented as a witness in support of the application of Robert Perry Heston for the pension, provided by the Act of 1910, in said State, and after being sworn true answers to make to the questions propounded, answers as follows:

1. What is your name and where do you reside? W. A. Callaway
171 Myrtle St. Atlanta Ga.
2. How long and since when have you known Robert Perry Heston the applicant?
47 years - since May 1863
3. Where does he now reside, and since when has he been a bonafide, continuing resident in this State and how do you know? Within my knowledge about twenty years
in Georgia - now resides in Valley Park Ga.
4. When, where and in what Company and Regiment did Robert Perry Heston enlist during war from 1861 to 1865? (Give date and place). 1861 - Columbus Ga - Columbus Artillery
5. How did you obtain your information of this Service? By being a member of said Company from May 1863 to the surrender May 10 - 1865
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (Give date) May 1863 to May 1865
7. When and where was his Command surrendered or discharged (give date and place) Meridian, Miss. May 10 - 1865
8. Were you personally present at the Surrender? Yes
9. If not, where were you and how came you there? -
10. Was the applicant personally present with his Command at surrender? Yes
11. If not where was he and how came him there? -
12. When did he leave his Command? - Where was his Command when he left it? - for what cause did he leave? - and how long was he granted leave? - How do you know all that you have stated to be true? - If of your own knowledge (Tell clearly and specifically). I was with him with the Command at the surrender
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? Yes If so, when and where? Meridian Miss 1865
In what prison was he held? Prisoned some date and when released? -

Sworn to and subscribed before me, this the 3rd day of Sept 1910 W. A. Callaway
James M. Heston Ordinary.
of Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Fulton County.

Personally before me comes R. J. Heston and R. P. Heston who on oath says that they are free holders residing in said County and we know Robert Perry Heston 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).
Two small houses and lot on McDonough Road in Atlanta Ga. valued at \$1250.00

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov

1908? (State fully by name). We do not know (see Affidavit elaborated)

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 value? -
7. or was it made to obtain a pension? -

Sworn to and subscribed before me, this the 3rd day of Sept 1910 W. A. Callaway
James M. Heston Ordinary.
of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

James M. Heston Ordinary of said County, certify that I know the applicant Robert Perry Heston for Pension is the person he represents himself to be and resides in said County. That I also know W. A. Callaway the witness swearing to the service and James M. Heston who are free holders, that they are all residents of said County and were duly sworn by me before signing the foregoing affidavits and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Fulton shows that - and wife value for tax is in 1908 3 for 1909 3 for 1910 3
Sworn under my hand and official seal, this 3rd day of Sept 1910
James M. Heston Ordinary.
of Fulton County.

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

STATE OF GEORGIA, Fulton County

I, Thos H Jeffre Ordinary of said County, do certify that I personally know Mrs Alice Martin, the applicant, and that she is the lawful widow of Robt Q Martin, and was on the Fulton Pension Roll of said Fulton County, and was paid a Pension from Fulton County for 1920, and at the time of his death on the 17 day of Sept 1921, there was due to him and unpaid his Pension of \$125.00 Dollars from the State of Georgia, and I know A J Mayfield the within witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 27 of Sept, 1921.
(SEAL.) Thos H Jeffre Ordinary,
Fulton County.

Martin, R. P. / E
Fulton Co.

1921

Application for Pension Due Deceased Soldier

UNDER ACT 1891

To be paid his Widow or Dependent Children

BY

Mrs. Alice A Martin
Widow of Robt Q Martin
of Fulton County

Regt. 12

Date of Death Sept 17 1921

Approved and ordered paid.
Nov. 12 1921.

J. W. LINDSEY,
Commissioner of Pensions.

Ordinary: Fill out above in full and send this to Pension Office for approval before you pay out the money.

Alabama Printing Co., Atlanta, Ga.

GEORGIA, _____ County.

I hereby authorize and constitute _____, of said County, my lawful attorney to collect, and receipt for me in my name, for the Pension due me for 192 _____ through my deceased husband, _____, who was on _____ Pension Roll and paid from _____ County for 19 _____

Witness my hand this _____ day of _____, 192 _____

Attested before me: _____

Cwfts Bat

Application for Pension Due Deceased Soldier

(To Be Paid to His Widow or Dependent Children)

UNDER ACT APPROVED OCTOBER 9, 1891

STATE OF GEORGIA, Fulton County

Personally before me comes Mrs. Alice R. Martyn, of said County, who after being duly sworn, on oath says that she is the widow of Robert P. Martyn who was duly enrolled as a RETY. 1898 Pensioner from the County of Fulton and was paid a Pension of \$100.00 Dollars from Fulton County for 1920, and that the said Robt. P. Martyn died in Fulton County on the 12 day of Sept., 1921, and at the time of his death a Pension of \$125.00 was due him from Fulton County and unpaid for 1921. Applicant further swears that she married the said Robert P. Martyn on the 14 day of Feb., 1911, in Fulton County and State of Georgia, and resided with him from the date of marriage to his death as his lawful wife, and is now his dependent widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 17 day of Sept., 1921.

David Marshall Ordinary. Mrs Alice R Martyn (L.S.)
Fulton County. 213 W. Princeton Ave.,
 (SEAL.) College Park, Ga.

AFFIDAVIT OF WITNESS

STATE OF GEORGIA, Fulton County

Personally before me comes A. J. Mayfield, who on oath says that he knew Robt P Martyn while in life and that he knows Mrs. Alice R. Martyn, the above applicant; that he knows that the said Robt P Martyn and Alice R Martyn were in due form of law married in the County of Fulton in the State of Georgia, and that they resided together as husband and wife from date of marriage to the day of his death on the 12 day of Sept, 1921 and I now know that she is his dependent widow.

Sworn to and subscribed before me this 17 day of Sept, 1921.

David Marshall Ordinary. A. J. Mayfield
Fulton County.

Note 1st—This form can be used by guardian or minor children where there is no widow.

2d—Ordinary must send to all cases certificate of marriage attached hereto, if marriage is not proven by witness.

3d—This form is for widows of Disabled soldiers who died after October 18th and for widows and dependent children of Service soldiers who died after January 1st.

4th—Ordinary should examine the claim carefully and see that it is fully and correctly completed, and the same attested, and then the claim, when filled, is filed out.

5th—Fee not to be returned on this application until it is approved in the Pension Office, and returned to you as your authority to pay.

6th—Return this application with your final settlement to the Pension Office.

Affidavit of Two Freeholders.

State of Georgia,
 Floyd County.

Personally before me comes J. L. Lankham, and
 G. P. Redden, who say that they are freeholders residing in
 said County, and we know Robt. P. Martyn the applicant for pension,
 and we know about his sale of property as set forth in following
 answers:

1. What property, if any, has been sold or given away by the applicant
 or his wife since Nov. 4-1905? Ans. A small house and lot in Rome, Ga.
2. When and to whom was it sold or given? Ans. In Oct. 1909, to
 Mrs. Will Lankham
3. What was the price paid or stated to be paid? Ans. \$1250.
4. What relation is the party to the applicant? Ans. None whatever.
5. What disposition was made of proceeds of sale? Ans. Do not know.
6. Was the disposition of the property made in good faith and
 full value? It was.

Sworn to and subscribed before me,
 this 30th day of Aug 1911,
 John A. Davis, Ordinary

And I certify that the same
 are of true and lawful character and entitled
 to credit. John A. Davis, Ordinary

MARRIAGE LICENSE

State of Georgia--Fulton County

To any Minister of the Gospel, Judge of the Superior Court, Justice of the Peace, or other Person
 authorized to solemnize.

You are hereby authorized and permitted to join in the hon-
 orable state of Matrimony *Rev Robert Perry Martyn*
 and *Miss Alice Hollingsworth*

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 *14th* day of *Feb*, 19*11*

John R. Dickinson L.S.
 Ordinary

I hereby certify that *Rev Robert Perry Martyn*
 and *Miss Alice Hollingsworth*

were joined together in the HOLY BANS OF MATRIMONY

on the *14th* day of *Feb*, 19*11*, by me, *H. C. Cummings*

State of Georgia,
 Fulton County.

S. S.

ORDINARY'S OFFICE

ATLANTA, GA. *Sept 17*, 19*11*

Chas. 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

Rev Robert Perry Martyn
 and *Miss Alice Hollingsworth*

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.

Chas. C. Mason
 Clerk Court of Ordinary.

One of husband's papers and entitled
to Credit. John P. Davis, Ordinary

that the following is a true copy of the Marriage License and Certificate of Marriage of

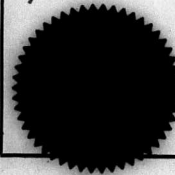
For Robert Perry Martyn
and Miss Alice H. Langforth

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.

Charles D. Mason
Clerk Court of Ordinary.



POWER OF ATTORNEY. STATE OF GEORGIA.

County, *Chatham*

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

County, in said State, do hereby appoint _____

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

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

Executed in the presence of us: _____

[L. s.]

DIT NOTORIS.

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

Ex Dept Atlanta June 15 1891

The within proofs are not as full as required. Each of the witnesses is required to go into full particulars and show how & when & where the same came to the deceased. How they each personally know that the said particular disease contracted at the Army in 1862 was the immediate direct cause of his death in June 1866. Do you *Dr* and say under oath that he had no such disease before the Army and that he contracted no other disease after the war which in any way contributed to his death in 1866. Were you ever present when he died? What physician attended him? The physician's testimony must be produced. This is a very doubtful case and the witnesses must show a full & explicit knowledge of the case & have his death positively & definitely shown to be due to the disease contracted at the Army in 1862. *Dr* is not sufficient.

*Mashburn, Mary A.
Hilton Co (Mo)*
1891.

No. *39811*

Widows' Pension

PAID TO

Mrs Mary A Mashburn
OF
Sutton COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO

Geo. W. Harrison, State Printer Atlanta.

*Witness must answer fully & minutely this question
Amphimed June 15 1891
L. H. Williams*

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA.

County.

Know all Men by these Presents, That I,

of

County, in said State, do hereby appoint

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

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

Executed in the presence of us:

[L. S.]

DIRECTIONS.

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

me at

Mr. J. B. McLean
June 10, 1891
to the military people and not as civil as required.
Each of the divisions is required to go out and put together the soldiers who have been discharged from the service and to take care of them. Some of them are sick and some are blind. They are all in need of help and the military people should take care of them. The military people should take care of them and not the civil people. The military people should take care of them and not the civil people. The military people should take care of them and not the civil people.

Widows' Pension

PAID TO

Quincy A. Mathews
of
Clifton
COUNTY.

\$100.00.

Warrant Issued

AND HANDED TO

1891

Notice must accompany this warrant and be filed in the office of the Auditor General.

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA.

County of *Fulton*

In person came before me, the undersigned Ordinary

in and for the County of *Fulton*

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

40th Regiment of *Gen. Lee's* Volunteers; that he enlisted in said service on or about the *10th* day of *March* 186 *2*, and was in the *Confederate* Army up to *Aug.* 186 *4*. That while in the Army, he was on the _____ day of *Aug.* 186 *4*. (See Note No. 1)

He contracted a severe disease as a result of which he became a disabled soldier. He was discharged from the service on or about the 10th day of March 1862, and was in the Confederate Army up to Aug. 1864. That while in the Army, he was on the _____ day of Aug. 1864. (See Note No. 1)
He contracted a severe disease as a result of which he became a disabled soldier. He was discharged from the service on or about the 10th day of March 1862, and was in the Confederate Army up to Aug. 1864. That while in the Army, he was on the _____ day of Aug. 1864. (See Note No. 1)

Dependent 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 *14th* day of *Aug.* 186 *4*, and that she has resided in Georgia continuously since the *14th* day of 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. Dependent, as the widow of said deceased soldier, 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 _____ day of _____ 1891.

Mary A. Mathews
W. A. Mathews
Ordinary.

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

1891.

No. 3984

Mary A. Mathews
Widow of Elisha Mathews

Affidavit for Three Witnesses.

Form No. 3.

STATE OF GEORGIA,

County of Fulton
St. Light and W. H. Lamb

In person came before me, the undersigned Ordinary
 in and for said County, witnesses G. F. Woodliff
St. Light and W. H. Lamb

(each known to said Attesting Officer as truthful,
 reliable and reputable citizens), who jointly say under oath, that, from their own personal knowledge,
 Mrs. Mary A. Mathburn of the County of Fulton
 State of Georgia, is the widow of Elisha Mathburn, who was a soldier in
 Company E of the 43 Regiment of Volunteers.
 That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or
 about the 10 day of March 1862. That while in said service, or by
 reason of said service in the Army, he lost his life as follows:

*He contracted a
 disease, perhaps at his military camp, which
 was a severe one, and he died on April 26th 1862. That he
 contracted said disease while in said
 Army, & on account of the hardships
 to which he was necessarily exposed as a
 soldier. That said disease remained
 with him until it caused his
 death at the time above stated.*

He the three witnesses whose signatures are here
 below attached testify on oath that from his knowledge
 and belief Elisha Mathburn was a hale healthy man
 free from every disease of any character at the time he enlisted
 in Company E of the 43rd Regiment of Ga. Volunteers, of which
 Company & regiment all three of us were members during the
 whole time which Elisha Mathburn was a member
 of said company and regiment. We know he was sound and
 good & healthy at the time of his enlistment and we know
 he was promptly exposed to cold and dampness and suffering
 and many hardships incident to members of our Confederate
 Army. We do know that said Mathburn, some time after the
 said army broken in health and suffering from what was
 called, bronchitis, which we do know as well as one man can know
 of another with whom there is intimate association as the relation
 of friend and neighbor. That said Mathburn did not contract any
 other disease during the war and that he suffered much and in
 the end died from the effects of said disease contracted while in the service.

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

Sworn to and subscribed before me, this, the

9 day of May 1891.
W. H. Lamb
 Ordinary.

G. F. Woodliff
St. Light
W. H. Lamb

The foregoing amended statement subscribed before me this 30 day of June 1891. W. H. Lamb
 Ordinary.

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

Form No. 4.

STATE OF GEORGIA,

County of Fulton

I, W. H. Lamb Ordinary
 in and for said County of Fulton

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

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

9 day of June 1891.

{ SEAL }

W. H. Lamb
 Ordinary.

Form No. 4.

NOTES.

- The pension is only payable to certain classes of widows.
- Those whose husbands were killed in service.
- Those whose husbands died in the army of wounds or disease contracted in the service.
- Those whose husbands went to the army and have never been heard from since the war.
- Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.
- Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.
- No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.
- The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.

- The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.
- Widows who have married since the service of their husbands in the army are not entitled.
- There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.
- If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary and testify. The attestation of a Justice of the Peace or Notary will not answer.
- Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and receive the money, to receipt for same.

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

By order of the Governor,

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

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

Form No. 2.

STATE OF GEORGIA, County of FULTON
I, W. L. CALHOUN Ordinary in and for said County of FULTON State of Georgia, hereby certify that I am acquainted with Mrs. May A. Mashburn 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 Elisha Mashburn 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 30 day of January, 1892.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

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

In WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____, 189____.

[L. S.]

Executed in the presence of:

DIRECTIONS.

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

Warrant Issued
AND HANGS TO
1893

Widow's Pension,

FOR THE YEAR ENDING FEBRUARY 15th, 1893.

PAID TO
—OF—
FULTON COUNTY.

for year ending February 15th, 1893.

Widow's Pension,

No. 1468

1893.

FOR THOSE HERETOFORE PAID.

Mashburn, May A.
Fulton Co.

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

Form No. 2.

STATE OF GEORGIA, County of Fulton
I, W. L. Calhoun Ordinary in and for said County of Fulton State of Georgia, hereby certify that I am acquainted with Mrs. May A. Mashburn 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 Elisha Mashburn deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1890.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 30 day of January, 1892.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County.

I, _____ hereby authorize

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

In WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____, 1897.

[L. S.]

Executed in the presence of

Warrant Issued
AND HANGS TO
1897.

Widow's Pension,

FOR THE YEAR ENDING FEBRUARY 15th, 1897.

PAID TO
—OF—
FULTON COUNTY.

for year ending February 15th, 1897.

Widow's Pension,

No. 1093

1897.

FOR THOSE HERETOFORE PAID.

Mashburn, May A.
Fulton County

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally comes Mrs.

Mary A. Mashburn

who being sworn, says on oath, that she is a bona fide resident of said County of
FULTON State of Georgia, and that she has resided in said State

continuously ever since Birth 18... That she is the Widow of
Eliza Mashburn who was a Soldier in Company
E of the 43rd Regiment of Georgia

Volunteers, that he enlisted in said Regiment on or about the month of 10th March
1862 and served in the Army up to August 1864 That he lost his
life on the 26th day of April 1864 (State here

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

While in the service contracted a dis-
ease known as Bronchial Catarrh
from which he died on the above
stated day.

Deponent swears that she was the wife of said deceased soldier during his service in the army
as a soldier, and that she has never married since his death aforesaid, that she became his wife
in the year 1844, that Georgia is her home and she resided in this State 23d day of December,
1890, and has not lived in any other State or locality since that date. I have been allowed a
pension for the year ending February 15th, 1892, and now apply for the allowance provided by
law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

30th day of January, 1893.

M. L. Mashburn Ordinary.

Post-office

Atlanta Ga

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally Comes Mrs.

Mary A. Mashburn

who being sworn, says on oath, that she is a bona fide resident of said county of
FULTON State of Georgia, and that she has resided in said State

continuously ever since Birth 18... That she is the Widow of
Eliza Mashburn who was a Soldier in Company
E of the 43rd Regiment of Georgia

Volunteers, that enlisted in said regiment on or about the month of 10th March
1862 and served in the Army up to August 1864 That he lost his
life on the 26th day of April 1864 (State here

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

While in service contracted a dis-
ease known as Bronchial Catarrh
from which he died on the above
stated day.

7

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier,
and that she has never married since his death aforesaid, that she became his wife in the year 1844,
that Georgia is her home and she resided in this State 23d day of December, 1890, and has not
lived in any other State or locality since that date. I have been allowed a pension as a resident of
Fulton County for the year ending February 15th, 1896, and now apply for
the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this

1st day of Feb. 1897.

M. L. Mashburn Ordinary.

Post-office

Mary A. Mashburn

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

Form No. 1.

STATE OF GEORGIA, County of Fulton
I, W. L. Calhoun Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Mary A. Mashburn the applicant for a pension in this case, and
know, from my own knowledge (or from positive proof presented to me by reputable wit-
nesses), that she resides in this County, and that she resided in the State of Georgia on
December 23, 1850, and has not lived out of the State since that date. That she is the
widow of Elisba Mashburn deceased, and as such has heretofore
been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the 15 day of February, 1894.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I,
of

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

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

Executed in the presence of us:

[L. S.]

DIRECTIONS.

Send amount by _____ to
me at _____, and oblige

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

Form No. 1.

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office,
this, the 15 day of Feb, 1895.

W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I,
County in said State, do hereby appoint
of my true and lawful attorney in fact, for

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

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

Executed in the presence of us:

[L. S.]

DIRECTIONS.

Send amount by _____ to
me at _____, and oblige

WIDOW'S PENSION,
for year ending February 15th, 1894.
—PAID TO—
M. Mary A. Mashburn
—OF—
Fulton County.
No. 1569
1894.
WARRANT ISSUED
7/3 1894.
AND NAMED TO
Applicant
FOR THESE HERETOFORE PAID.
Mashburn, Mary A.
Fulton County
1894.

WIDOW'S PENSION,
for year ending February 15th, 1895.
—PAID TO—
M. Mary A. Mashburn
—OF—
Fulton County.
No. 592
1895.
WARRANT ISSUED
7/3 1895.
AND NAMED TO
Applicant
FOR THESE HERETOFORE PAID.
Mashburn, Mary A.
Fulton County
1895.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally comes Mrs.

County of

Fulton

Mary A. Mashburn

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

Fulton

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

continuously ever since Birth 18. That she is the Widow of

Elisha Mashburn

who was a Soldier in Company

E

of the

43rd

Regiment of

Georgia

Volunteers, that he enlisted in said Regiment on or about the month of 10th March

1862 and served in the Army up to August 1864 That he lost his

life on the 29th day of April 1865 (State here

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

While in the service contracted a disease known as Bronchial

Catarrh from which he died on the above stated day

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1893, and now apply for the allowance provided by law for the year ending February 15th, 1894.

Sworn to and subscribed before me, this

1st day of February 1894.

W. L. Schalm Ordinary.

Post-office

Mary A. Mashburn

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally Comes Mrs.

County of

Fulton

Mary A. Mashburn

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

Fulton

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

continuously ever since

Birth

18

That she is the Widow of

Elisha Mashburn

who was a Soldier in Company

E

of the

43rd

Regiment of

Georgia

Volunteers, that he enlisted in said Regiment on or about the month of 10th March

1862 and served in the Army up to August 1864 That he lost his

life on the 29th day of April 1865 (State here

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

While in Service contracted a disease known as Bronchial Catarrh from which he died on the above stated day

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, that she became his wife in the year 1844, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension for the year ending February 15th, 1894, and now apply for the allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

1st day of Feb 1895.

W. L. Schalm Ordinary.

Post-office

Mary A. Mashburn

Atlanta, Ga. June 23 1891
 This certifies that I attended
 Mrs. Elisha Washburn
 during her sickness and that
 he had a disease known as
 Bronchial catarrh from the
 effects of which he died on
 April 24/1886.
 W. M. Powell, M.D.

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

Form No. 2.

STATE OF GEORGIA, County of Fulton

I, W. L. Calhoun Ordinary in and for said County of

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

Mary A. Washburn 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 Elisha Washburn deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1891.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 5th day of May 1891.

{W. L. Calhoun} Ordinary.

Form No. 2.

POWER OF ATTORNEY.

STATE OF GEORGIA, County of _____

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

In Witness Whereof, I have hereunto set my hand and seal, this _____ day of _____ 1891.

[L.S.]

Executed in the presence of _____

WIDOW'S PENSION,

for year ending February 15th, 1891.
PAID TO

Mrs. Mary A. Washburn

OF

Fulton

widow of Elisha Washburn

County.

WARRANT ISSUED

1891.

AND ORDERED TO

W. M. Powell, M.D.

Geo. W. Sullivan, State Printer.

Washburn Mary A.
 Fulton County
 FOR THESE HERETOFORE PAID.

1891.

No. 7327

Atlanta, Ga., June 23 1891
 This certifies that I attended
 Mr. Elisha Mashburn
 during his sickness and that
 he had a disease known as
 Bronchial catarrh from the
 effects of which he died on
 April 24/1889.
 W. M. Powell, M.D.

For Widows Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,
 County of Fulton

Personally Comes Mrs.

Mary A. Mashburn

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

Fulton

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

continuously ever since. Birth 18 That she is the Widow of

Elisha Mashburn

who was a Soldier in Company

E of the 45th Regiment of Georgia

Volunteers, that he enlisted in said regiment on or about the month of 10th March

1862 and served in the Army up to August 1864 That he lost his

life on the 23th day of April 1888 (State here

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

While in service contracted a disease known as Bronchial Catarrh from which he
 died on the above stated day.

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 43
 that Georgia is her home and she resided in this State 23d day of December, 1890, and has not
 lived in any other State or locality since that date. I have been allowed a pension as a resident of
Fulton County for the year ending February 15th, 1895, and now apply for
 the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this

5th day of Feb 1896.

W. L. Calhoun Ordinary.

Post-office

Mary A. Mashburn

Fulton

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

the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this

5th day of Feby 1896.

M. L. Calhoun Ordinary.

Post-office

Mary A. Marshburn

Mason, Amanda J.
No. 1742 (Amo)
No. Fulton County

Under Act 1910—as Amended by Act of 1919.

Name Christina I. Mason

Widow of Jas M Mason

Company V. E.

Regiment 27th Inf.

Approved _____

Byrd Printing Co., State Printers, Atlanta

NOTES: 1. Before you submit any are asserted the Ordinary shall serve applicant and the witness in the following manner: "You do solemnly swear that you will true answers make to each of the questions asked you and the witnesses and that you shall give will be the truth. So help you God." 2. Additional affidavits may be attested if that person are insufficient. 3. Affidavits may be sworn prior to January 1st, 1981, are certified. 4. All affidavits must be made before the Ordinary or the residence of the person to be sworn and certified by such Ordinary. 5. Attest certified copies of marriage license if obtainable. If not, sworn marriage, by some person, or by general reputation.

STATE OF GEORGIA
County of }
I, T. H. D. Jones, County Clerk,
do hereby certify that I know Mrs. Amanda Wilson the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1861; that said
the witness who signed the foregoing certificate; that said now residents of said County and were duly sworn by before signing the foregoing certificate and that they are truthful.
Witness my hand and seal at Washington, D.C., this 1st day of April, 1901.
T. H. D. Jones, County Clerk.

STATE OF GEORGIA,
Fulton COUNTY.

I, T. H. [Signature], Ordinary of said County, do certify that I know Mrs. Amanda J. Mason, the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was on the 4th November 1908; that I also know the witnesses who were the [Signature] of her husband; that [Signature] now residents of said County and were duly sworn before signing the foregoing affidavits and that they are truthful, trustworthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 30th day of Oct. 1919
(SEAL) [Signature] Ordinary,
Fulton County.

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

Widow's Pension

Under Act 1910 - as Amended by Act of 1918.
County: Fulton
Name: Amanda J. Mason
Widow of: Jas. M. Mason
Company: [Blank]
Regiment: 27th Ga. Inf.
Approved: [Blank]

J. W. LINDSEY,
Commissioner of Pensions,
New Printing Co. State Prison, Atlanta.

10-31-1919

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

Questions for Applicant

STATE OF GEORGIA,
Fulton COUNTY.

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

1. What is your name, and where do you reside? Mrs. Amanda J. Mason, College Park, Ga.
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? Nov. 3, 1872, Chappell Hill, DeKalb Co., Ga. to Jas. Miles Mason
- 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.) Jan. 1861, Fayette Co., Ga. in Co. "E", 27th Ga. Inf.
5. When and where did the commands of your husband surrender or discharge from the army? Don't know
6. Was your husband personally present at the time of the surrender or discharge of this command? No
7. If he was not present state clearly where he was? West Point, Ga.
8. Where was his command when he left? Richmond, Va. April 30, 1863
- a. For what cause did he leave his command? Detached service in hospital at Atlanta
- b. By whose authority did he leave his command? Commanding Officers
- c. For how long was he granted leave of absence? Was on detached service until physical fit for field service
- c. What was his physical condition when he left his command? Poor
- f. What effort did he make to return to his command? Never order back to company. After invasion of Ga. he and other members of the 27th Ga. Inf. were captured and taken to West Point, Ga. In what way was he prevented from going back to command? He was held as a prisoner of war and later released as a prisoner of war.
- h. Was he captured by the enemy at any time? No
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? Was carried as a prisoner of war after surrender at West Point, Ga. to "Horton, Ga." where he was "paroled"
- j. When and where did your first husband die? June 11, 1914, College Park, Ga.
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? Never resided apart
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No

Sworn to and subscribed before me this the

30th day of Oct. 1919
[Signature] Ordinary
Fulton County.
(SEAL)

Mrs. Amanda J. Mason
mark

Mason, Amanda J.
App. for Pension
No. Fulton County

Sept 9, 1861 -
Captured, Mat. St. Yr.
April 1865, transferred
to Capt. Hatterway,
Com. 24th Military Bn.,
mem. 5th, April 23, 1863.

Questions for Witnesses as to Service of Husband and Marriage

STATE OF GEORGIA,

Campbell COUNTY,

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

1. What is your name and where do you reside? J. Golightly, live at Fairburn, Campbell County, Georgia.
2. How long and since when have you known Mr. James Earl Mason applicant? about 50 years since about 1865.
3. How long and since when has she continuously resided in this State? (Give date.) I think all her life but I know sure 1865.
4. When and to whom was she married? Nov 3rd 1872, Miles Mason How do you know? I was present
5. How long and since when did you know J. Miles Mason her husband? since about 1865
6. When and where did J. Miles Mason the husband of applicant, die? Nov 11th 1904 at College Park Ga
7. Were the applicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death? never apart after their marriage
9. Were they divorced? no
10. When, where and in what Company and Regiment did J. Miles Mason enlist? I can't answer this question I do know he enlisted in the 1st and some
11. Were you a member of the same Company? no
12. How long within your personal knowledge did he perform actual military service with his Company and Regiment? I was not with him but would say at least 3 years
13. When and where did his Command surrender, and was discharged? at Fort Sumter
14. Were you personally present when it was surrendered? no If not, where were you at home and how came you there? I was at home
15. Was the husband of applicant personally present at surrender? no If not where was he? When, where and for what cause did he leave Command? (Give date.) no By whose authority did he leave his Command? no And how long was he granted leave? no How do you know all this?
16. For what cause, if you know of your own knowledge, was he prevented from returning to his Command? he did return after being pardoned
17. 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

28 day of October

1916 at Campbell County.

J. S. M. Jones Ordinary
of Campbell County, Georgia.
I certify that the above witness, J. P. Golightly is a citizen of said county, truthful and trustworthy, and his statements entitled to full faith and credit, and was duly sworn, before

signing above affidavit.

Witness my hand & seal of office, this
Oct. 28, 1916

J. S. M. Jones, Ordinary,
Campbell county, Ga.

Witness my hand & seal of office, this
Oct. 28, 1918
W. M. Loria, Ordinary,
Campbell county, Ga.

Mason, Amanda J. (Mrs)

For Fulton County

1925

Application for Pension Due Deceased Pensioner

(To pay expenses of last illness and funeral)

Thos. H. Jeffries Ordinary
For Amanda J. Mason

Date of Death March 1 1925

Amount \$

Approved and ordered paid
MAY 12 *N. E. Harrin*
N. E. HARRIN,
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 payroll to be permanently
filed with them. Do not keep this application
in your office.

H. M. PATTERSON

FRED'K. W. PATTERSON

Established 1880
H. M. Patterson & Son
Funeral Directors
96 North Forsyth St.
Atlanta, Ga.

CHAPEL
FLOWERS

LIMOUSINES
AMBULANCES

Sold to Mrs. Amanda J. Mason, Estate March 10, 1925.

Casket
Embalming
Constitution notice
Cement Vault
Fall-bearers' gloves
Motor Hearse
Four Limousines

275
15
4 32
50
2 50
15
42

403 62

STATE OF GEORGIA
COUNTY OF FULTON

Personally appeared before me *H. W. Patterson*,
Patterson, who on oath stated that the above
account is correct, due and unpaid.

Sworn to and subscribed before me this April 4, 1925.

H. W. Patterson
Notary Public, State of Georgia
My Commission Expires Dec. 16, 1928

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes
MRS. AMANDA J. MASON, who upon oath says:

That she is the widow of James Miles Mason, whose service
as Confederate soldier is fully set out in the affidavit of affiant
hereto attached. Affiant states that she has made every effort to
locate some member of said company and regiment and has been unable to
do so and now knows of no living member of said company and regiment
and is, therefore, unable to make proof of the service of her husband
in the Confederate Army.

Sworn to and subscribed before me
this October 29, 1919.

Charles J. Mason
C. J. ORDINARY FULTON CO., GA.

Mrs. Amanda J. Mason
her mark

LIGHT PRINT AND. OR BAD COPY

Read Quarters.

DEPARTMENT NORTHERN VIRGINIA.

1863.

[EXTRACT]
SPECIAL ORDER.
No. 11

By command of GEN. LEE.

A. A. General.

Application for Pension Due to a Deceased Pensioner

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

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes I. W. Patterson
of H. M. Patterson & Son of said County, who, after being sworn, on oath
says that he knew Mrs. Amanda J. Mason of said County, and that said Pensioner
was on the Pension Roll of said County at the time of death, which occurred in Fulton
County, in this State, on the 10th day of March 1925, and that
a Pension of One Hundred (\$ 100.00) Dollars was due pensioner and
unpaid at the time of pensioner's death, and that pensioner left no widow or dependent children surviving,
and no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$ 403.88
per sworn statements fully and completely ITEMIZED hereto attached.

Sworn to and subscribed before me

this 22 day of April 1925
Arthur R. Marshall C. C., Ordinary

Fulton County
(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thomas H. Jeffries, Ordinary of said County, do certify
that I personally know I. W. Patterson, who is a resident
citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith
and credit; that I also know Mrs. Amanda J. Mason while in life and that this
was the same person whose name appears on the Pension Roll of Fulton County, and
was paid a Pension of One hundred twenty five (\$ 125.00) Dollars
in said County for 1924, and I now believe 23 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 22 day of April 1925
(Seal of Ordinary) Thomas H. Jeffries Ordinary
Fulton County

INSTRUCTIONS:

- 1st. For use in all cases where pensioner died after January 1st and not been out of State longer than twelve months, and did not have sufficient property to pay such expenses. THIS WIDOW OF A SOLDIER, IF SHE IS LIVING, HAS PRIOR CLAIM OVER THESE EXPENSES, AND MUST MAKE APPLICATION ON YELLOW BLANK.
- 2nd. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and cost each.
- 3rd. Itemized accounts cannot be paid—only those connected with the last illness, just before death when pensioner grew worse to die.
- 4th. Each account must be sworn to before the Ordinary, and in the following form: (Do not use the terms: "last, true, etc. as paid," etc.)
- 5th. The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without leaving sufficient property to pay the bill.
- 6th. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to the blank, after this blank has been properly completed as follows:
- 7th. The completed voucher—this blank and the bill—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 8th. The Ordinary signs pay roll, as Ordinary, for the pension and then disburses the money himself and takes receipt.
- 9th. Except as bills for funeral until you write the Pension Department, stating the circumstances in very great detail. Pensioner's children, or child-in-law, must not charge the State for doing only what the law and common humanity demand of them.
- 10th. Return this application, and attached bill, with your final settlement, to the Pension Department.
- 11th. Ordinary should see that the back of this blank, when folded, is lined out.

STATE OF GEORGIA,
FULTON COUNTY.

Personally before me comes Mrs. Amanda J. Mason, and after being duly sworn on oath says that she resides in College Park, Fulton County, Georgia; that she has been a continuous resident of the State of Georgia all her life; that she was married to James Miles Mason on November 3, 1872, at Chapel Hill, Douglas County, Georgia; and that she has not married since the death of her said husband.

Deponent says that her said husband, James Miles Mason, enlisted as a soldier in the Confederate Army as a volunteer, in January, 1861; that he joined Company "E", 27th Georgia Infantry, said company having been raised in Bethsaida Community, then Fayette now Campbell County, Georgia; that her husband went with his company to Virginia and that they there engaged in military service until he was severely wounded in the seven days fight around Richmond and thereafter was incapacitated for active military service; that by special order, the original of which is hereto attached, he was detailed for duty in the Empire Hospital at Atlanta, Georgia; that he was engaged in hospital duty at said hospital until Atlanta was besieged by Sherman's Army; that at that time he assisted in removing the patients of said hospital to a point of safety at or near Montgomery, Alabama; that while there a casual company was organized to assist in repelling the invasion; that her said husband was a member of this company and as such was engaged in battle with the Federal Army in the Battle of West Point, Georgia, fought after Lee's surrender, in April or May, 1865, where he was captured by the Federal Army and taken as prisoner of war to Macon, Georgia, where he was paroled and returned home. Deponent has no record of his parole and does not know any member of the casual company with which he was then serving.

While deponent was not married at that time, she was acquainted with her said husband, that she wrote to and received letters from him while in the service. That after his wound in Virginia he was never fitted for active military service, that he suffered greatly and came near dying after the war from the effects of his wound, which grew worse until an operation was performed by Dr. Willis West-

moreland, about 1868, to remove the minnie-ball with which he had been wounded.

Deponent lived with her husband until the date of his death at College Park, Georgia, on June 11, 1914.

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

James B. Mason
Notary Public, *Fulton Co. Ga.*

ponent has no record of his parole and does not know any member of the casual company with which he was then serving.

While deponent was not married at that time, she was acquainted with her said husband, that she wrote to and received letters from him while in the service. That after his wound in Virginia he was never fitted for active military service, that he suffered greatly and came near dying after the war from the effects of his wound, which grew worse until an operation was performed by Dr. Willis West-

POWER OF ATTORNEY.

STATE OF GEORGIA,

COURTY.

I, _____ of _____
do hereby certify that the person allowed and request that he make and to _____
Witness my hand and seal, this _____ day of _____ 1909.

Executed in presence of _____

[L. 83]

Mason, Charles B.
Fulton Co 23
for 1910

No. _____

INDIGENT PENSION.

1909

Name C. B. Mason
County Fulton
Co. K-30th Regt.
Approved _____ 1909

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO _____

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

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

8-27-09

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

_____ of _____

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

at _____ by _____

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

Executed in presence of _____

[L. S.]

INDIGENT PENSION.

1909

Charles B. Mason

Fulton

37th

Regt

JOHN W. LINDSEY,

Commissioner of Pensions

WARRANT HANDLED TO

Every question must be answered.

8-27-09

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

Fulton Charles B. Mason of said State and County, desiring to avail himself of the Pension Act (Section 1294, Code), hereby submits his proofs, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.)

Charles B. Mason, Atlanta Ga. Fulton County, Atlanta

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

3. When and where were you born? In Fulton Co. Ga. 7th day of Jan'y 1843

4. When and where and in what company and regiment did you enlist or serve? Joined 1861, at

Cotnamouth Va. 1st Va. Artillery Company Co. 3rd 4th Regt

5. How long did you remain in such company and regiment? until the close of

the war.

6. When and where was your company and regiment surrendered and discharged? Surrendered

at Appomattox R. H. Va. April 9th 1865.

7. Were you present with your company and regiment when it was surrendered? I was

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?

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

10. What has been your occupation since 1865? Battery maker

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty,"

second, "infirmary and poverty," or third, "blindness and poverty?" Infirmary

12. If upon the first ground, state how long you have been in such condition that you could not earn your support.

If upon the second, give a full and complete history of the infirmity and its extent. If upon the third,

state whether you are totally blind and when and where you lost your sight. I have been a

sufferer from Rheumatism for the past three years and

since Dec 1st 1908, have been unable to perform any

work.

13. What property, real and personal, or income, do you possess, and its gross value? I have no real

property which I think I may collect, and \$700 in cash

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what

disposition, if any, by sale or gift, have you made of same? At the time I had property

valued at \$700 which I sold and purchased a stock of goods which

I lost in business

15. In what County did you reside during those years, and what property did you then return for taxation?

Fulton County, Ga. and \$1,400.00

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? I was

supported by my trade

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? \$900.00 per year all from my labor

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you

receive in each year? Battery maker \$900.00 yearly

19. Have you a family? If so, who composes such family? Give their means of support. Have they a home-

stead, or other property? Their ages and how employed? Yes, my wife, the means of support

she has no homestead, and is 64 years of age, and not able

to contribute any thing towards support by self

20. Are you receiving any pension? If so, what amount and for what disability? I am not

21. Have you ever made an application for pension before? I have not

22. How many applications have you ever made and under what class? None whatever

Sworn to and subscribed before me this the _____ day of _____, 190_____

Charles B. Mason Applicant.

John W. Lindsey Commissioner of Pensions.

Fulton County.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

S. D. Mitchell of said State and County, having been presented as a witness in support of the application of Charles B. Mason for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? S. D. Mitchell, 414 Piedmont Ave. Atlanta
2. Are you acquainted with C. B. Mason, the applicant; if so, how long have you known him? I am, and have known him for 37 or more years
3. Where does he reside, and how long and since when has he been a resident of this State? Atlanta Ga. born and reared in Georgia
4. When, where, and in what company and regiment did he enlist, and for how long? Enlisted June 1861, at Portsmouth Va. in Co. H. 3rd Ga. Regt
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? Until the close of the war
7. When and where was his command surrendered? April 9th 1865, at Appomattox Court House Va
8. Were you present when it surrendered? I was, and commanding company at time.
9. Was applicant present? He was.
10. If he was not present, where was he? He was with his command
When did he leave his command? After surrendering For what cause? He had been
By what authority he left? How do you know all of this?
I was present and in command of Artillery Guard
Co. H. 3rd Regiment, till the close of war.
11. What property, effects or income has the applicant? (Give your means of knowledge.) None of my knowledge.
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? I am unable to say.
Do not know
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? Do not know
14. What is the applicant's occupation and physical condition? He is a Pattern Maker by trade, and is suffering from Rheumatism and walks with much difficulty as it appears to me
15. Is the applicant unable to support himself by labor of any sort; if so, why? On account of his physical condition, I should not hesitate to say he is unable to make a support by his trade
16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? I am unable to say.
17. What portion of his support for these three years was derived from his own labor or income? I cannot say.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code, not being a physician respectfully refer you to his certificate hereby attached.
19. Who composes family? What property have they? Children's ages and their earning capacity? Has a wife, no property of my knowledge, and no children was born of the union.
20. What interest have you in the recovery of a pension by this applicant? None whatever
Sworn to and subscribed before me, this the 1st day of April 1909.
J. W. Corbin Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me Wm. D. Graham M.D. and Willie B. Banks M.D., both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully Charles B. Mason, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:

No find him suffering with chronic Rheumatism;

and that we have no interest in said pension being allowed.

Subscribed and sworn to before me, this the 1st day of April 1909.
Wm. D. Graham Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

J. W. Corbin Ordinary, in and for said County, hereby certify that the applicant Charles B. Mason resides in said County, and has been a bona fide resident of this State since the 1st day of April 1861 and that the witnesses, viz: S. D. Mitchell

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

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

I further certify that the tax digest of _____ County shows that applicant returned for taxation in his name in 1901 _____ Dollars of property, and in 1902 _____ Dollars of property; in 1903 _____ Dollars of property; in 1904 _____ Dollars of property; in 1905 _____ Dollars of property; in 1906 _____ Dollars of property; in 1907 _____ Dollars of property.

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

Witness my hand and seal of office, this 1st day of April 1909.
J. W. Corbin Ordinary.
Fulton County.

SECTION.

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

16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?
he is unable to make a support by his trade

I am unable to say.

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

I cannot say.

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code, *not being a physician, respectfully refer you to his certificate hereto attached.*

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

Has a wife, no property, of my knowledge, and no children was born of the union.

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

Sworn to and subscribed before me, this the

15th day of *April*, 190*9*.

Ordinary.

B. D. Mitchell.

Not commanding "N. S. Co. Regt."

Dollars of property; in 1904

Dollars of property; in 1905

Dollars of property; in 1906

Dollars of property; in 1907

Dollars of property.

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

Witness my hand and seal of office, this *24th* day of *August*, 190*9*

James C. Williams
Ordinary.
of *Dutton* County.

NOTES.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY }

I

of

herely authorize

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

at

Witness my hand and seal, this

day of

190

Executed in presence of

[L.S.]

*Pension of \$10.00
10-10-1906
Applicant is the
Brother of our
deceased in service
of a valuable
valuable and noble
life to our country
and to the world
and to the future
of our race.*

Major James Brown

1906

on account of his

10-10-1906

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POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

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

Witness my hand and seal, this _____ day of _____ 1906.

Executed in presence of _____

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

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

1. What is your name and where do you reside? (Give, State, County and Postoffice.)
James I. Madison
2. How long and since when have you been a resident of this State? Since 1834
the year of my birth
3. When and where were you born? March 4th in New York
4. When and where and in what company and regiment did you enlist or serve? Aug 1861
in 4th Regt. Ill. Heavy Art. 1st Div. 1st Army
Appointed 1st Lieut. 1st Regt. Ill. Heavy Art. 1st Div. 1st Army
5. How long did you remain in such company and regiment? Almost four years
until the war closed
6. When and where was your company and regiment surrendered and discharged? Apprehended
C.H. in 1865
7. Were you present with your company and regiment when it was surrendered? I was not
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? I was wounded at Chancellorsville and left there
for hospital on account of severe wound
9. How much can you earn (gross) per annum by your own exertions or labor? nothing
10. What has been your occupation since 1865? Earning & clearing land
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? Age and poverty
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I have infirmity
for many years not able to earn a support
13. What property, real and personal, or income, do you possess, and its gross value? Unimproved
land in Ga. that I own. Value \$1000.00
14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, by sale or gift, have you made of same? the same unimproved land
15. In what County did you reside during those years, and what property did you then return for taxation?
in Fulton County
16. How were you supported during the years 1901, 1902, 1903, 1904 and 1905? by the
charities of my State. I am now 66 years old
17. How much did your support cost for each of those years, and what portion did you contribute thereto by your own labor or income? about \$140 contribute rest from the charity
18. What was your employment during 1901, 1902, 1903, 1904 and 1905? What pay did you receive in each year?
I had no employment at all
19. Have you a family? If so, who composes such family? Give their means of support. Have they a home-
stead, or other property? Their ages and how employed? I have no family
now married
20. Are you receiving any pension? If so, what amount and for what disability? none
21. Have you ever made an application for pension before? yes
22. How many applications have you ever made and under what claim? Two applications
on account of wound received in service
Sworn to and subscribed before me this the _____ day of _____ 1906.
James I. Madison
Applicant.

Every question must be answered.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Outgoing with name of Applicant and Registered as such as indicated above.

Notary Public and Recording Officer, No. 10,000,000, No. 10,000,000, No. 10,000,000.

9/25/06

76

INDIGENT PENSION.

1906

James I. Madison

Fulton County

James I. Madison

James I. Madison

James I. Madison

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James I. Madison

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

William A. Henry of said State and County, having been presented as a witness in support of the application of James S. Mason 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? William A. Henry
I reside at 258 Noble street
2. Are you acquainted with James S. Mason the applicant; if so how long have you known him? Have known him 45 years or more
3. Where does he reside, and how long and since when has he been a resident of this State? He resides in Atlanta Ga. always in this State
4. When, where and in what company and regiment did he enlist, and how do you know? In 1861 at Spartan Ga. in Co K 15th Ga regt
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? up till he was wounded
7. When and where was his command surrendered? in 1865 at Appomattox Court
8. Were you present when it surrendered? I was
9. Was applicant present? he was not
10. If he was not present, where was he? off in Europe
When did he leave his command? last month For what cause? being wounded
By what authority he left? of having a furlough How do you know all of this?
I was intimately acquainted and constantly associated with him during the war
11. What property, effects or income has the applicant? (Give your means of knowledge.)
I know nothing of his property at this time
12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904 and 1905, and what disposition, if any, did he make of same? I know nothing about that
13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom?
I know nothing about his property if any
14. What is the applicant's occupation and physical condition? has no occupation
and his physical condition prevents his following any
15. Is the applicant unable to support himself by labor of any sort; if so, why? he is unable
on account his wound and age

16. How was he supported during the years 1901, 1902, 1903, 1904 and 1905? I don't know
17. What portion of his support for these four years was derived from his own labor or income?
I don't know that
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. Being old injured and wounded

19. Who composes family? What property have they? Children's ages and their earning capacity?
I think he has no family at all

20. What interest have you in the recovery of a pension by this applicant? none whatever
Sworn to and subscribed before me, this 15 day of Sept 1906
John R. Williams Ordinary.

Witness.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

Personally came before me Dr L. C. Fisher and Dr John Simpson, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully

Mr James S. Mason, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows:
Find that has been shot through
right elbow resulting in ankylosis -
his general physical condition is
feeble -

and that we have no interest in said pension being allowed.

Sworn to and subscribed before me, this the

15 day of Sept 1906
John R. Williams Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton COUNTY.

J. R. Williams Ordinary, in and for said County, hereby certify that the applicant James S. Mason resides in said County, and has been a bona fide resident of this State since the 15 day of Sept 1861 and that the witnesses, viz.: W. A. Henry

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

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

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

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

Witness my hand and seal of office, this 15 day of Sept 1906

John R. Williams Ordinary.
of Fulton County.

NOTE.

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

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA,

Johnston County.

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

1. What is your name and where do you reside? (Give County and Post Office.)
James S. Mason, Atlanta Ga. Atlanta Co.

How long and since when have you been a continuous resident citizen of this State?
All my life

2. Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
Yes

4. When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
November, 1861, Co. B, 1st Va. Cavalry

6. How long did you remain in the actual Military Service with said Company and Regiment?
From November, 1861, to April, 1862.

(Give date of discharge) April 19, 1862, Wounded in action

Where and where was your Company and Regiment surrendered or discharged from the Service?
At Appomattox Court House, April 9, 1865.

7. Were you actually present with your Command when it was surrendered or discharged?
No.

8. If you were not actually present, state specifically and clearly where you were
At Appomattox Court House, April 9, 1865.

a. Where was your Command when you left it?
At Appomattox Court House, April 9, 1865.

b. When did you leave the Command?
When I was wounded April 19, 1862.

c. For what cause did you leave?
Wounded

d. By whose authority did you leave?
By order of my Command.

e. For how long was your leave granted? In what way?
For 40 days, during the war.

f. Why did you not return to your Command after leave expired?
My wound was not healed and I was unable to go back.

g. In what way were you prevented?
My wound was not healed and I was unable to go back.

h. What effort did you make to return?
None.

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?
None.

9. What property of every description was owned, in the use, possession and control of yourself and wife, and its cash value on the 4. Nov. 1908? (Make list by items and value.)
None.

10. What property of any kind have you or your wife disposed of and for what purpose since 4 Nov., 1908. To whom and for what price?
None.

11. What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife and its cash value? (Make itemized list).
None.

12. What annual or monthly income or earnings of yourself and wife and the source derived have you?
None.

13. Are you drawing a pension of any amount from this State or the United States?
No.

14. Have you ever applied for the Georgia Pension and had it refused, and for what cause it was not allowed?
Yes, because the title papers for the land were not presented.

Sworn to and subscribed before me, this the

Day of Oct, 1910

James S. Mason Ordinary,

of Johnston County.

James S. Mason
for Confederate
Soldier's Application
UNDER ACT 1910.

County Johnston
Name James S. Mason
Company A
Regiment 1st Va. Cavalry
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

CHAS. T. BETHUN, State Printer, ATLANTA.

QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA.

Hancock County.

C. J. Roese of said State and County is hereby presented as a witness in support of the application of Jas. I. Mason 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? C. J. Roese, Hancock County
2. How long and since when have you known Jas. I. Mason the applicant? Since 1861.
3. Where does he now reside, and since when has he been a bonafide continuing resident in this State and how do you know? Atlanta, Fulton County, Ga. He has been in Atlanta since 1861.
4. When, where and in what Company and Regiment did Jas. I. Mason enlist during war from 1861 to 1865? (Give date and place) July 15, 1861, Sparta, Ga. Co. H, 15th Light Infantry.
5. How did you obtain your information of this Service? I was a member of same Company & at the time he enlisted.
6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date) Sept 19th 1862, when he was wounded at Appomattox Court House, April 9th 1865.
7. When and where was his Command surrendered or discharged (give date and place) At Appomattox Court House, April 9th 1865.
8. Were you personally present at the Surrender? No.
9. If not, where were you and how came you there? I was in Chambersburg Hospital for wound.
10. Was the applicant personally present with his Command at surrender? No.
11. If not where was he and how came him there? I met him at Danville Va. April 10th 1865, on his way to join his command.
12. When did he leave his Command? Sept 19th 1863. Where was his Command when he left it? At Chambersburg, Pa. He was wounded.
13. By whose authority did he leave his command and how long was he granted leave? Leave from my own knowledge. How do you know all that you have stated to be true? If of your own knowledge (Tell clearly and specifically) I was present when he was wounded & allowed to leave. Don't know how long he was allowed to stay.
14. In what way was he prevented from returning to his Command? His wounds were not healed. How do you know? I know he is disabled from wounds.
15. What effort did he make to return to his Command and how do you know? I met him at Danville Va. on his way to join his command at Danville.
16. Was applicant captured as a prisoner? No. If so, when and where? No.
17. In what prison was he held? No. and when released? No.

Sworn to and subscribed before me, this the

3rd day of Oct, 1910

Henry H. Little

Ordinary.

of Hancock County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Henry H. Little County.

Personally before me comes W. H. Little & L. W. Thomas who on oath says that they are free holders residing in said County and we know J. I. Mason the applicant for pension and we know the property that is now in the possession and control of himself and wife and of its cash value to wit: (Make list by items and value.)

4 small negro houses on Withers alley, and the 1/2 of applicant's 1/2 of Withers 1770

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov

1908? (State it fully by items.) none

2. When and to whom was it sold or given to? no one

3. What was the price paid or stated to be paid? none

4. What relation is the party to applicant? none

5. What disposition was made of the proceeds of the sale?

6. Was the disposition of this property made in good faith and full value? no disposition or was it made to obtain a pension?

Sworn to and subscribed before me, this the

10th day of Oct, 1910, at Atlanta, Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA.

Fulton County.

I, Henry H. Little Ordinary of said County, certify that I know the applicant Jas. I. Mason for Pension is the person he represents himself to be and resides in said County. He is a resident of said County and was duly sworn by me before signing the foregoing affidavit and they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the Tax Results of Jas. I. Mason shows that for 1908 \$ none for 1909 \$ none for 1910 \$ none and value for taxes in 1908 \$ none for 1909 \$ none for 1910 \$ none day of Oct 1910

Sworn to and subscribed before me, this the 10th day of Oct, 1910, at Atlanta, Fulton County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words "You do solemnly swear that you will true answers make to each question asked you and the evidence you shall give shall be the whole truth; so help you God."

2. Additional affidavits may be attached if blank space are insufficient.

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

4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders unnecessary.

Georgia Hancock County
I, Henry H. Little, Ordinary of said County, certify that I know C. J. Roese, Atlanta, Fulton County, Ga. appearing to swear to the application of Jas. I. Mason for Pension that he is a resident of said County & was duly sworn by me before signing the foregoing affidavit. That he is truthful & trustworthy & his statements entitled to full faith & credit.
Sworn under my hand & official seal this 3rd day of October, 1910.
Henry H. Little, Ordinary of Hancock County.

Henry H. Little Ordinary.
of Hancock County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA.

Georgia Little County.

Personally before me comes W. D. Foster & Lari P. Jones who on oath says that they are free holders residing in said County and we know J. A. Madson the applicant for pension and we know the property that is now in the possession and control of himself and wife and of its cash value to wit: (Make List by Items and Value).

4. One piece of land on North side, and the 1/2 of applicant is only worth \$7.00

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov

as the faithful & trustworthy & his statements indicated to be true
faith & credit.

Sworn under my hand & official seal this 3rd day
of October 1910

Henry H. Little, Ordinary of
Hancock County

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY, }

I,

of

do hereby authorize

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

at

day of

190

Witness my hand and seal this

Executed in presence of

[Seal]

Narrow, Martha
Fullton
Ch. E. Red

ACT DECEMBER 16, 1901.

No. _____

WIDOW'S PENSION,

1902

Mrs. *Martha A. Mason*

County of *Fullton*

Widow of *W. L. Mason*

Warrant issued _____ 190

and handed to _____

J. W. LINDSEY,
Commissioner of Pensions.

Geo. W. Harrison, State Printer.

10/7-1902

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

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

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

Executed in presence of _____

[SEAL]

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Personally came Mrs. Maria A. Mason

COUNTY OF Fulton

who says on oath she is the

widow of

W. L. Mason

to whom, in the County of

Fulton

State of

Georgia

she was married on the

4 Sunday

day of March

18 60

that she remained his wife up to the 20th

day of June

190 2

at which time he died, and that she has not since married.

At the time of his death he was a resident of

Fulton

County, in said State of

Georgia, and was on the

Indigent

pension roll of the State of Georgia, having been allowed

a pension of \$ 60.00

per annum on account of being a soldier in Company B

613 Regiment,

Ga

Volunteers or State

What affliction have you and how does it effect you?

Rheumatism

Nutrit insufficiency - Dropsical
Asymptomatic in feet & legs

What have you been doing to earn a support since 1st of January, 1900?

nothing

What property or effects had you on 1st January, 1900?

none

What have you acquired since, and what income have you now?

none

What disposition have you made of any property since 1st January, 1900, and at what price and for what purpose?

none

Deponent further says that she is now a resident of

Fulton

County and has

continuously resided in the State of Georgia since the

all her life

18

She applies for the pension provided by Act of the General Assembly, approved December 18, 1901.

Sworn to and subscribed before me this

7th

day of

Dec

190 2

Maria A. Mason

John R. Wilkinson

Ordinary of Fulton

County.

NOTE.—All blank spaces must be filled before signing.

Mason, Martha A.
Fulton Co.
Ch. C. C. C.
ACT DEC 18, 1901
No.
WIDOW'S PENSION,
1902
Mrs. Maria A. Mason
County of Fulton
Widow of W. L. Mason
Warrant issued _____ 190
and handed to _____
J. W. LINDSEY,
Commissioner of Pensions,
10/7-1902

AFFIDAVIT FOR THREE WITNESSES.

STATE OF GEORGIA, Personally came G. A. Dickson
COUNTY OF Navy W. C. Massey and
W. C. Massey known to me to be reputable and truthful person who says
on oath that from his own personal knowledge Mrs. Martha A. Massey
who made the foregoing affidavit is the widow of W. C. Massey
who died in Fulton County and State of Georgia on the
130 day of June 1902, and that she was since married, that she became his
wife on the 4th day of December 1890, and so remained up to the time of his death,
and that she has resided in this State continuously since the day of 1890
With what affliction does she suffer? Age & suffering from Rheumatism
so much so can't do any kind of labor
What property or income had she on 1st January, 1900? Nothing
What has she in her possession and control now? Nothing
How was she supported in 1900 and 1901? By her son
I have no personal interest in the pension asked for
G. A. Dickson
W. C. Massey
W. C. Massey
Sworn to and subscribed before me this 6 day of Oct 1902
W. C. Massey
Ordinary Navy County, Georgia.

PHYSICIANS' AFFIDAVIT.

STATE OF GEORGIA, Personally came before me
COUNTY OF Fulton W. C. Bryant M.D.
and W. C. Bryant M.D. both of whom are known to me to be reputable
physicians, who say on oath that they personally know Martha A. Massey
mentioned in the foregoing affidavit that she is permanently afflicted with (state disease and how it prevents her
earning a support) Rheumatism, Valvular or
mitral insufficiency of heart causing
weakness and a dropsical condition
of feet & legs.
Sworn to and subscribed before me this 7th day of Oct 1902
W. C. Bryant M.D.
John R. Wilkinson
Ordinary of Fulton County.

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

STATE OF GEORGIA, I, John R. Wilkinson Ordinary,
COUNTY OF Fulton in and for said County of Fulton
State of Georgia, hereby certify that I am acquainted with Mrs. Martha A. Massey
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 has resided in the State of Georgia continuously
since the 18th day of November 1899, and has not lived out-of the
State since that date. I also certify that the witnesses, to-wit:
G. A. Dickson and W. C. Massey, whose testimony she
presents to sustain her claim, are known to me to be truthful witnesses, entitled to full faith and credit as such,
and that the full text of the affidavit was read to and understood by them before same was signed. I am fully
satisfied that this claim is made in good faith, and I have caused the applicant and the witnesses to read or hear
read the proofs they sign.
In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this the 7th
day of October 1902
John R. Wilkinson
Ordinary.

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 in all cases the best proof accessible will be required and it is incumbent on the applicant to make out a clear case
covering the above points.
Affidavits must be made in presence of the Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____, COUNTY. }

I, _____, hereby authorize

of _____

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

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1905.

[L. s.]

Executed in presence of _____

Mason, W. A. (mo.)
To Those Hereinbefore Paid.

1905.

No. 67

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. J. W. Lindsey

OF

Fulton.

County,

Widow of *W. A. Mason*
Co. B. 65th Regt.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1/20 1905.

AND HANDED TO

W. A. Mason

See Chapter on Pensions and Pensions, etc., in the

and the Pensions, etc., in the

Form No. 3 FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
County of **Fulton.**

PERSONALLY COMES MRS.

M. A. Mason

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 *April* That she is the Widow of *H. L. Mason* who was a soldier in Company *B* of the *63rd* Regiment of *Georgia* Volunteers, that he enlisted in said regiment on or about the month of _____ 186____, and served in the Army up to _____ 186____ That he died on the _____ day of _____ 1903.

(Indigent pensioner)

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been allowed an Indigent pension as a resident of **Fulton.** County, under Act 1900, for the year 1904, and now apply for the pension provided by law for the year ending December 31, 1905.

Sworn to and subscribed before me,
this _____ day of **JAN 2** 1905.
John P. Wilkinson Ordinary.

Post-Office *Atlanta*

State of Georgia,
County of **Fulton.**

I, *John P. Wilkinson*

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

Given under my official signature and seal, this _____ day of **JAN 2** 1905.

Official Seal.

John P. Wilkinson
Ordinary of **Fulton.** County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

In Witness Whereof, I have hereunto set my hand and seal, this _____
day of _____ 1906.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

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

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

[L. S.]

Executed in presence of _____

Mary M. A. (Mrs.)
Fulton County
To Those Hereofore Paid.

1906.

No. 53

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1906.

Mrs. M. A. Mason

Fulton County,

Widow of *M. A. Mason*
Co. B 63rd Va. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED
4/9 1906,

AND HANDLED TO
W. H. H.

THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA, GA.

Mary M. A. (Mrs.)
Fulton Co.

To Those Hereofore Paid.

1907.

No. 67

INDIGENT
WIDOW'S PENSION,

For year ending Dec. 31, 1907.

Mrs. M. A. Mason

Fulton County,

Widow of *M. A. Mason*
Co. B 63rd Va. Regiment.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

4/6 1907.

AND HANDLED TO
W. H. H.

THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA, GA.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES Mrs.

M. A. Mason

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 1839. That she is the Widow of W. L. Mason who was a soldier in Company B. of the 63rd Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of 1860, and served in the Army up to 1862. That he died on the 1862 day of 1862.

(Indigent pensioner)

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1905, and now apply for the pension provided by law for the year ending December 31, 1906.

Sworn to and subscribed before me

this 1st day of Jan 1906.John R. Wilkinson, Ordinary.

Post Office

20 E. 1st St.

State of Georgia,

County of Fulton.I, John R. Wilkinson

Ordinary of said County, certify that I am well

acquainted with Mrs. M. A. Mason, 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 1860 day of 1860.

Given under my official signature and seal, this 1st day of Jan 1906.

Official Seal

Ordinary of Fulton County.

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

FOR INDIGENT WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County of Fulton.

PERSONALLY COMES Mrs.

M. A. Mason

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 1839. That she is the Widow of W. L. Mason who was a soldier in Company B. of the 63rd Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of 1860, and served in the Army up to 1862. That he died on the 1862 day of 1862.

(Indigent pensioner)

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1860.

I have been allowed an Indigent pension as a resident of Fulton County, under Act 1900, for the year 1906, and now apply for the pension provided by law for the year ending December 31, 1907.

Sworn to and subscribed before me

this 1st day of Jan 2- 1907.John R. Wilkinson, Ordinary.

Post Office

20 E. 1st St.

State of Georgia,

County of Fulton.

Ordinary of said County, certify that I am well

acquainted with Mrs. M. A. Mason, 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 1860 day of 1860.

Given under my official signature and seal, this 1st day of Jan 2- 1907.

Official Seal

Ordinary of Fulton County.

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

NOTE.—All blanks must be filled.
Vouchers and Affidavits must bear date after January 1st, 1906.

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

Mason, Martha A. (Mrs.)
Fulton Co.
1916

Application for Pension Due
Deceased Pensioner
Under Act 1904.

..... Ordinary
For Mrs. Martha A. Mason
of Fulton County
of Co. Regiment

Approved and ordered paid 4/17
and of money declared
4/17 1916
J. W. LINDSEY,
Commissioner of Pensions.

DAVID C. BODEN

M. W. WISE

FOSTER L. HUNTER

BODEN, HUNTER & WISE



FUNERAL DIRECTORS

49 EAST HUNTER STREET

BOTH PHONES 1168

ATLANTA, GA.

4/16/17

Dec. 31st 1916 Funeral of Mrs. Martha A. Mason
at 44 Parkman St
Atlanta Ga.

To Casket + Box	\$ 65.00
Embalming + services	10.00
Robe	10.00
Transfer to Train	5.00
	\$ 90.00

M. W. Wise

Personally appeared M. W. Wise of
Boden, Hunter & Wise who being sworn
says the above acct is just true due &
unpaid

M. W. Wise

Sworn to and subscribed before me this
April 17-1917

Allen R. Vincent

CC Ordinary

Application for Pension Due to a Deceased Pensioner

UNDER THE ACT OF AUG. 15, 1904, TO BE PAID TO THE ORDINARY FOR FUNERAL EXPENSES AND EXPENSES OF LAST ILLNESS.

Georgia, Fulton County.

Personally before me, the Ordinary of said County, comes F. M. Mason

of said County, who, after being sworn, on oath says that he knew Martha A. Mason of said County, and that he was on the Indigent and Pension Roll London County at the time of his death, which occurred in County of Fulton County, in this State, on the 21st day of December 1916, and that a Pension of Five Dollars was due her and unpaid at the time of her death. That she left no widow or dependent children surviving her, and no estate of any value sufficient to pay the funeral expenses, which amounted to the sum of \$102.90 Dollars, as per sworn statement, itemized, hereto attached.

Sworn to and subscribed before me

this 17th day of December 1916

Arthur B. Mason Ordinary

Fulton County

Georgia, Fulton County.

I, Thos. H. Jeffries Ordinary of said County, do certify that I personally know F. M. Mason, who is a resident citizen of said County, and that he is of a truthful and trustworthy character, entitled to full faith and credit.

I also knew Martha A. Mason while in life; that he was the same person whose name appears on the Indigent and Pension Roll of Fulton County, and was paid a Pension of Five Dollars in said County for 1916 and I now believe him to be dead.

Given under my hand and official seal, this 17th day of December 1916

Thos. H. Jeffries Ordinary,
Fulton County.

DUPLICATE TRANSIT PERMIT TRANSPORTATION OF CORPSE GEORGIA STATE BOARD OF EMBALMING

Always write with black ink

1 PLACE OF DEATH State of Georgia County of <u>Fulton</u> City of <u>Columbus</u> (No. <u>44 Parkin</u> St. Ward <u>1</u>)			Department of Commerce Bureau of the Census STANDARD CERTIFICATE OF DEATH		
2 FULL NAME <u>Martha A. Mason</u>			If death occurred in a hospital or institution, give its name, street and number.		
PERSONAL AND STATISTICAL PARTICULARS			MEDICAL CERTIFICATE OF DEATH		
3 SEX <u>Female</u>	4 COLOR OR RACE <u>White</u>	5 MARRIAGE STATUS <u>Widow</u> (Write the word)	10 DATE OF DEATH <u>Dec 21</u> 191 <u>6</u> (Month) (Day) (Year)		
6 DATE OF BIRTH <u>Nov 17th</u> 18 <u>84</u> (Month) (Day) (Year)			11 I HEREBY CERTIFY, That I attended deceased from <u>Dec 21</u> 191 <u>6</u> to <u>Dec 30</u> 191 <u>6</u> , and that I last saw her alive on <u>Dec 30</u> 191 <u>6</u> , and that death occurred, on the date stated above, at <u>6 P. M.</u> The CAUSE OF DEATH was as follows: <u>Cancer</u>		
7 AGE <u>77</u> yrs. <u>1</u> mo. <u>12</u> da. or less			12 CONTRIBUTORY (Secondary) <u>Bright Disease</u>		
8 OCCUPATION (a) Trade, profession, or occupation at time of death. (b) General nature of industry, business, or establishment in which employed (or employer).			13 CAUSE OF DEATH (State of Georgia) <u>Cancer</u>		
9 BIRTHPLACE (State of Georgia) <u>La</u>			14 THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE (Informant) <u>F. M. Mason</u> (Address) <u>Columbus Ga</u>		
10 NAME OF FATHER <u>John D. Mason</u>			15 LENGTH OF RESIDENCE (For Hospital, Institutions, Transients, or Recent Residents) <u>11</u> yrs. <u>1</u> mo. <u>12</u> da.		
11 BIRTHPLACE OF FATHER (State or Country) <u>La</u>			16 WHERE WAS DEATH CERTIFICATED? (If not at place of death) Former or usual residence <u>44 Parkin St.</u>		
12 MAIDEN NAME OF MOTHER (State or Country)			17 DATE OF SHIPMENT <u>11</u> 191 <u>6</u>		
13 PLACE WHERE REMAINS ARE TO BE SENT			18 UNDERTAKER <u>Borden & Shuler</u>		

Information on this certificate is an exact copy of the official certificate filed at place of death.

PERMIT OF BOARD OF HEALTH OR REGISTRAR

This Permit with above Certificate, must be presented to Initial Baggage Agent and delivered with body at destination

Permit is hereby granted to remove the body of Martha A. Mason above described, if prepared in accordance with the laws of this State, printed on the back of this permit.
If contagious or communicable, state name of person who is authorized to accompany the body
Dr. H. H. Mason Health Officer or Registrar.

Detach above portion at this perforation, and hand to messenger in charge, to be delivered to the undertaker at destination. If burial is made in this State, the casket or other person representing must send this permit to the State Board of Health in ten days, when burial is made in city or town where death certificate and permanently filed.

was the same person whose name appears on the Indigeneal Record Pension
Roll of Fuelton County, and was paid a Pension
of 50.00 Dollars in said County for 1916 and
I now believe him to be dead.

Given under my hand and official seal, this 4 day of April 1917

Wm. A. Mason Ordinary,
Hulton County.

PERMIT OF BOARD OF HEALTH OR REGISTRAR

This Permit with above Certificate, must be presented to Initial Baggage Agent and delivered with body at destination

Permitting is hereby granted to remove the body of Levin Green 1917
of Wm. A. Mason the body
the laws of this State, printed on the back of this permit.
If contagious or communicable, state name of person who is authorized to remove the body.

Health Officer or Registrar.

Unless above person at this perforation, and hand to passenger in charge, is he delivered to the undertaker at destination. If burial is made in this State, the carrier or other person transporting, must send this permit to the State Board of Health in ten days, unless burial is made in city or town where death certificate is permanently filed.

Mason, Captain W.
Fulton County (Mrs)
Apr 1911

No.

Widow's Application

To Be Put on Roll in Her Own Right, when
Husband Was on Roll at Death.

✓

County Fulton

Name Sarah M. Mason

Widow of C. B. Mason

Approved

J. W. LINDSEY
Commissioner of Pensions

Chas. P. Byrd, State Printer, Atlanta.

7-5-10

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Fulton County.

Personally before me comes Sarah M. Mason of said County, who, after being duly sworn, on oath says, that she is the widow of Le B. Mason to whom in the County of Green State of Ga she was married on the 6 day of Nov 1867 and that she remained his wife, and resided with him to the date of his death in Feb 21st 1912 and that she has not since his death remarried. At the time of his death he was a resident of Fulton County, in Atlanta said State of Georgia, and he was on the Confederate Pension Roll of the State and paid a pension of \$ 60.00 in Fulton County for 1909 per annum, on account of being a soldier in Company H Third (3rd) Regiment Georgia (Volunteers of the Union).

At the death of Le B. Mason he was in the use and possession of the following property: Had no property
of the cash value of \$

What property of any kind and of any value have you in your use, control and possession now, and the cash value (State fully):

Acres land.	\$
Horses and Mules	\$
Hogs, Cows, etc.	\$
Total Cash value of all property	\$ <u>138.00</u>

That she is now a bonafide resident citizen of said County of Fulton and she has so continuously resided since 1876 day of Sept

Sworn to and subscribed before me, this 27th day of Sept 1912 at Atlanta Georgia Ordinary.

of _____ County.

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

STATE OF GEORGIA,

Fulton County.

Personally before me come Chas W. Jacks known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs. Sarah M. Mason who made the foregoing affidavit, is the lawful widow of Chas B. Mason who died in Fulton County in, said State of Ga on 21 day of Sept 19 12 and that she has not since remarried. That she became the wife of Chas B. Mason on the 6th day of Nov 1867 and that she and he had resided together as man and wife continuously since the 6th day of Nov 1867 and that the Chas B. Mason was the same man who was on the pension roll of said State Georgia from Fulton County when he died.

Sworn to and subscribed before me, this 27th day of Sept 1912 at Atlanta Georgia Ordinary.

of Fulton County.

Widow's Application

To Be Filled Out by Her Own Right, when Husband Was on Roll at Death.

County

Fulton

Name

Sarah M. Mason

Widow of

Le B. Mason

Approved

J. W. LINDSEY

Commissioner of Pensions

CHAS. F. BOND, STATE PRINTER, ATLANTA.

*Mason, Sarah M.
Fulton County (Mo)
JL 100911*

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me come Wm. McKelvey and Chas. W. Jackson who after being sworn on oath says, that they are freeholders of said County, and that they know Mrs. Sarah M. Mason and said County and knew her said husband Chas. B. Mason at his death on the 21 day of Feb. 1912 that she and he were in the use, possession and control of the following property at his death to wit: notes

of the value of \$ 1000.00 That she is now in the use, possession and control of the following property to wit: notes

of the value of \$ 900.00

Sworn to and subscribed before me, this the

26 day of Sept. 1912
Wm. McKelvey and Chas. W. Jackson Ordinary,
of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

John W. McKelvey Ordinary of said County, do certify, that, I know Mrs. Sarah M. Mason the applicant for this pension and that she is the person she represents herself to be, and that she is a bona fide continuing resident of said County and was on the Aug 18 1896 1912 That I also know Chas. W. Jackson who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Fulton County shows that she returned property to the amount of \$ 200 for 1908 \$ 200 for 1909 \$ 200 for 1910 \$ 200 under my hand and official seal of office this 26 day of Oct 1912
(SEAL.) John W. McKelvey Ordinary,
Fulton County.

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

Mason, Mrs. Sarah M.
 For Fulton County

1929

**Application for Pension
 Due Deceased Pensioner**

(UNDER ACT 1904)

(To pay expenses of last illness and funeral)

For Thos H. Jeffries Ordinary

For Mrs. Sarah M. Mason

Date of Death Oct 31 1929

Amount \$100.00

Approved and ordered paid of

R. D. Lawrence

Commissioner of Pensions.

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

**STATE OF GEORGIA.
 COUNTY OF FULTON.**

Personally before the undersigned authority now comes Mrs. W. R. Dodge, who upon oath says:

That she is the neice of Mrs. Sarah M. Mason, who died on the 31st day of October, 1929, while on a visit to Rocky Mount, N. C.; that the said Mrs. Sarah M. Mason was a bona fide resident of the State of Georgia at the time of her death; that she suffered a stroke of paralysis while in North Carolina and was confined to the hospital and unable to return to her home, but that her body was returned after her death and interred in Greensboro, Ga.

Affiant further swears that the only reason Mrs. Mason was not within the State of Georgia at the time of her death is the fact that she was in such a critical condition for many months before her death that the physicians in charged would not advise her removal until her physical condition could be improved; that she never improved and died, as above stated, in the State of North Carolina.

Sworn to and subscribed before me this
 Nov 23 1929.

Charles O. Mason

W. R. Dodge

C C Ordinary

ROCKY MOUNT, N. C., 10/31 1929

M. C. W. Jacobs

To **ROBERT R. GAY, Dr.**

DEALER IN

Hardware, Building Material and Farm Implements

Undertakers and Embalmers

Guns and Ammunition
 Cook and Heating Stoves
 Steel and Wire Nails
 Paints and Oils
 Sash, Doors and Blinds
 Lime and Cement
 Wagon Harness
 Hackney Brothers' Farm Wagons

To cash for Mrs. Mason
 "Embalmment"

85.00
 25.00
 110.00

over
 see back

Application for Pension Due to a Deceased Pensioner

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)

(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Mrs. W. R. Dodge

of said County, who, after being sworn, on oath

says that he knew Mrs. Sarah M. Mason of said County, and that said Pensioner

was on the Pension Roll of said County at the time of death, which occurred in Rocky Mount, NC
~~Rocky Mount, NC~~, on the 2nd day of Oct, 1929

and that pensioner left ~~nothing~~ nothing estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$110.00, per sworn statements fully and completely itemized hereto attached. Robert H. Day, funeral director, as per attached statement.

Sworn to and subscribed before me,

W. R. Dodge, Ordinary

Fulton County

(Seal of Ordinary)

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, Thos H. Jeffries, Ordinary of said County, do certify

that I personally know Mrs. W. R. Dodge, who is a resident

citizen of said County, and that said person is of truthful and trustworthy character, entitled to full

faith and credit; that I also knew Mrs. Sarah M. Mason 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 Fifty (\$50.00) Dollars

in said County for 1929, and I now believe said pensioner to be dead; and that the instructions at

the foot of this voucher have been carefully observed in making up this voucher and the bills which are

attached hereto.

Given under my hand and official seal, this 26 day of Dec, 1929

(Seal of Ordinary) Thos H. Jeffries Ordinary

Fulton County

INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

2nd. Each account must be sworn to before the Ordinary, and in the following form:

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

3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.

4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.

5th. Return this application, and attached bills, properly receipted, to the Pension Department.

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

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes MRS. W. R. DODGE, who upon oath says:

That she is the niece of SARAH M. MASON, deceased, and that before her death the said Sarah M. Mason made her home with affiant at 208 Benson St., Decatur, Ga.; that the said Sarah M. Mason had been a resident of Georgia for 48 years or more before her death, which occurred in Rocky Mount, N. C. on October 31, 1929; that the said Sarah M. Mason had been on a visit to Rocky Mount, NC, and while on said visit suffered a stroke of paralysis and, before she was able to return to her home, she had the second stroke, and finally the third stroke which caused her death; that under advice from physicians, affiant never sought to move Sarah M. Mason, because any excitement would have probably caused her earlier death and, because of the strokes above mentioned, she had to remain in Rocky Mount NC for about eighteen months, although she never changed her residence from Decatur, Ga., and would have been home many months before her death had she been physically able to do so.

Sworn to and subscribed before me this Dec 2 1929.

W. R. Dodge
Ordinary Fulton Co Ga

And in the year
1931/29

12-15-29

W. R. Dodge

Personally before the undersigned authority now comes Robert H. Day, who upon oath says that the within statement of account is just, true, due and unpaid. Sworn to and subscribed before me this November 26 1929.

SEAL OF KERN & HANSON
NOTARY

Application for Pension Due to a Deceased Pensioner

(To Be Paid to the Ordinary for Expenses of Funeral and Last Illness)

(Under Act Approved August 15, 1904)

GEORGIA, Fulton County.

Personally before me, the Ordinary of said County, comes Mrs. W. R. Dodge of said County, who, after being sworn, on oath says that he knew Mrs. Sarah M. Mason of said County, and that said Pensioner was on the Pension Roll of said County at the time of death, which occurred in Rocky Mount, NC ~~on the 2nd day of Oct. 1929~~ on the 2nd day of Oct. 1929 and that pensioner left ~~no~~ no estate of any value sufficient to pay these funeral expenses, which amounted to the sum of \$110.00, per sworn statements fully and completely and asks that check for \$100.00 be turned over to Robert H. Gay, funeral director, as per attached statement.

Sworn to and subscribed before me,
David H. Jeffries, Ordinary
Fulton County
(Seal of Ordinary)

Wm W R Dodge

CERTIFICATE OF ORDINARY

GEORGIA, Fulton County.

I, David H. Jeffries, Ordinary of said County, do certify that I personally know Wm W R Dodge, who is a resident citizen of said County, and that said person is of truthful and trustworthy character, entitled to full faith and credit; that I also knew Mrs Sarah M Mason 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 Fifty (50.00) Dollars in said County for 1929, 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 7th day of Dec., 1929.
(Seal of Ordinary) David H. Jeffries, Ordinary
Fulton County

INSTRUCTIONS:

- 1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.
- 2nd. Each account must be sworn to before the Ordinary, and in the following form:
"The above and foregoing account is rendered for services in the last illness (or for funeral expenses, as the case may be) of _____ who died without owning sufficient property to pay this bill.
- 3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.
- 4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.
- 5th. Return this application, and attached bills, properly receipted, to the Pension Department.
- 6th. Ordinary should see that the back of this blank, when folded, is filled out.

STATE OF GEORGIA.
COUNTY OF FULTON.

Personally before the undersigned authority now comes MRS. W. R. DODGE, who upon oath says:

That she is the niece of SARAH M. MASON, deceased, and that before her death the said Sarah M. Mason made her home with affiant at 205 Benson St., Decatur, Ga., that the said Sarah M. Mason had been a resident of Georgia for 45 years or more before her death, which occurred in Rocky Mount, N. C. on October 31, 1929; that the said Sarah M. Mason had been on a visit to Rocky Mount, NC, and while on said visit suffered a stroke of paralysis and, before she was able to return to her home, she had the second stroke, and finally the third stroke which caused her death; that under advice from physicians, affiant never sought to move Sarah M. Mason, because any excitement would have probably caused her earlier death and, because of the strokes above mentioned, she had to remain in Rocky Mount NC for about eighteen months, although she never changed her residence from Decatur, Ga., and would have been home many months before her death had she been physically able to do so,

Sworn to and subscribed before me this Dec 8 1929.

O B Oulton
O O Ordinary Fulton Co Ga

Wm W R Dodge

STATE OF NORTH CAROLINA.
COUNTY OF Nash.

Personally before the undersigned authority now comes Robert M. Gay, who upon oath says that the within statement of account is just, true, due and unpaid.
Sworn to and subscribed before me this November 2nd 1929.

Notary Public, Nash County, N.C.

my com 43-15-31

h/12/101
Wm W R Dodge

attached hereto.

Given under my hand and official seal, this

26 day of Dec, 1929

(Seal of Ordinary)

Ordinary

County

INSTRUCTIONS:

1st. Require those claiming expenses of last illness and funeral, to make out their accounts in fully itemized form, giving each item and the value of it, and each date.

2nd. Each account must be sworn to before the Ordinary, and in the following form:

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

3rd. The Ordinary must see to it that each bill is perfectly legitimate in every respect, and properly sworn to, and all attached neatly to this blank, after this blank has been properly completed as indicated.

4th. The completed voucher—this blank and the bills—must be sent to the Pension Department for approval and no money must be paid out until it is returned to you as your authority to make the payment.

5th. 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.

STATE OF NORTH CAROLINA.
COUNTY OF NASH

Personally before the undersigned authority now comes Robert M. Jay, who upon oath says that the within statement of account is just, true, due and unpaid. Sworn to and subscribed before me this November 26, 1929.

Notary Public, Nash County, N.C.

my com. exp 3-15-31

KOREKI

62/10/01

Wm. H. Mason

November 27, 1929.

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

My dear Judge:

The application of Mrs. W. E. Dodge for funeral expenses of Mrs. Sarah M. Mason has been received.

Will you not advise how long Mrs. Mason was out of the State, altogether, immediately preceding her death, and how long she had been absent before she had the stroke of paralysis, which prevented her return.

With kind regards,

Very truly yours,

Commissioner of Pensions

Georgia
 Wayne County 3 J. Jas. N. M. Whorton Ordinary in 5 County
 in sta Georgia do hereby Cer in the matter
 is a correct and true copy of Marriage License of Charles B. Mason
 and Sarah M. Pearson (as the same appears of record in this office)
 given under my official signature and seal of office this 19th
 day of September 1910
 Jas. N. M. Whorton
 Ordinary

County of Wayne
 MARRIAGE LICENSE
 OF
 Charles B. Mason
 AND
 Sarah M. Pearson
 Issued 11-5-1910
 and Recorded on Page 32 Book
 of Marriage Licenses.
 Jas. N. M. Whorton
 Ordinary.

STATE OF GEORGIA.
 COUNTY OF FULTON.

Personally before the undersigned authority now
 comes Mrs. W. R. Dodge, who upon oath says:

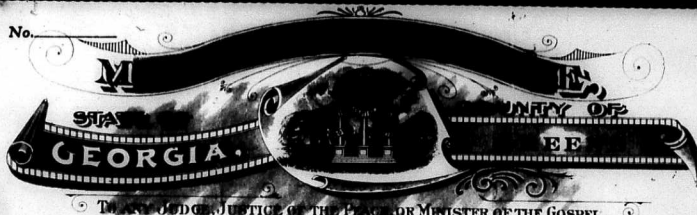
That Mrs. Sarah M. Mason is the aunt of affiant
 and made her home with affiant in Decatur, Ga.; that the said
 Sarah M. Mason went on a visit to Rocky Mount, N.C. and, when
 she had been there about six weeks, or less, she suffered a
 stroke of paralysis and was never able to be moved back to
 her home; that, under advice of physicians, she was kept in
 Rocky Mount in the hope that her condition would improve suf-
 ficiently for her to be moved back to Decatur but, instead,
 her condition became worse and worse, and she suffered a
 second stroke and finally the third, which resulted in her
 death. Affiant states that, as above, Sarah M. Mason had
 not been away from her home as much as two months when she
 had the first stroke and affiant believes, to the best of
 her recollection, that she had been away less than six weeks.

Sworn to and subscribed before me
 this Dec 4 1929.

A. B. Ballantyne
 Notary Public

W. R. Dodge

No.

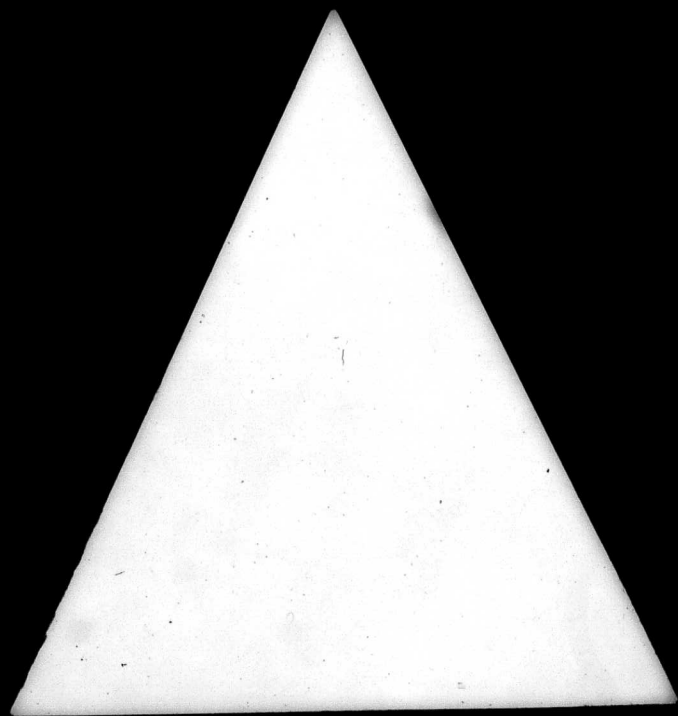


TO ANY JUDGE, JUSTICE OF THE PEACE, OR MINISTER OF THE GOSPEL.

You are hereby authorized to join
Charles B. Mason and Sarah M. Carson
in the Holy State of Matrimony, according to the Constitution and
Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me, with your
Certificate hereon of the fact and date of the Marriage.
Given under my hand and seal this 5th day of
November 1867 *Eugenius L. King* (L.S.)
Ordinary.

STATE OF GEORGIA, ~~GREENE COUNTY~~ GREENE COUNTY.

I Certify that Charles B. Mason and Sarah M. Carson
were joined in Matrimony by me this 6th day of November
and Sixty seven (1867)
Recorded November 1867 *Philip B. Robinson M. E.*
Eugenius L. King Ordinary



Mason, William A.
Gulley County

No. *Mason Wm A*

**INDIGENT PENSION,
1900.**

Name *W. I. Mason*

County *Gulley*

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

JLC022

Oct 1901

Pension Office 106-140
Applicant must state
where he left his command
and for what cause - who
granted him leave of absence
and for how long
and friends & relations
by whom he can prove
all this claimed by
W. I. Lindsey
Care of Pension

STATE OF GEORGIA.
Power of Attorney.

County. }

lawyer authentic

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

at

by

Witness my hand and seal, this

day of

1900.

Executed in presence of

[L. S.]

Power of Attorney.

STATE OF GEORGIA,

County, }

I, _____ hereby authorize

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

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

Executed in presence of _____ [L. S.]

Pension Office 186-1900
Applicant rec'd State
Money left his Annual
and for what Cause - when
granted him some of the
even for him long
and paid, a witness
by whom the Case from
all these obtained by

W. L. Lindsey
Clerk of Bureau

No. _____

INDIGENT PENSION,

1900.

Name *W. L. Lindsey*

County *Fulton*

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO _____

Geo. W. Lindsey, Clerk of Pensions, Atlanta.

JLCobb

ok 1/4/01

Questions for Applicant.

STATE OF GEORGIA,

Fulton County, }

W. L. Lindsey of said State, 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)
Atlanta Fulton County Ga
2. How long and since when have you been a resident of this State?
all my life
3. Whom did you marry?
My wife was born in 1826 in South Carolina
4. When and where and in what company and regiment did you enlist or serve? Enlisted in mob 1864 in 63rd 1st Regt - Company B (B)
5. How long did you remain in such company and regiment?
from time of enlistment until I was sent home on 1st of Feb, 1865, which still belongs to this Co & Regt until close of the war
6. When and where was your company and regiment surrendered and discharged?
at home where they surrendered to the Command of General Sherman
7. Were you present with your company and regiment when it was surrendered?
at home in Fulton
8. Do not forget, state specifically and clearly where you were, when you left your command, for what disability, whose authority?
on 1st of Feb 1865, my wife being badly disabled on 1st of Feb - on account of my wife being badly disabled
9. How much can you earn (gross) per annum by your own exertions or labor?
Nothing at present
10. What has been your occupation since 1865?
that of being a receipt for the pension
11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"?
1st & 2nd grounds
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight?
to the 1st of Feb 1865, I have lost my right eye - had my left eye broken, & my left foot maimed where also 1/2 of the flesh was lost. My right arm broken at wrist - Chronic Case of Impairment of Vision
13. What property, real or personal, or income, do you possess, and its gross value?
Nothing
14. What property, real or personal, did you possess in 1894, 1895, 1896, 1897, 1898 and 1899, and what disposition, if any, by sale or gift, have you made of same?
had nothing but household kitchen furniture
15. In what County did you reside during those years, and what property did you then return for taxation?
Georgia Co. in 1894, Fulton Co. in 1895, 1896, 1897, 1898, 1899, & 1900
16. How were you supported during the years 1898 and 1899? by the labor of my wife & assistance of my son & wife
17. How much did your support cost for each of those years, and what portion did you contribute therefor by your own labor or income?
Cost was little and was much less than in 1898
18. What was your employment during 1898 and 1899? What pay did you receive in each year?
had no employment - was unable to work
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead?
the family but a wife, whose health is quite bad
20. Are you receiving any pension? If so, what amount and for what disability?
none
21. Have you ever made an application for pension before?
No
22. How many applications have you ever made and under what class?
1 only

Sworn to and subscribed before me this 1st day of Feb 1900

W. L. Lindsey Applicant
John W. Lindsey Commissioner of Pensions
of *Fulton* County

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Blythe COUNTY,

M. L. Harris of said State and County, having been presented as a witness in support of the application of W. L. Mason for pension under Section 1254, Code, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? M. L. Harris, Blythe Co.

2. Are you acquainted with W. L. Mason, the applicant; if so, how long have you known him? Yes. 40 years

3. Where does he reside, and how long and since when has he been a resident of this State? Blythe Co. Ga. since 1861 - Has resided in Blythe Co. Ga.

4. When, where and in what company and regiment did he enlist, and how do you know?

March 1864 - Co. B. 63. Regt. Ga. Vol. - Was present at time

5. Were you a member of the same company and regiment? Yes.

6. How long did he perform regular military duty? From date of enlistment to close of war.

7. When and where was his command surrendered? General Sherman's army at Close of war. Where I do not personally know

8. Were you present when it surrendered? No.

9. Was applicant present?

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

When did he leave his command? For what cause?

By what authority he left? How do you know all of this?

11. What property, effects or income has the applicant? (Give your means of knowledge.)

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?

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

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

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

16. How was he supported during the years 1898 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 under Section 1254, Code?

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

Sworn to and subscribed before me, this 25 day of August, 1900.

M. L. Harris Witness.

John W. Leach Ordinary.

John W. Leach Ordinary.

John W. Leach Ordinary.

John W. Leach Ordinary.

John W. Leach Ordinary.

John W. Leach Ordinary.

John W. Leach Ordinary.

John W. Leach Ordinary.

John W. Leach Ordinary.

John W. Leach Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Lawson COUNTY,

Personally came before me E. Griffin and M. B. Martin, both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully W. L. Mason, applicant for pension under Section 1254, Code, and after such personal examination say that his precise physical condition is as follows: General

disability & total loss of sight.

Eyes affected in left eye & foot.

& general health bad.

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

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

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

M. B. Martin Ordinary.

E. Griffin Ordinary.

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1901.

[L. S.]

Executed in presence of _____

Mason W. L.
Clinton County

COURT SECTION 154
(For Those Already Enrolled.)

No. *462*

INDIGENT

SOLDIER'S PENSION.
1901.

Name *W. L. Mason*
County *Clinton*

WARRANT ISSUED

July 14 1901.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. L. M.

Geo. W. Harrison, State Printer, ALBANY

no data

STATE OF GEORGIA

FOR APPLICANTS HEREABOUTS ALLOWED PENSIONS

For Applicants Heretofore Allowed Pensions.

STATE OF GEORGIA,

Sulton County.

Personally appears W L Mason of Sulton County, State of Georgia, who being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the 14 day of March 18 86; that he is 60 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Geo) during the war between the States, and served for the term of 4 years in Company B, of 63 th Regiment of Geo; that his physical condition is as follows:

General debility

that his property consists of the following items _____

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1901. I have heretofore as a resident of Sulton county been allowed a pension for the year 1 first time

Sworn to and subscribed before me, this the 10 day of Jan 1901, W. L. Mason

John R. Wilkinson Ordinary.

STATE OF GEORGIA,

Sulton County.

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

Given under my official signature and seal, this 10th day of Jan 1901.

John R. Wilkinson Ordinary Sulton County.



NOTE.—The blank spaces in last be filled.

NOTE.—Affidavit should not be attested before January 1st, 1901.

STATE OF GEORGIA,

County.

I, _____ hereby authorize _____

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1902.

—[L. S.]

Executed in presence of

Marion W. L.
Fulton Co.

CODE SECTION 134.
(FOR THOSE ALREADY ENROLLED.)

No. 29

INDIGENT

SOLDIER'S PENSION 1902.

Name W. L. Latham
County Fulton,

Fulton,

County _____
Co. B Regiment 63 89

Co. B Regime _____

WARRANT ISSUED

1/14 1902.

JOHN W. LINDSEY,

Commissioner of Revenue:

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Atlanta.

MR. Carter

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.
Personally appears W. L. Mason of Fulton

County, State of Georgia, who being duly sworn, says on oath that he is a bona fide citizen and resident of said County and State, and has resided in said State continuously ever since the 14 day of March 1896; that he is 66 years old and by occupation a farmer that he enlisted in the military service of the Confederate States (or of the State of Ga) during the war between the States, and served for the term of 4 yrs in Company B, of 63d Regiment of Ga; that his physical condition is as follows: Good

that his property consists of the following items

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

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

Sworn to and subscribed before me, this the _____ day of JAN 13 1902, W. L. Mason Ordinary.

STATE OF GEORGIA,
County.

I, John R. Wilkins Ordinary of said County,

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

Given under my official signature and seal, this _____ day of JAN 13 1902, John R. Wilkins Ordinary _____ County.

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

Personally before me Edward G. W. Mason
and J. A. Dickson who being sworn
say that they are personally and intimately
acquainted with W. L. Mason of said County
and know that he has been in the State
even since the close of the late Civil war
acting as a Planter. And they know
that he has no property effects or
income, they know of no person known
his condition & whereabouts constantly and
during this period.

3rd Applicant has no occupation and his physical condition is bad

5th Applicant was supported during the years 1898 & 1899 by the labor of his wife & the assistance of his son & his wife
6th He was unable to work during these years to earn anything, & he had no income

We the undersigned being duly sworn
each say - That at the time of the close
of the war between the States in 1865
Wm. Mason was at his home on Furlow
(in Henry County Ga) we know that
he had been in the Service of the Confederacy
- that on account of his foot being
partly mangled off was allowed to remain
at home on Furlow, we don't know
who issued the Furlow but noticed
that same was issued from Madison
Ga.

L. P. Dickson
J. V. Goss

I, the undersigned, Clerk of said County do
 Certify that G. A. Dickson & V. Ross
 are Citizens of New York & Co. & that the
 Statute to them be relied upon
 with full faith & credit.
 Given & subscribed View under my
 before me at New York & seal of office
 Oct 8th 1907

SSWenas
Ordling H Co Co

7th The Applicant is about 60th years
of age, & quite infirm, - has lost his right
eye, had his left leg broken, part of his
left foot mashed off, right arm broken
at the wrist & Complaints of liver trouble.

We have no pecuniary interest
in the recovery of Pension by this Applicant.

Sworn to & Subscribed
before me this 27th day
of August 1900.

This attestation as to F. W. Mason
(L. A. Dickson of this) - L. A. Dickson
County,

W. W. Williams Ordng. Henry Co. Ga

W. W. Williams, Attorney at Law, Fulton County, Ga. J. W. Mason
Sept 20 1900

Ordng. office Henry Co. Ga

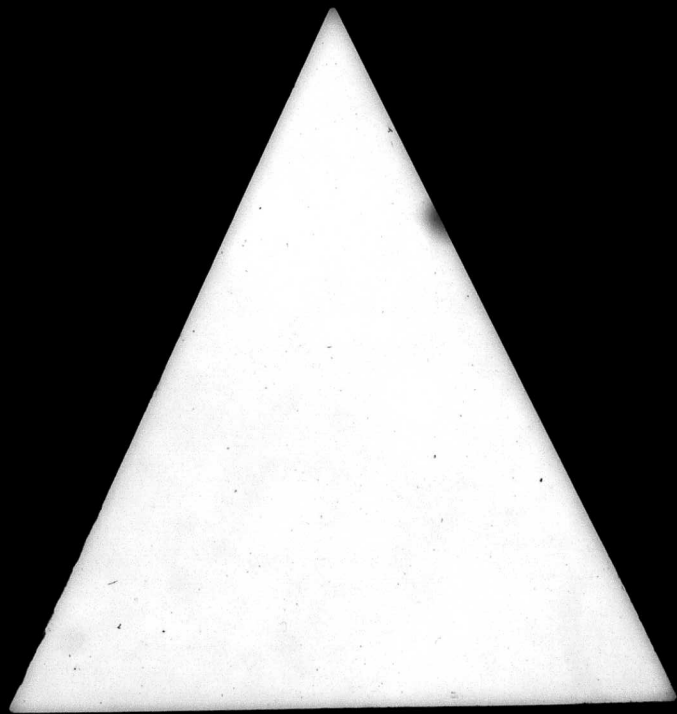
August 27th 1900

I W. W. Williams Ordng. of said County Ga
do Certify that L. A. Dickson who
is of trustworthy character, his
statements are worthy of full
faith & credit, & that he was
duly sworn before me to this
affidavit.

Witness my hand & seal of
office.

W. W. Williams
Ordng.

del. came before me to this
affidavit.
witness my hand & seal of
office.
H. H. H. H.
Ordery



POWER OF ATTORNEY.

STATE OF GEORGIA.

County.

herby authorize

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

Witness my hand and seal this

day of

1897.

Executed in presence of

Pension Office 5/21/1897
Further proof of poverty
is required - See last
return for 1896 -

Witnesses to infirmity
have not been certified
to the trust society

Richd. M. Linn
Clerk of Pennington

1897
I have been notified
that the State is
not to be paid
the same of property and
not to be paid
the same of property and
not to be paid
the same of property and
not to be paid

Warrant, No. 1
Bullock County

No.

INDIGENT PENSION

1897.

1900

Name

Co. 56 1/2

County

Fullan Co

14 Barton St

City

Approved

1897

WARRANT HANDED TO

103/1-1910

SEN. V. BARRON, STATE PRINTER, ATLANTA.

249 97

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me D. L. P. Phillips M.D. and C. R. Giles M.D., both known to me as reputable physicians of said county, who being severally sworn, say on oath that they have examined carefully Stellie's applicant for pension under the Act of 1894, and after

such personal examination say that his precise physical condition is as follows:

Suffer from Chronic Ocular and
Arterial Rheumatism contracted during young years
gave rise to pain in the heart caused by these
light attacks of paralytic Rheumatism of the whole body. Nervous
prostration and does not feel well at times.

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 21 day of July 1897. D. L. P. Phillips M.D.
C. R. Giles M.D.
W. H. Kelley Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, W. H. Kelley, Ordinary in and for said County, hereby certify that the applicant Willie Williams 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: Wm. P. Ford D. L. P. Phillips C. R. Giles 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 heron prescribed, and that the full text of the affidavits was read to the applicant and witnesses before same was signed.

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1895, \$1000 in Atlanta Ga dollars of property, and in 1896, \$1000 Fulton Co dollars of property.

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

Witness my hand and seal of office, this 22 day of July 1897.

W. H. Kelley Ordinary
of Fulton County.

NOTE.

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

QUESTIONS FOR WITNESS.

STATE OF GEORGIA

Fulton County.

Oliver P. Ford, of said State and County, having been presented as a witness in support of the application of Willie W. Mason 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? Oliver P. Ford
East Atlanta Dekalb Co Ga
2. Are you acquainted with Willie W. Mason, the applicant, is of how long have you known him? yes - ever since 1862
3. Where does he reside, and how long has he been a resident of this State? in Atlanta Fulton Co Ga all of his life birth up to the time
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? yes, he did serve in Confederate army I was in Co K 36 Ga Veterans with him
5. When, where and in what company and regiment did he enlist? May 2 - 1862 at Atlanta Ga, in Co K 36 Ga Volunteers
6. Were you a member of the same company and regiment? I was
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? about three years he was a faithful soldier, always at his post he was Paroled at High Point N.C. after the surrender of the Confederate army
8. What property, effects or income has the applicant? (Give your means of knowledge.)

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same?

10. What is the applicant's occupation and physical 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 those 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? None whatever

Sworn to and subscribed before me, this 21 day of July 1897. Oliver P. Ford Ordinary
W. H. Kelley Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton County.

Personally came before me, D. S. Phillips M.D. and C. B. Giles M.D., both known to me as reputable physicians

of said county, who being severally sworn, say on oath that they have examined carefully W. Mason, applicant for pension under the Act of 1894, and after

such personal examination say that his precise physical condition is as follows:

Suffer from Chronic Muscular and
Articular Rheumatism contracted during years of
your worse. Pain in the head constant headache. Three
light attacks of paralysis Rheumatism afflicts whole body. Nervous
Prostration, and does not feel well at times.

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 21st day of January 1897.

D. S. Phillips M.D.
C. B. Giles M.D.

Ordinary.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, W. H. Hickey, Ordinary in and for said County, hereby certify that the applicant Willie M. Mason 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: D. S. Phillips M.D. and C. B. Giles M.D. are of trustworthy character and that their statements are entitled to full faith and credit.

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

I further certify that the tax digests of Fulton County show that applicant returned for taxation in his name in 1895, \$3.50 in DeKalb Co dollars of property, and in 1896, \$100.00 in Fulton Co dollars of property.

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

Witness my hand and seal of office, this 22 day of May 1897.

W. H. Hickey Ordinary

of Fulton County.

NOTE.

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

Questions Applicant.

STATE OF GEORGIA,

Fulton County.

Willie M. Mason of said State and County, desiring to avail himself of the Pension Act approved December 16th, 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) Willie M. Mason, Atlanta Ga. 14 Parkway St
2. Where did you reside on January 1st, 1894, and how long have you been a resident of this State? in DeKalb Co Ga, all of my life
3. When and where were you born? 17 October 1841 in DeKalb Co Ga
4. When and where and in what company and regiment did you enlist or serve? enlisted in May 1862 - 1st Va Cavalry Co. in Va. K. Co. Va. Cavalry
5. How long did you remain in such company and regiment? until the summer was mustered out of service at High Point N.C. after the surrender of Confederates
6. For how long a period did you discharge regular military duty? About three years
7. When, where and under what circumstances were you discharged from service? at High Point N.C. in June 1865
8. What is your present occupation? Nothing except Redding
9. How much can you earn (gross) per annum by your own exertions or labor? in DeKalb Co. in 1895
10. What has been your occupation since 1865? Farming
11. Upon which of the following grounds do you base your application for pension, viz: first "age and poverty," second "infirmary and poverty" or third "blindness and poverty"? Impaired & Poor
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? General Nervous Prostration, Muscular & Articular Rheumatism have been afflictive since was in service, and as age grows complaint increases & Paralysis
13. What property, effects or income do you possess and its gross value? Nothing
14. What property, effects or income did you possess in 1894, 1895 and 1896 and what disposition, if any, did you make of same? in 94 & 95 - about \$600.00 in 1896 nothing. It was all sold under mortgage held by Mrs. M. H. Hickey of DeKalb Co
15. In what County did you reside during those years and what property did you then return for taxation? in DeKalb Co in 1894 & 1895 in Fulton 1896 - in 94 & 95 - \$3.50 in 1896 \$100.00
16. How were you supported during the years 1895 and 1896? in 95 by a little crop in 1896 by my children's labor
17. How much did you support cost for each of those years, and what portion did you contribute thereto by your own labor or income? in 1895 and 1896 about \$120.00 in 1897 \$200.00
18. What was your employment during 1895 and 1896? What pay did you receive in each year? in 1895 Farming in 1896 Redding when able about \$250.00
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? yes self and wife & one child under age 14 years wife & child wife keeps on a few boarders wife & child do not earn any money
20. Are you receiving any pension, if so what amount and for what disability? none whatever

Sworn to and subscribed before me this the 18 day of May 1897.

W. H. Hickey Ordinary.

of Fulton County.

Applicant.

Every Question MUST be Answered

POWER OF ATTORNEY.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

of

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

at

by

Witness my hand and seal this _____ day of _____ 1897.

Executed in presence of

QUESTIONS FOR WITNESS.

STATE OF GEORGIA

Fulton County.

Oliver P. Ford

of said State and County, having been presented

as a witness in support of the application of Willis W. Mason 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? Oliver P. Ford
East Atlanta - DuSalle Co Ga
2. Are you acquainted with Willis W. Mason, the applicant, is of how long have you known him? Yes - ever since 1862
3. Where does he reside, and how long has he been a resident of this State? in Atlanta Fulton Co Ga - all of his life birth up to the time
4. Do you know of his having served in the Confederate army or the Georgia militia? How do you know this? Yes, he did serve in Confederate Army I was in Co. K. 36th Ga Vol. with him
5. When, where and in what company and regiment did he enlist? May 2 - 1862 at Atlanta Ga, in Co. K. 36th Ga Volunteers
6. Were you a member of the same company and regiment? I was
7. How long did he perform regular military duty, and what do you know of his service as a Confederate soldier, and the time and circumstances of his discharge from the service? About three years he was a faithful soldier, always at his post he was Paroled at High Point N.C. after the surrender of the Confederate Army
8. What property, effects or income has the applicant? (Give your means of knowledge.)

9. What property, effects or income did the applicant possess in 1895 and 1896, and what disposition, if any did he make of same?

10. What is the applicant's occupation and physical 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 those two years was derived from his own labor or income?

14. Give a full and complete statement of the applicant's physical condition that entitle 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? Name whatever

Sworn to and subscribed before me, this _____ day of _____ 1897.

Oliver P. Ford att. 2.

Ordinary.

12, 5, 5, 5, 7, 13

*Pension Office 5/21/1897
Further proof of poverty
his expense - see list
return for 1896 -
Witness to indigency
has not been certified
to be true indigency
Pick up pension
and of Pension
10/10-1910*

INDIGENT PENSION

1897-1900

*Willis W. Mason
Co. K. 36th Ga
Fulton Co
10 Factors at
v. 6*

WARRANT HANDLED TO

10/10-1910

24 97

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____

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

Witness my hand and seal, this _____ day of _____ 1902.

[L. S.]

Executed in presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 367

INDIGENT

SOLDIER'S PENSION

1902.

Name W. W. Mason

County Fulton

Co. 2d Regiment

WARRANT ISSUED

114

1902.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. W. Mason

Gen. W. H. HARRIS, State Prison, Atlanta.

W. W. Mason

Fulton Co.

(FOR THOSE ALREADY ENROLLED)

No. 1307

INDIGENT

SOLDIER'S PENSION

1907.

Name W. W. Mason

County Fulton

Co. 2d Regiment

WARRANT ISSUED

1307

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

W. W. Mason

Gen. W. H. HARRIS, State Prison, Atlanta.

W. W. Mason

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, W. W. Mason, hereby authorize E. M. Hanson of Atlanta, Fulton Co. Ga. to receive and receipt for the pension allowed, and request that he remit same to W. W. Mason at Atlanta, Ga. by _____

Witness my hand and seal, this 23rd day of January 1907.

[L. S.]

Executed in presence of

W. W. Mason
E. M. Hanson
W. W. Mason

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County,

Personally appears W. W. Mason 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 birth day of 18; that he is 57 years old and by occupation a carpenter that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company A of 36th Regiment of Georgia; that his physical condition is as follows:

Gene debility

that his property consists of the following items:

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

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

Sworn to and subscribed before me, this the 31 day of JAN 1902.

W. W. Mason

STATE OF GEORGIA,

Fulton County,

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

ALL
YOUR
SEAL
HERE

John P. Wilkinson

Ordinary Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Fulton County,

Personally appears W. W. Mason 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 15th day of March 1871; that he is 62 years old and by occupation a carpenter that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company A of 36th Regiment of Georgia; that his physical condition is as follows: Infirmity + poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1902. I have heretofore, as a resident of Fulton County, been allowed a pension for the year 1900.

Sworn to and subscribed before me, this the 31 day of JAN 1902.

W. W. Mason

State of Georgia,

Fulton County,

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

Given under my official signature and seal this 23 day of JAN 1902.

ALL
YOUR
SEAL
HERE

John P. Wilkinson

Ordinary Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____

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

at _____

by _____

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

Executed in presence of _____

[L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize _____ of _____

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

at _____

by _____

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

Executed in the presence of _____

[L. S.]

NAME, W. W. MASON, Fulton County, Ga.

CODE SECTION 124.

(FOR THOSE ALREADY ENROLLED.)

No. 120

INDIGENT

SOLDIER'S PENSION
1903.

Name W. W. Mason

County Fulton.

Co. K Regiment 36th

WARRANT ISSUED

1/20 1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. W. Mason

Gen. Harrison, State Printer, Atlanta.

no date

(FOR THOSE ALREADY ENROLLED.)

No. 156

INDIGENT

SOLDIER'S PENSION
1904.

Name W. W. Mason

County Fulton.

Co. K Regiment 36th

WARRANT ISSUED

1/20 1904

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

W. W. Mason

Gen. W. Harrison, State Printer, Atlanta.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears W.W. Mason 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 March 18____; that he is 58 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 yrs in Company 4, of 36th Regiment of Geo. Vol; that his physical condition is as follows: I & P

that his property consists of the following items: _____

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

Deponent desires to participate in the benefits of the Act, approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1903. I have heretofore as a resident of Fulton 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, John M. Wilkinson Ordinary of said County, do certify that I am well acquainted with W.W. Mason the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know he is the individual he represents himself to be and that he resides in this County.

Given under my official signature and seal, this _____ day of JAN 20 1903.



John M. Wilkinson Ordinary _____ County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears W.W. Mason 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 March 18____; that he is 58 years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of _____) during the war between the States, and served for the term of 3 yrs in Company 4, of 36th Regiment of Geo. Vol; that his physical condition is as follows: I & P

that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the _____ day of JAN 20 1904. _____ Ordinary.

STATE OF GEORGIA,

_____ County.

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

Given under my official signature and seal, this _____ day of _____ 1904.



John M. Wilkinson Ordinary _____ County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of

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

by _____

WITNESS my hand and seal, this _____ day of _____ 1905.

[L. S.]

Executed in the presence of _____

OUR SECTION 134.
(FOR THOSE ALREADY ENROLLED.)

No. 3785

INDIGENT

**SOLDIER'S PENSION
1905.**

Name H. H. Mason

County _____

Co. 1st Regiment 3rd Div.

WARRANT ISSUED

1/15 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

AMH

THE FARMERS' PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize

of

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

by _____

WITNESS my hand and seal, this _____ day of _____ 1906.

[L. S.]

Executed in the presence of _____

OUR SECTION 134.
(FOR THOSE ALREADY ENROLLED.)

No. 57

INDIGENT

**SOLDIER'S PENSION
1906.**

Name H. H. Mason

County Fulton

Co. 1st Regiment 3rd Div.

WARRANT ISSUED

1/17 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

AMH

THE FARMERS' PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

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

_____ at _____
by _____

WITNESS my hand and seal, this _____ day of _____, 1905.

[L. S.]

Executed in the presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 345

INDIGENT
SOLDIER'S PENSION
1905.

Name *H. H. Mason*

County

Co. *3d Regt 34th Regt.*

WARRANT ISSUED

11/15 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

MH
THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

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

_____ at _____
by _____

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

[L. S.]

Executed in the presence of _____

(FOR THOSE ALREADY ENROLLED.)

No. 57

INDIGENT
SOLDIER'S PENSION
1906.

Name *H. H. Mason*

County *Fulton*

Co. *3d Regt 34th Regt.*

WARRANT ISSUED

11/17 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

MH
THE FRANKLIN PRINTING AND PUBLISHING CO., ATLANTA, GA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears W. H. Mason of Fulton

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18____; that he is _____ years old and by occupation a _____, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company A, of 36th Regiment of Cal. Inf.; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the 21 day of JAN 1905.

Ordinary.

STATE OF GEORGIA.

Fulton County.

I, _____ Ordinary of said County, do certify that I am well acquainted with W. H. Mason the applicant in the foregoing affidavit and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____ 1905.

Ordinary Fulton County.

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



FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears W. H. Mason 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 21 day of his life 18____; that he is 62 years old and by occupation a none, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 3 yrs in Company A, of 36th Regiment of Cal. Inf.; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: has no property

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

Deponent desires to participate in the benefits of the Act approved December 15th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1908. I have heretofore, as a resident of _____ County, been allowed a pension for the year 1905.

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

Ordinary.

State of Georgia,

County.

I, _____ Ordinary of said County, do certify that I am well acquainted with W. H. Mason the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 _____ 1906.

Ordinary Fulton County.

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



GEORGIA

Fulton County.

I, John W. Lindsey Ordinary of said county, do certify that I personally know Mrs. W. C. Mason, the applicant, and that she is the lawful widow of W. C. Mason, and was on the Indigent Pension Roll of said Fulton county, and was paid a Pension from Fulton county for 1907, and at the time of his death on the 31 day of June 1908, there was due to him and unpaid his Pension of Eighteen dollars from the State of Georgia, and I know John W. Lindsey, the within

witness, and he is of a truthful and trustworthy character and entitled to full credit.

Given under my hand and seal this 9th day of Dec 1908
John W. Lindsey Ordinary.
Fulton County.

Mason, W. C.

Fulton County

No.

190

Application for Pension

Due Deceased Soldier

Under Act 1891.

BY

W. C. Mason

Widow of W. C. Mason

of County Fulton

Co. _____ Reg't _____ Vols. _____

Approved and Paid

J. W. LINDSEY

Commissioner of Pensions.

190

GEORGIA, _____ County.

I hereby authorize and constitute _____ of said county, my lawful attorney to collect and receipt for me in my name the Pension due me for 190 _____ through my deceased husband _____, who was on _____ Pension Roll and paid from _____ for 190 _____.

Witness my hand this _____ day of _____ 190 _____.

Attested before me:

APPLICATION FOR PENSIONS DUE DECEASED SOLDIER.

UNDER ACT APPROVED OCTOBER 9, 1891.

STATE OF GEORGIA, Newton County.

Personally before me come Mrs. L A Mason, of said county, after being duly sworn, on oath says that she is the widow of W W Mason who was duly enrolled as a Sergeant Pensioner from the county of Fulton and was paid a Pension of Sixty Dollars from Fulton county for 1907, and that the said W W Mason died in Guinn county on the 31st day of June 1907, and at the time of his death a Pension of Sixty was due him from Fulton county and unpaid for 1908. Applicant further swears that she married the said W W Mason on the 16th day of October 1866, in Guinn county and State of Georgia and resided with him from date of marriage to his death as his lawful wife, and is now his dependant widow, and she asks that the Pension so due and unpaid be paid to her.

Sworn to and subscribed before me this 8th day of Dec 1908
By J Heard ORDINARY L A Mason [L. S.]
Newton County.

AFFIDAVIT OF WITNESS.

GEORGIA, Fulton County.

Personally before me come J Jager, who on oath says that he knew W W Mason while in life and that he knows Mrs. L A Mason, the above applicant; that he knows that the said W W Mason and L A Mason were in due form of law married in the county of Guinn in the State of Georgia on the 16th day of October 1866, and that they resided together as husband and wife from date of marriage to the day of his death on the 31 day of June 1908, and I now know that she is his dependant widow.

Sworn to and subscribed before me this 9th day of Dec 1908
John H. Jager ORDINARY L A Mason
Fulton County.

State of Georgia Personally Came
 Swinnett Co H. B. Johnson before
 me J. P. Webb Ordinary in and for
 Swinnett County, who deposes and says
 on Oath that he has been personally
 acquainted with Mr Willis W. Mason for
 and during a period of Twenty Years
 and that I have frequently been called
 in to his family as a family Physician
 and have treated said Mason at
 divers times for Nerves, Rheumatism, Cough,
 Muscular & Anterior,
 and further avers that said afflictions
 have wrought in his case, Lame, Nerve
 Prostration, rendering said Patient unable
 to do ordinary Manual Labor since I have
 known him -

I further avers that I am a regular
 Practising Physician

John D. Webb
 Ordinary
 Subscribed to and
 Subscribed to this

Jan 20 1899
 John D. Webb
 Ordinary

H B Johnson

(LS)

over

State of Georgia Personally Came
 Swinnett Co William S. King before
 me J. P. Webb Ordinary in and
 for Swinnett County, who deposes and
 says on Oath that he has known
 Mr Willis W. Mason from boyhood up
 to the time of the late war between the states,
 and knows of his own personal knowledge
 that said Willis W. Mason was an unusual
 ly strong, healthy, and robust young
 man - defendant further swears that he
 served in Company - K - 36 Regiment Ga Vol-
 unters, that Mr Willis W. Mason at one time
 had a severe case of Measles from which
 he has never recovered - and that said
 Mason served as a soldier, and was
 also a Member of Co "K" 36 Ga Regiment
 and further avers that I know said
 Willis W. Mason ever since the war and that
 his afflictions are such that he cannot
 earn a living by Manual Labor since
 he was discharged at the surrender of the confed-
 erate Army

Sworn to and
 Subscribed before
 me this Jan 20 1899
 John D. Webb
 Ordinary

W. S. King

(LS)

over

State of Georgia
Sumner County I do hereby certify
that Dr H. B. Johnson the affiant to the
above affidavit is of Trustworthy character
and that his statements are entitled to full
faith and credit.

John P Webb Ordinary
Sumner County

State of Georgia
Sumner County I do hereby certify
that Mr W. S. King the affiant to the
above affidavit is of Trustworthy character
and that his statements are entitled to
full faith and credit.

John P Webb Ordinary
Sumner County

State of Georgia } Personally came before
 Felton Co } Me S. L. Massey and
 George C. Corner who being duly sworn
 depose and say an oath that they each
 of them are personally acquainted with and
 have known Mr. Willis W. Mason for a
 number of years, and we here by answer
 Question No's 8, 9, 10, 11, 12, & also 13, 14, 15, as
 proposed to witness an affg. 2. of applicant
 fiction for pension

Ques. 8. What property or income has the applicant?
 ans - he has no property.

" 9 - What Property, effects or income did the
 applicant possess in 1845 & 1846, and what
 disposition, if any, did he make of same
 ans - in 1845. I S. L. Massey held a mortgage of \$8600.00
 on small tract of land, against the said Mason, there was
 no foreclosure, land sold, and mortgage Paid. 2 in
 1846 No property

" 10 - What is the applicant's occupation, and physical
 condition

ans - Farming - his health is very greatly
 impaired, is not able to do manual labor

" 11 - Is the applicant unable to support himself by
 labor of any sort, if so, why?
 ans - We know that he is not, by reason of
 bad health,

Ques - 12 - How was he supported during the years
 1845 and 1846 -

ans - during 1845 he was supported by the labor
 of his children, on Farm rented
 in 1846 He can safely say by his children
 or child 14 years old

" 13 - What portion of his support for those two
 years was derived from his own labor, or
 income, Very little if any, it was impos-
 sible for him to have earned more than \$1500.00
 " 14 - Give a full and complete statement of
 the applicant's physical condition that
 entitles him to a pension under Act of
 December 15th 1847?

Ans - We know from personal observation and
 acquaintance that Mrs. Mason is suffering from
 a combination of Rheumatism, Lung, & spinal
 troubles, which produce a General broken
 Constitution

" 15 - Name, who test

Sworn to and subscribed }
 he for me } S. L. Massey
 This Jan 22 - 1847 } S. C. Corner
 W. Massey }
 or any }

State of Pa
Vulph County

W. Deal, of said State
County, having been
presented as a witness in support of
the allegations of W. H. Pearson for Indian
under section 1254 Code, and after
being duly sworn true answers to
the following questions,
deposes and answers as follows:
I know the allegations W. H. Pearson
about lots 40 & 41, I know that
he has two properties of one kind
relation and two trunks, he is
single, and an invalid, and
dependent upon others for support.
That little property he had had
all been used up in living, and
in a city of age and disease he is
perfectly helpless.

Subscribed and sworn to before me this 10th
day of December 1900.

J. M. Deal

Witness
J. M. Deal

Notary Public
Noting that W. H. Pearson is a witness
of good faith and credit and that
he has been duly sworn true answers to
the following questions, I have the honor
to certify that he is a witness of good
faith and credit and that his statements
are true and correct.
on 10-1-1901

State of Georgia
County of I. M. H. Hulsay, ordering
him by certify that the witnesses
J. L. Mealy, and George C. Lerner are of
Trustworthy Character, and that their statements
are entitled to full faith and credit.

J. M. Hulsay
Notary

STATE OF GEORGIA,
FULTON COUNTY.

Ordinary's Office, Atlanta, January 23-1908.

I, John P. Wilkinson, Ordinary of said County,
certify that *O. B. Prescott* *whose genuine*
official signature appears to the annexed paper, was at the time of
said signing an acting Justice of the Peace, in and
for said County, duly sworn and commissioned, and that his com-
mission was date the 15th day of December 1904
and will expire on the 1st day of January 1908,
and that all his official acts as such are entitled to full faith and
credit.

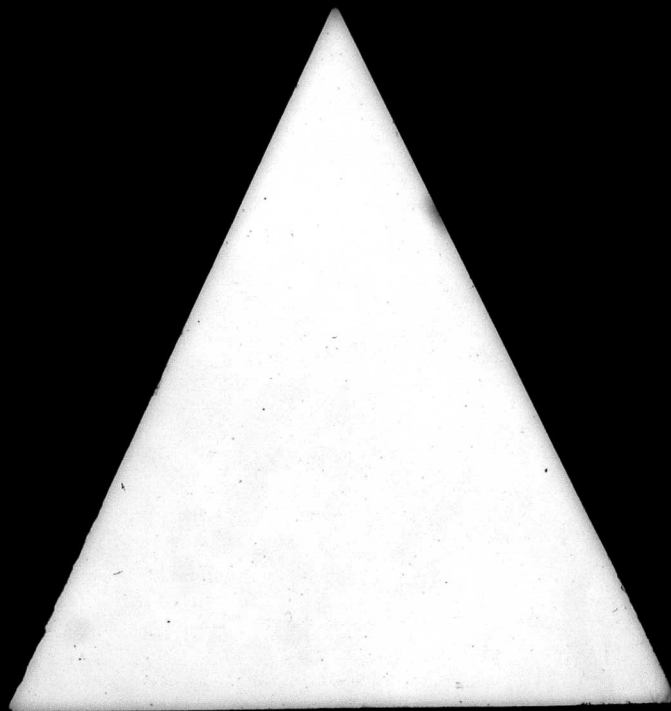
Given under my official signature and seal of office, the day and year
above written.

John P. Wilkinson
ORDINARY.

credit.

Given under my official signature and seal of office, the day and year
above written.

John R. Wrennison
ORDINARY.



POWER OF ATTORNEY.

STATE OF GEORGIA,)
Fulton County,)

Know all Men by these Presents, That I,

E. A. Massey

of

Fulton

County,

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

12 day of June, 1891.

[L. s.]

Executed in the presence of us:

Wm. H. Chapman
Wm. H. Chapman
DIRECTOR

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

Massey, E. A. Mrs.
Fulton County
1891.

No. 3126

Widows' Pension

— PAID TO —

Mrs. E. A. Massey

— OF —

Fulton

COUNTY.

\$100.00.

Warrant Issued

1891

AND HANDED TO _____

POWER OF ATTORNEY.

Form No. 5.

STATE OF GEORGIA,

Fulton County.

Know all Men by these Presents, That I,

E. A. Massey

of Fulton

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

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 12 day of June, 1891.

E. A. Massey [L. s.]

Executed in the presence of:

Wm. L. Coleman
Wm. L. Coleman
DIRECTORS

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



State of Georgia, New Prison, Atlanta

AND HANDED TO

1891

Warrant Issued

\$100.00.

Fulton COUNTY.

Wm. L. Coleman

Widows' Pension

PAID TO

No. 8126

1891.

Massey, E. A. Massey
Fulton County

Affidavit to be Made by the Widow.

Form No. 1.

STATE OF GEORGIA,

County of Fulton,

In person came before me, the undersigned Ordinary

Mrs. E. A. Massey, who being sworn according to law, says under oath that she is the widow of William Massey, who was a soldier in

the service of the Confederate States, and served as a member of Company No of the 14 Regiment of Georgia Volunteers; that he enlisted in said

service on or about the 15 day of August, 1861, and was in the Confederate Army up to May 9, 1862. That while in the

Army, he was on the _____ day of _____, 1861. (See Note No. 1)

My husband was a stout healthy man when he enlisted in the service and from exposure he contracted Pneumonia and it turned to Typhoid and he died in a Hospital in Petersburg Virginia on May 9th 1862 and I his wife was by his side when he died. This is what the Physicians said at the was the cause of his death.

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 8 day of October, 1852, and that she has resided in Georgia continuously since the 1 day of January, 1854; that Georgia is her home, and was such on the 23d day of December, 1890, and since said date she has not lived in any other State or locality. Deponent, as the widow of said deceased soldier husband, applies for the pension provided by Act of the General Assembly of Georgia, approved December 23d, 1890, for the pension year ending February 15th, 1891, and herewith tenders the proof of her right to receive the allowance granted by said Act.

Sworn to and subscribed before me, this, the 29 day of April, 1891.

E. A. Massey

Ordinary.

33

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

Affidavit for Three Witnesses.

Form No. 2.

State of Georgia,

County of Gwinnett

and W. H. Hazzie
W. H. Hazzie

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

Mrs. E. A. Mapey, of the County of Hall, State of Georgia, is the widow of William Mapey, who was a soldier in Company 46 of the 16th Regiment of Georgia Volunteers.

That said soldier enlisted in the service of the Confederate States (or the Georgia State Troops) on or about the 11th day of August, 1861. That while in said service, or by reason of said service in the Army, he lost his life as follows:

He died and Mr. H. Hazzie, each says
that they saw the company with said soldier and that
he was taken sick and sent off to the hospital
his death was reported to the company, he never
came back to his company nor returned to his
home. The Applicant said the wife of said soldier
during his term of service and has not returned
since his death.
He was taken sick and sent off to the hospital
and died.
W. H. Hazzie
James L. Hazzie
Ordinary

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

We further swear that Mrs. E. A. Mapey was the wife of said soldier during the service, and that she has not remarried since his death, and that she resides in Hall County of the State of Georgia.

Sworn to and subscribed before me, this, the 26th day of May, 1891.
James L. Hazzie
Ordinary.

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

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

Form No. 3.

State of Georgia,

County of Hall

I, W. H. Hazzie Ordinary

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

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 11th day of June, 1891.

W. H. Hazzie
Ordinary.

Form No. 4.

NOTES.

The pension is only payable to certain classes of widows.
Those whose husbands were killed in service.
Those whose husbands died in the army of wounds or disease contracted in the service.
Those whose husbands went to the army and have never been heard from since the war.
Those whose husbands were wounded in the army and have since died from the direct effects of the wounds.
Those whose husbands contracted disease in the service, and who after the war, died of the disease caused by the service. The disease directly causing the death.
No widow is entitled unless she was the wife of the soldier during the war, and has never remarried.
The law does not provide for any one living out of the State of Georgia, or who did not live in the State at the date of the Act.
The facts to establish a claim must be substantiated by the testimony of three witnesses who personally know of the enlistment of the husband and his death and the immediate cause of the death.
Widows who have married since the service of their husbands in the army are not entitled.
There is no need of employing a lawyer or other agent to attend to these claims. The Department will furnish full and specific instructions, and give ample opportunity to every claimant.
If witnesses live in another County from that wherein applicant resides, they must go before the Ordinary of their County and testify. The attestation of a Justice of the Peace or Notary will not answer.
If proofs must be made out of the State, the witnesses must be sworn before a Judge of a Court of Record under seal, and the witnesses must be certified to as reliable, and that their signatures are genuine.
Fill out Power of Attorney authorizing some one who can call at Treasurer's office in Atlanta and receive the money, to receipt for same.
Fill out the "directions" below Power of Attorney, so that your Agent will know where and how to send the money.
By order of the Governor.

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

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

Form No. 2.

STATE OF GEORGIA, County of Fulton

I, M. L. Calhoun Ordinary in and for said County of Fulton State of Georgia, hereby certify that I am acquainted with Mrs. E. A. Hassel 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, 1850, and has not lived out of the State since that date. That she is the widow of William Hassel deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1893.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 15th day of February 1894.

M. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, County.

KNOW ALL MEN BY THESE PRESENTS, That I,

of

County in said State, do hereby appoint

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

In WITNESS WHEREOF, I have hereunto set my hand and seal, this day of _____ 1894.

Executed in the presence of us:

[L. S.]

DIRECTIONS.

Send amount by _____ to me at _____, and oblige

WIDOWS' PENSION,

No. 1566

1894.

FOR THOSE HERETOFORE PAID

Mrs. E. A. Hassel
Fulton County

for year ending February 15th, 1894.

—PAID TO—

E. A. Hassel

—OF—

Fulton County.

WARRANT ISSUED

2/6 1894.

AND HANDED TO

E. A. Hassel

Geo. W. Allen, Clerk of Court, Fulton County.

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

Personally comes Mrs.

County of

Fulton

E. A. Massay

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 January 1st 1854 That she is the Widow of

William Massay

who was a Soldier in Company

H

of the

15th

Regiment of

Georgia

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

1861 and served in the Army up to May 24th 1862 That he lost his

life on the day of 18 (State here

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

From exposure while in said army contracted Pneumonia and from the
same died in the Hospital at Petersburg Va

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

Sworn to and subscribed before me, this

1st day of February 1894.

W. L. Calhoun Ordinary.

Post-office

E. A. Massay

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

Form No. 2.

STATE OF GEORGIA, County of

FULTON

I, W. L. Galtoun Ordinary in and for said County of Fulton State of Georgia, hereby certify that I am acquainted with Mrs. E. A. Massey 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 William Massey deceased, and as such has heretofore been allowed a pension for the year ending February 15th 1892.

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

W. L. Galtoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA,

County.

Know all Men by these Presents, That I,

County, in said State, do hereby appoint

of my true and lawful attorney in fact, for me and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing 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:

DIRECTIONS:

Send amount by to me at , and oblige

Warrant Issued

AND HANDS TO

1893

WIDOW'S PENSION

— OF —

— PAID TO —

for year ending February 15th, 1893.

Widow's Pension,

210. 1/100.

1893.

FOR THOSE HERETOFORE PAID.

Moore, E. A. (Mrs)
Fulton Co.

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

Form No. 2.

STATE OF GEORGIA, County of

Fulton

I, W. L. Galtoun Ordinary in and for said County of Fulton State of Georgia, hereby certify that I am acquainted with Mrs. E. A. Massey 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 William Massey deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1894.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the 1st day of Feby 1895.

W. L. Galtoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA,

County.

Know all Men by these Presents, That I,

County in said State, do hereby appoint

of my true and lawful attorney in fact, for me, and in my name, to receive and receipt for whatever amount of money I may be entitled to from the State of Georgia as a widow of a Confederate Soldier, as stated in the foregoing 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 to me at , and oblige

WIDOW'S PENSION

No. 591

1895.

FOR THOSE HERETOFORE PAID.

Moore, E. A. (Mrs)
Fulton County

widow of

— OF —

Fulton County.

— PAID TO —

for year ending February 15th, 1895.

WARRANT ISSUED

AND HANDS TO

1895.

Moore, E. A. (Mrs)

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally comes Mrs.

E. A. Massey

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 January 1st 1884 That she is the Widow of
William Massey who was a Soldier in Company
No of the 16th Regiment of Georgia

Volunteers, that he enlisted in said Regiment on or about the month of August
 1861 and served in the Army up to May 9th 1862 That he lost his
 life on the _____ day of _____ 18____ (State here

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

From exposure while in said army
Contracted Pneumonia & from the same
died in the Hospital at Petersburg
Va

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 1887; that Georgia is her home and she resided in this State 23d day of December,
 1890, and has not lived in any other State or locality since that date. I have been allowed a
 pension for the year ending February 15th, 1892, and now apply for the allowance provided by
 law for the year ending February 15th, 1893.

Sworn to and subscribed before me, this

10th day of January, 1893.

Notary Public Ordinary.

E. A. Massey

Post-office Petersburg Va

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of FULTON

Personally Comes Mrs.

E. A. Massey

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 January 1st 1884 That she is the Widow of
William Massey, who was a Soldier in Company
No of the 16th Regiment of Georgia

Volunteers, that he enlisted in said Regiment on or about the month of August
 1861 and served in the Army up to May 9th 1862 That he lost his
 life on the _____ day of _____ 18____ (State here
 full particulars of the husband's death, when, where and from what cause.) (

From exposure while in said army contracted Pneumonia and from the same died
in the Hospital at Petersburg Va.

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 1887, that Georgia is her home and she resided in this State 23d day
 of December, 1890, and has not lived in any other State or locality since that date. I have
 been allowed a pension for the year ending February 15th, 1894, and now apply for the
 allowance provided by law for the year ending February 15th, 1895.

Sworn to and subscribed before me, this

10th day of January, 1895.

Notary Public Ordinary.

E. A. Massey

Post-office Petersburg Va

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

Form No. 2.

STATE OF GEORGIA, County of Fulton

I, W. L. Calhoun Ordinary in and for said County of

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

E. A. Massey 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 William Massey deceased, and as such has heretofore been allowed a pension for the year ending February 15th, 1895.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this day of Sept 1896.

{ SEAL } W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County.

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

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

Executed in the presence of

[L.S.]

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

Form No. 2.

STATE OF GEORGIA, County of Fulton

I, W. L. Calhoun Ordinary in and for said County of

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

E. A. Massey 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 William Massey 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 day of Sept 1897.

{ SEAL } W. L. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 3.

STATE OF GEORGIA, County.

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

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

Executed in the presence of

[L.S.]

WIDOW'S PENSION,

for year ending February 15th, 1896.

PAID TO

E. A. Massey

OF

Fulton County.

widow of William Massey

WARRANT ISSUED

Sept 1896.

AND PAID TO

W. L. Calhoun

1896.

No. 9329

FOR THOSE HEREIN PAID.

Massey E. A. (Mrs)
Fulton County

WIDOW'S PENSION,

for year ending February 15th, 1897.

PAID TO

W. L. Calhoun

OF

Fulton County.

widow of William Massey

WARRANT ISSUED

Sept 1897.

AND PAID TO

W. L. Calhoun

FOR THOSE HEREIN PAID.

Massey E. A. (Mrs)
Fulton County

For Widows Heretofore Allowed Pensions.

Form 1.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

E. A. Massey

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 January 1st 18 54 That she is the Widow of

William Massey

who was a Soldier in Company

of the 15th Regiment of Georgia

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

186 1 and served in the Army up to May 3th 186 2 That he lost his

life on the day of 18 (State here

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

From exposure while in said army contracted Pneumonia and from the same died in the Hospital at Petersburg Va.

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 57, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1895, and now apply for the pension provided by law for the year ending February 15th, 1896.

Sworn to and subscribed before me, this

5th day of Feb'y 1896.

M. L. Balkum Ordinary.

Post-office

E. A. Massey

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

E. A. Massey

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 January 1st 18 54 That she is the Widow of

William Massey

who was a Soldier in Company

of the 16th Regiment of Georgia

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

186 1 and served in the Army up to May 9th 186 2 That he lost his

life on the day of 18 (State here

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

From exposure while in said army contracted Pneumonia and from the same died in the Hospital at Petersburg Va.

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 57, that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1896, and now apply for the pension provided by law for the year ending February 15th, 1897.

Sworn to and subscribed before me, this

4th day of May 1897.

M. L. Balkum Ordinary.

Post-office

E. A. Massey

POWER OF ATTORNEY.

State of Georgia,

County, }

I, _____ hereby authorize

f _____

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

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

day of _____ 1898.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

State of Georgia,

County, }

I, _____ hereby authorize

of _____

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

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

day of _____ 1898.

[L. S.]

Executed in presence of _____

Massy, E. A. (Mrs)
Fulton County
For Time heretofore Paid

1898.

NO. 2158

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. E. A. Massy

or *Fulton* County

Widow of *Mr. Massy*

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

3/4 1898.

AND HANDED TO

affick

REG. W. HARRISON, STATE PRINTER, ATLANTA.

Massy, E. A. (Mrs)
Fulton Co
For Those heretofore Paid

1898.

NO. 845

WIDOW'S PENSION,

For year ending February 15th, 1898.

PAID TO

Mrs. E. A. Massy

or *Fulton* County

Widow of *William*

RICHARD JOHNSON,
Commissioner of Pensions.

WARRANT ISSUED

3/2 1898.

AND HANDED TO

affick

REG. W. HARRISON, STATE PRINTER, ATLANTA.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of Fulton } E. C. Massey

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 January 1st 1874 That she is the Widow of
William Massey who was a Soldier in Company
A. of the 16th Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of
1862 and served in the Army up to May 9th 1862 That he lost his
life on the day of May 1862 (State here
full particulars of the husband's death, when, where and from what cause.)

Died from pneumonia contracted
in the war

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, and that she became his wife in the year 1857.

I have been allowed a pension as a resident of Fulton County for the year ending
February 15th, 1897, and now apply for the pension provided by law for the year ending February 15th, 1898.

Sworn to and subscribed before me, this
2nd day of Dec 1898. E. A. Massey,
M. Massey Ordinary. Post-Office

State of Georgia, } W. H. Hulsey
Fulton County. } Ordinary of said County, certify that I am well acquainted
with Mrs. E. C. Massey who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the 23rd day of Dec 1870

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

Official
Seal.

Ordinary of Fulton County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA, } Personally Comes Mrs.
County of FULTON } E. C. Massey

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 January 1st 1874 That she is the Widow of
William Massey who was a Soldier in Company
H. of the 16th Regiment of Georgia
Volunteers, that he enlisted in said regiment on or about the month of
1862 and served in the Army up to May 9th 1862 That he lost his
life on the day of May 1862 (State here
full particulars of the husband's death, when, where and from what cause.)

Died from pneumonia
contracted in the war

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that
she has never married since his death aforesaid, and that she became his wife in the year 1857.

I have been 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
2nd day of July 1899. E. C. Massey
M. Massey Ordinary. Post-Office

State of Georgia, } W. H. HULSEY,
FULTON County. } Ordinary of said County, certify that I am well acquainted
with Mrs. E. C. Massey who made the above affidavit and am satis-
fied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she
has continuously resided in this State since the 23rd day of Dec 1870

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

Official
Seal.

Ordinary of FULTON County.

BOOK OF VILLORESA

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize
_____ of _____

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

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

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____ hereby authorize
_____ of _____

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

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

[L. S.]

Executed in presence of _____

Massey, Edw. C. Jr.
Fulton County
To These Herebefore Paid.

1900.

No. 981

WIDOW'S PENSION,

For year ending February 16th, 1900.

PAID TO

Mrs. E. A. Massey

or

Fulton County,

Widow of _____

JNO. W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Feb 14 1900,

AND HANDED TO

[Signature]

W. Harrison, State Printer, Atlanta, Ga.

Massey, Edw. C. Jr.
Fulton County
To These Herebefore Paid.

1901.

No. 180

WIDOW'S PENSION,

For year ending February 16th, 1901.

PAID TO

Mrs. E. A. Massey

County.

Fulton County,

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

Jan 12 1901,

AND HANDED TO

[Signature]

W. Harrison, State Printer, Atlanta, Ga.

STATE OF GEORGIA

FOR WIDOWS HEREbefore ALLOWED PENSIONS

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

E. A. Massey

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 January 1864. That she is the Widow of William Massey who was a soldier in Company H of the 16th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of 1861 and served in the Army up to 1865. That he lost his life on the 16th day of 1865. (State here particulars of the husband's death, when, where and from what cause)

Died from Pneumonia
contracted during service

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1857.

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

Sworn to and subscribed before me, this 4th day of Aug, 1900.

W. H. Massey Ordinary.

Post Office.

State of Georgia,

Fulton County.

Ordinary of said County, certify that I am well acquainted

with Mrs. E. A. Massey, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 23rd day of Dec, 1890.

Given under my official signature and seal, this 14th day of Aug, 1900.

Ordinary of Fulton County.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally Comes Mrs.

E. A. Massey

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 January 1864. That she is the Widow of William Massey who was a soldier in Company H of the 16th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of 1861 and served in the Army up to 1865. That he lost his life on the 16th day of 1865. (State here particulars of the husband's death, when, where and from what cause)

Died from Pneumonia
Contracted during service

Deponent swears that she was the wife of said deceased soldier, during his service in the army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1857.

I have been allowed a pension as a resident of Fulton County for the year ending February 15th, 1899, and now apply for the pension provided by law for the year ending February 15th, 1901.

Sworn to and subscribed before me, this 15th day of Aug, 1901.

John R. Wickham Ordinary.

Post Office.

State of Georgia,

Fulton County.

Ordinary of said County, certify that I am well acquainted

with Mrs. E. A. Massey, who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the 23rd day of Dec, 1890.

Given under my official signature and seal, this 15th day of Aug, 1901.

Ordinary of Fulton County.

БОМЕР ОЕ ВЛЛОКНЕА

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____, hereby authorize

of

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

at

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1902.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County, }

I, _____, hereby authorize

of

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

at

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1903.

[L. S.]

Executed in presence of

Mrs. E. A. Murrey
Fulton Co.

To Those Heretofore Paid.

1902.

No. 47

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. E. A. Murrey

Fulton,

County,

Widow of *Wm. Murrey*

Co. _____

Regiment _____

JOHN W. LINDSEY,
Comptroller of Pensions.

WARRANT ISSUED

1903

AND HANDLED TO

Mrs. E. A. Murrey

Wm. B. Murrey, Attorney, Ga.

Mrs. E. A. Murrey
Fulton Co.

To Those Heretofore Paid.

1903.

No. 71

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. E. A. Murrey

Fulton,

County,

Widow of *Wm. Murrey*

Co. _____

Regiment _____

JOHN W. LINDSEY,
Comptroller of Pensions.

WARRANT ISSUED

1903

AND HANDLED TO

Mrs. E. A. Murrey

Wm. B. Murrey, Attorney, Ga.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

FOR WIDOWS HERETOFORE ALLOWED PENSIONS

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____, hereby authorize

of

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

at

In Witness Whereof, I have hereunto set my hand and seal, this

day of _____ 1902.

[L. S.]

Executed in presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

County. }

I, _____, hereby authorize

of

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

at

In Witness Whereof, I have hereunto set my hand and seal, this

day of _____ 1903.

[L. S.]

Executed in presence of

Mrs. E. A. Murrey
Fulton Co.

To Those Heretofore Paid.

1902.

No. 47

WIDOW'S PENSION,

For year ending Dec. 31, 1902.

PAID TO

Mrs. E. A. Murrey
Fulton.

County,

Widow of *Wm. Murrey*

Co. _____ Regiment

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1902

AND HANDLED TO

Wm. Murrey
PAID

JOHN W. LINDSEY, COMMISSIONER OF PENSIONS, GEORGIA.

Mrs. E. A. Murrey
Fulton Co.

To Those Heretofore Paid.

1903.

No. 71

WIDOW'S PENSION,

For year ending Dec. 31, 1903.

PAID TO

Mrs. E. A. Murrey
Fulton.

County,

Widow of *Wm. Murrey*
Co. *10* Regiment *10th*

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

1903

AND HANDLED TO

Wm. Murrey
PAID

JOHN W. LINDSEY, COMMISSIONER OF PENSIONS, GEORGIA.

STATE OF GEORGIA.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of **Fulton.**

PERSONALLY COMES MRS.

E. A. Massey

who, being sworn, says on oath, that she is a bona fide resident of said County of **Fulton.** State of Georgia, and that she has resided in said State continuously ever since **1834**. That she is the Widow of **Wm. Massey** who was a soldier in Company **16** of the **16th** Regiment of **Ga** Volunteers, that he enlisted in said regiment on or about the month of **186**, and served in the Army up to **186**. That he lost his life on the **18** day of **18**. (State here particulars of the husband's death, when, where and from what cause.)

Died of Pneumonia contracted during service

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year **1857**.

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

Sworn to and subscribed before me, this **18** day of **JAN 18 1902**, **E. A. Massey.** Ordinary. Post-Office

State of Georgia,

Fulton. County.

I, **John B. Wilkinson.**

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

Given under my official signature and seal, this **18** day of **JAN 13 1902** 1902.

Official Seal.

Ordinary of

Fulton. County.

NOTE.—All blank spaces must be filled.

Voucher and affidavit must bear date after January 1st, 1902.

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,

County of **Fulton.**

PERSONALLY COMES MRS.

E. A. Massey

who, being sworn says on oath, that she is a bona fide resident of said County of **Fulton.** State of Georgia, and that she has resided in said State continuously ever since **1834**. That she is the Widow of **Wm. Massey** who was a soldier in Company **16** of the **16th** Regiment of **Ga** Volunteers, that he enlisted in said regiment on or about the month of **186**, and served in the Army up to **186**. That he lost his life on the **18** day of **18**. (State here particulars of the husband's death, when, where and from what cause.)

Died of Pneumonia contracted during service

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year **1857**.

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

Sworn to and subscribed before me, this **18** day of **JAN 22 1903**, **E. A. Massey.** Ordinary. Post-Office

State of Georgia,

Fulton. County.

I, **John B. Wilkinson.**

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

Given under my official signature and seal, this **18** day of **JAN 22 1903** 1903.

Official Seal.

Ordinary of

Fulton. County.

NOTE.—All blank spaces must be filled.

Voucher and Affidavit must bear date after January 1st, 1903.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, _____ hereby authorize

of _____

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

at _____

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

day of _____ 1904.

[L. S.]

Executed in presence of _____

Massey, E. A. (m)
Fulton County
TO THOSE HERETOFORE PAID.

1904.

No. 44

WIDOW'S PENSION

FOR

YEAR ENDING DECEMBER 31, 1904.

PAID TO

Mrs. E. A. Massey

OF

Fulton County,

Widow of _____

Co. *H* Regiment *16th Va. Inf.*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

AND REMITTED TO *1/23* 1904,

aff

JOHN W. LINDSEY, Commissioner of Pensions.

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, _____ hereby authorize

of _____

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

at _____

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

day of _____ 1905.

[L. S.]

Executed in presence of _____

Massey, E. A. (m)
Fulton County
To Those Heretofore Paid.

1905.

No. 36

WIDOW'S PENSION,

For year ending Dec. 31, 1905.

PAID TO

Mrs. E. A. Massey

OF

Fulton County,

Widow of _____

Co. *H* Regiment *16th Va. Inf.*

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT ISSUED

AND REMITTED TO *1/30* 1905,

aff

JOHN W. LINDSEY, Commissioner of Pensions.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

Form No. 1.

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES Mrs.

E. A. Massey

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since 1834. That she is the Widow of John Massey who was a soldier in Company 16th of the 16th Regiment of Ga Volunteers, that he enlisted in said regiment on or about the month of Aug 1861, and served in the Army up to 1861. That he lost his life on the day of 1861. (State here particulars of the husband's death, when, where and from what cause.)

Died of Pneumonia on -
trachid during service

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1857.

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

Sworn to and subscribed before me, this day of JAN 22 1904 1904.
J. R. Wilkinson Ordinary.

State of Georgia,
County of Fulton.
I, John R. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. E. A. Massey, 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 1834.

Given under my official signature and seal, this day of JAN 22 1904 1904.
J. R. Wilkinson Ordinary of Fulton County.

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

For Widows Heretofore Allowed Pensions.

Form No. 1

STATE OF GEORGIA,
County of Fulton

PERSONALLY COMES Mrs.

E. A. Massey

who, being sworn says on oath, that she is a bona fide resident of said County of Fulton State of Georgia, and that she has resided in said State continuously ever since 1834. That she is the Widow of William Massey who was a soldier in Company 16 of the 16th Regiment of Georgia Volunteers, that he enlisted in said regiment on or about the month of Aug 1861, and served in the Army up to 1861. That he lost his life on the day of 1861. (State here particulars of the husband's death, when, where and from what cause.)

Died Hospital Disease

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a soldier, and that she has never married since his death aforesaid, and that she became his wife in the year 1857.

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

Sworn to and subscribed before me, this day of JAN 2 1905 1905.
J. R. Wilkinson Ordinary.

State of Georgia,
County of Fulton.
I, J. R. Wilkinson, Ordinary of said County, certify that I am well acquainted with Mrs. E. A. Massey, 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 1834.

Given under my official signature and seal, this day of JAN 2 1905 1905.
J. R. Wilkinson Ordinary of Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, _____, hereby authorize

of _____

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

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1906.

[L. S.]

Executed in presence of _____

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, _____ hereby authorize

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

at _____

In Witness Whereof, I have hereunto set my hand and seal, this _____

day of _____ 1907.

[L. S.]

Executed in presence of _____

Marsy, E. A. (Mrs)
Fulton County
 To Those Hereofore Paid.

1906.

No. *83*

WIDOW'S PENSION

For year ending Dec. 31, 1906.

PAID TO

Mrs. E. A. Marsy

OF

Fulton

County,

Widow of *John Marsy*
 Co. *No. 16* Regiment *16th Regt.*

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT ISSUED

1906,

AND HANDED TO

149
184

See Pensions and Pensions Act, Sec. 10, March 10, 1906.

Marsy, E. A. (Mrs)
Fulton Co
 To Those Hereofore Paid.

1907.

No. *3*

WIDOW'S PENSION

For Year ending Dec. 31, 1907.

PAID TO

Mrs. E. A. Marsy

OF

Fulton

County,

Widow of *John Marsy*
 Co. *No. 16* Regiment *16th Regt.*

JOHN W. LINDSEY,
 Commissioner of Pensions.

WARRANT ISSUED

1907,

AND HANDED TO

148
184

See Pensions and Pensions Act, Sec. 10, March 10, 1906.

STATE OF GEORGIA

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA

FOR WIDOWS HERETOFORE ALLOWED PENSIONS.

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

E. A. Massey

who, being sworn, says on oath that she is a bona fide resident of said County of Fulton.
State of Georgia, and that she has RESIDED in said State
continuously ever since 1834. That she is the Widow of
William Massey, who was a soldier in Company
No. of the 16th Regiment of Co.
Volunteers, that he enlisted in said regiment on or about the month of Aug.
1861 and served in the Army up to 186. That he lost his
life on the day of 18. (State here
particulars of the husband's death, when, where and from what cause.)

Died Hospital disease

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1857.

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

Sworn to and subscribed before me
this day of JAN 1 1906.
J. R. Wilkinson, Ordinary.

Post Office

AtlantaState of Georgia,
County of Fulton.

Ordinary of said County, certify that I am well
acquainted with Mrs. E. A. Massey, 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 1834

Given under my official signature and seal, this day of JAN 1 1906.

Official
Seal

J. R. Wilkinson
Ordinary of Fulton. County.

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

For Widows Heretofore Allowed Pensions.

STATE OF GEORGIA,
County of Fulton.

PERSONALLY COMES Mrs.

E. A. Massey

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 across life. That she is the Widow of
William Massey, who was a soldier in Company
No. of the 16th Regiment of Co.
Volunteers, that he enlisted in said regiment on or about the month of Aug.
1861, and served in the Army up to 186. That he lost his
life on the day of 18. (State here
particulars of the husband's death, when, where and from what cause.)

Died Hospital Disease

Deponent swears that she was the wife of said deceased soldier, during his service in the Army as a
soldier, and that she has never married since his death aforesaid, and that she became his wife in
the year 1857.

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

Sworn to and subscribed before me
this day of 1907.
John R. Wilkinson, Ordinary.

Post Office 261 E. Hunter St.State of Georgia,
County of Fulton.I, John R. Wilkinson

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

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

Official
Seal

John R. Wilkinson
Ordinary of Fulton. County.

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

State of Georgia,
Fulton County. Ordinary of said County, certify that I am well acquainted with Mrs. U. A. Massey, 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 1894.

Given under my official signature and seal, this 1st day of JAN 1, 1906.



John R. Wilkinson
Ordinary of Fulton County.

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

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

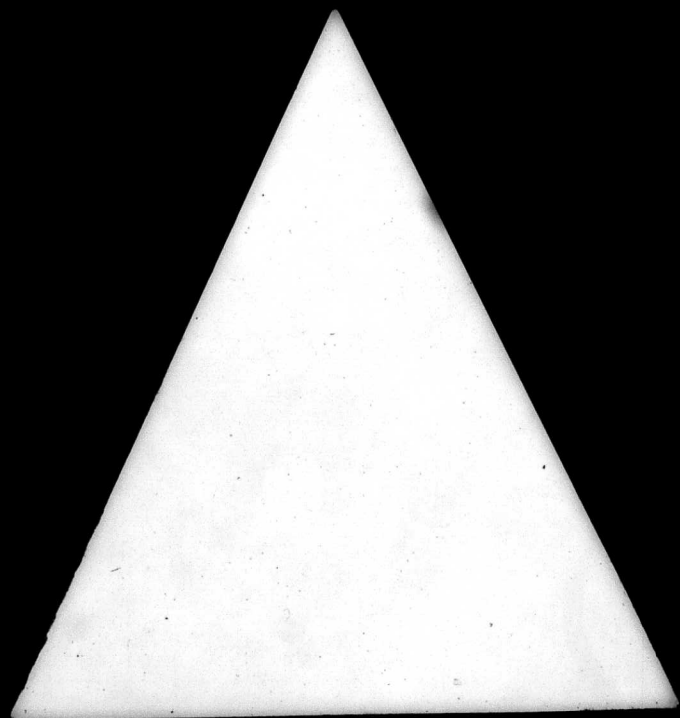
Given under my official signature and seal, this the day of JAN 2, 1907.



John R. Wilkinson
Ordinary of Fulton County.

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

State of Georgia } I James I. Garrison
Bryan County } Ordinary in and for
said County, hereby certify that the vouchers
whose testimony who Mrs. U. A. Massey pre-
sents to sustain her claims for pensions
are known to me to be truthful vouchers
of said County, and entitled to full
faith and credit as such.
Given under my hand and seal
of office, this 6th day of
James I. Garrison
Ordinary



Private. Mich. p. 1882
Appointed 4th Co. 1st
Regt. 1863, Cavalry, Ill.
Apr. 1865.
Witness C. K.

Mass. 1882
D. K. 1882
Fulton County

No. 0

Widow's Pension

UNDER ACT 1910.

County Fulton

Name Mary Ann Massey

Widow of Thos. Massey

R. 42-3

J. W. LINDSEY,
Commissioner of Pensions.

Chas. F. Hyde, State Printer.

10/18-1912

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

STATE OF GEORGIA,

Fulton County.

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

1. What is your name, and where do you reside? Mrs. Maryann Massey 53 Powell
2. How long and since when have you been a continuing resident in the State of Georgia? Since Jan 1857 - all of my life
3. When, where and to whom were you married? Nov. 21, 1857 to John Samuel
4. When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia? (State the arms and class of Service.) Co. B, March 14th 1862 at Savannah Ga. in Company "B" 1st Ga. Cavalry, Private
5. When and where did the Commands of your husband surrender or discharge from the army? at Appomattox Court House at Appomattox April 26 1865
6. Was your husband personally present at the time of the surrender or discharge of this Command? he was a Prisoner at Appomattox Court House
7. If he was not present state clearly where he was? he was just made a prisoner
8. Where was his Command when he left? he never left
- a. For what cause did he leave his command? he never left
- 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? yes at Appomattox
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? at Appomattox Nov. 1st of April 1865 in Fort Mifflin, Charles 4 July 1865
- j. When and where did your husband die? at Appomattox 53 Powell at Appomattox
- k. Were you residing together when he died? yes
- l. If not, how long had you resided apart? not at all
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.) one house and lot 53 Powell at
10. What property of any kind have you sold or given away since Nov. 4, 1908? What was received for it and what did you do with the proceeds thereof? (Give items and cash value.) none
11. What property of any description of any value have you now? one house and lot
Give list and cash value? one house and lot 53 Powell at Appomattox
12. What are your annual earnings or income and their value? none
13. Have you heretofore been paid a pension by the State? no
If so, when and for what cause were you struck from the Roll?

Sworn to and subscribed before me this the

7th day of Dec 1910
John W. Lindsey Ordinary.
of Fulton County.

Widow's Pension

UNDER ACT 1910.

Fulton County.

Name Mrs. Maryann Massey

Widow of John Samuel

Nov. 4, 1857

J. W. LINDSEY,
Commissioner of Pensions.

Class. 7. Rural State Pension.

10/18-1912

*Parents: m. 4. 1857
Appomattox 4th Cavalry
Feb. 1863. Cavalry Division
Ga., 1865.
Mifflin Co. Va.
Mason, Mary Ann
Capt. (1st Regt.)
Fulton County*

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

STATE OF GEORGIA,

~~Paul Kalk~~ County.

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

1. What is your name and where do you reside? W. T. Arnold, 2424 1/2 St. N.E.
2. How long and since when have you known Mary Ann Massey applicant?
3. How long and since when has she continuously resided in this State? (Give date.) I have known her for all her life for 27 years.
4. When and to whom was she married? To W. S. Massey. How do you know that they lived together?
5. How long and since when did you know W. S. Massey her husband? all his life
6. When and where did W. S. Massey die? at home 55 Powell St. in this of the husband of Applicant die? at home 55 Powell St. in this of
7. Where the Applicant and her husband living together as husband and wife at the date of his death? yes
8. If not, how long did they live apart before his death? no
9. When, where and in what Company and Regiment did W. S. Massey enlist? in 1862 at Savannah Ga in Company B. 42 Regiment Ga 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? until surrender
12. When, and where did his Command surrender, and was discharged? April 16, 1865 he was captured & lay in for the surrender in Wash. D.C.
13. Were you personally present when it was surrendered? I was If not where were you and how came you there?

14. Was the husband of applicant personally present at surrender? he was If not where was he? present when, where and for what cause did he leave Command? (Give date.) Never left By whose authority did he leave his Command? never left com. and how long was he granted leave? 6 weeks How do you know all this? I was present my wife

15. For what cause, if you know of your own knowledge was he prevented from returning to his Command? he remained in command

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? never

Sworn to and subscribed before me this

3 day March 1911

James P. Johnson Ordinary, Fulton County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me comes J. T. Mills & H. H. Matthews who on oath says that they are freeholders of said County and that they know Mary Ann Massey 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 one house & lot 7500

Personal property	<u>1000</u>	\$	<u>1000</u>
Notes and accounts due	<u>none</u>	\$	<u>0</u>
Total		\$	<u>1100</u>

Schedule (B).

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

Personal property	<u>none</u>	\$	<u>0</u>
Money, Notes and accounts	<u>none</u>	\$	<u>0</u>

Schedule (C).

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

<u>none</u> Acres of land...worth	\$	<u>0</u>
<u>none</u> Horses and Mules	\$	<u>0</u>
<u>none</u> Cows and Hogs	\$	<u>0</u>
<u>none</u> Other property	\$	<u>0</u>
<u>none</u> Income and earnings	\$	<u>0</u>
Total Value of all property and effects	\$	<u>0</u>

Sworn and subscribed before me this the

3 day of March 1911 J. T. Mills Ordinary, Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I John P. Wilkinson Ordinary of said County do certify that I know Mary Ann Massey the applicant for pension. She is the person she represents herself to be and she is a bona fide continuing resident citizen of said County and was in the 4th Nov. 1908.

That I also know W. T. Arnold the witness who swears to the service of husband, and J. T. Mills or H. H. Matthews who are freeholders. That all of them are now residents of said County and were duly sworn by me before signing the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to full faith and credit.

That the Tax Returns of Mary Ann Massey Returned for Tax is for 1908 \$ 960 for 1910 \$ 960

Sworn under my hand and official seal of office this 16 day of Oct 1912

SEAL.

(SEAL.)

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

long was he granted leave? 3 Weeks How do you know all this?
I was present my self

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

16. What effort did he make to return to his Command and how do you know this? Of your own knowledge or how? None

Sworn to and subscribed before me this the
day 25th 1911

St. J. his Arnold
James R. [unclear]
Ordinary,
Dekalb County.

to the service of husband, and J. E. Mills or H. H. Matthews who are
freeholders. That all of them are now residents of said County and were duly sworn by me before signing
the foregoing affidavits and that they all, are truthful, trustworthy, and their statements are entitled to
full faith and credit.

That the Tax Returns of Mary Ann Massey Returned for Tax is for
1908 \$ 9.60 for 1910 \$ 9.60

Sworn under my hand and official seal of office this 16th day of Oct

191 2

SEAL.

John P. [unclear] Ordinary,
Fulton County

(SEAL.)

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

POWER OF ATTORNEY.

STATE OF GEORGIA.

COUNTY.

Notary Public

To certify and receipt for the pension allowed and require that he shall come to

Witness my hand and seal, this

Day of

190

Signed in presence of

Massey, Robert J.
Fulton Co.

C.K. No. 1908

INDIGENT PENSION.

1908

Name Robert J. Massey

County Fulton

Co. Regt.

Approved 190

JOHN W. LINDEBY,

Commissioner of Pensions.

WARRANT HANDED TO

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

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

11/24/08

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

at _____ by _____

Witness my hand and seal, this _____ day of _____ 1908.

[L. S.]

Executed in presence of _____

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

I, Robert J. Massey of said State and County, desiring to avail himself of the Pension Act (Section 1254, Code), hereby submit his proof, and after being duly sworn true answers to make to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? (Give State, County and Postoffice.)
Robert J. Massey Atlanta Fulton Co. Georgia

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

3. When and where were you born? October 16th 1848 Magon Co Georgia

4. When and where and in what company and regiment did you enlist or serve?

5. How long did you remain in such company and regiment?

6. When and where was your company and regiment surrendered and discharged?

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? very little

10. What has been your occupation since 1865? Physician, Surgeon, etc.

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty,"

second, "infirmary and poverty," or third, "blindness and poverty"? Age and poverty

12. If upon the first ground, state how long you have been in such condition that you could not earn your support. If upon the second, give a full and complete history of the infirmity and its extent (if upon the third, state whether you are totally blind and when and where you lost your sight).

Have been able to earn a good living until within last 2 or 3 years

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

14. What property, real or personal, did you possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, by sale or gift, have you made of same? none

15. In what County did you reside during those years, and what property did you then return for taxation?

Fulton County

16. How were you supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907?

Self supporting \$1,022.03 & 04, ~~and that time have~~

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? from \$100 to \$200

18. What was your employment during 1901, 1902, 1903, 1904, 1905, 1906 and 1907? What pay did you receive in each year?

19. Have you a family? If so, who compose such family? Give their means of support. Have they a home-stead, or other property? Their age and how employed? Yes, wife, 2 daughters, 1 son

Daughter School Teacher 18 - Grand daughter 19, daughter has a home land

20. Are you receiving any pension? If so, what amount and for what disability?

No

21. Have you ever made an application for pension before? No

22. How many applications have you ever made and under what class?

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

Robert J. Massey Ordinary,

of Fulton County.

Every Question Must Be Answered.

Massey Robert J.
Fulton Co.
C.R. No. 1908
INDIGENT PENSION.
1908
Robert J. Massey
Fulton
JOHN W. LINDSEY
1908
WARRANT HANDLED TO
Fulton Co.
Ordinary of Fulton County

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Fulton COUNTY.

W. J. Northen said State and County, having been presented as a witness in support of the application of Dr. Robert H. Massey for pension under section 1254, Code, and after being duly sworn true answers to make to the following questions, depose and answers as follows:

1. What is your name and where do you reside? William J. Northen
Resident 704 Piedmont Ave. Atlanta
2. Are you acquainted with Dr. Robert H. Massey, the applicant; if so, how long have you known him? About fifty years or more.
3. Where does he reside, and how long and since when has he been a resident of this State? Now in Atlanta
4. When, where and in what company and regiment did he enlist, and how do you know?

5. Were you a member of the same company and regiment? X
6. How long did he perform regular military duty? Six months turn in Hospital
7. When and where was his command surrendered? X

8. Were you present when it surrendered? X
9. Was applicant present? X
10. If he was not present, where was he? X

When did he leave his command? X For what cause? X
By what authority he left? X How do you know all of this?
X

11. What property, effects or income has the applicant? (Give your means of knowledge.) None so far as I know. Is dependent.

12. What property, effects or income did the applicant possess in 1901, 1902, 1903, 1904, 1905, 1906 and 1907, and what disposition, if any, did he make of same? X

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

14. What is the applicant's occupation and physical condition? Has no occupation

15. Is the applicant unable to support himself by labor of any sort; if so, why? I think just because of advanced years a feeble condition

16. How was he supported during the years 1901, 1902, 1903, 1904, 1905, 1906 and 1907? X

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

18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code. As stated his physical condition is such that he is unable to perform his duties as a physician.

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

20. What interest have you in the recovery of a pension by this applicant? None except satisfaction of applicant
Sworn to and subscribed before me, this 18 day of Sept, 1908.
John R. Williamson Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Fulton COUNTY.

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

and that we have no interest in said pension being allowed.

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

ORDINARY'S CERTIFICATE

STATE OF GEORGIA,

Fulton COUNTY.

John R. Williamson Ordinary, in and for said County, hereby certify that the applicant Dr. Robert H. Massey resides in said County, and has been a bona fide resident of this State since the _____ day of _____, 186 and that the witness, viz. W. J. Northen are of trustworthy character, and that their statements are entitled to full faith and credit.

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

I further certify that the tax digest of _____ County shows that applicant returned for taxation in his name in 1901 _____ Dollars of property, and in 1902 _____ Dollars of property; in 1903 _____ Dollars of property; in 1904 _____ Dollars of property; in 1905 _____ Dollars of property; in 1906 _____ Dollars of property; in 1907 _____ Dollars of property.

In my opinion the foregoing claim is _____ made in good faith.
Witness my hand and seal of office, this 18th day of Sept, 1908.
John R. Williamson Ordinary.
Fulton County.

34 C. C. 35.
1. Ratify any questions are answered, the Ordinary shall swear 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, or only you said."
2. Additional affidavits may be attached if blank spaces are insufficient.
3. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

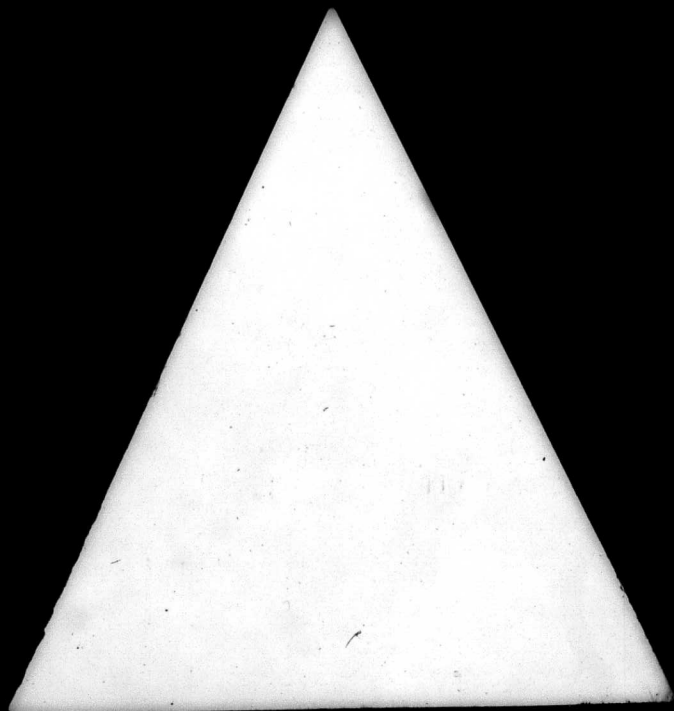
To the 4th, 5th, 6th, 7th, and 8th I answer. My services during the entire war were in the surgical department? As Assistant Surgeon, ranking as Captain I did service in the hospitals at Richmond, Va. and Atlanta, Ga. during the years 1862 and 1863. In Jan. 1864 I was commissioned by Honorable Joseph E. Brown, Governor of Georgia, as full surgeon, ranking as major. Under his order I established Brown Hospital. First at Atlanta, at the present sight of the State Capitol. On the 13th of July this hospital and its belongings were all transferred to Milledgeville, Ga. where it remained until the war ended. From the first I was surgeon in charge of this hospital, and on the first of May 1864, I was transferred by Gov. Brown to the Confederate service, and from that date I was a Confederate surgeon, making my reports daily to the Confederate authorities, and receiving my salary and supplies for the hospital from the Confederate government.

I remained in charge of Brown Hospital until the cessation of hostilities, surrendering this property to the United States Government about the first of May 1865.

R. J. Massey.

ment about the first 6th May 1865.

R. J. Massey.



Massley, Sarah E.
for Roll (mo)
27 Apr 1915
Fulton County

No.

Widow's Application

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

County

Fulton

Name

Sarah E. Massley

Widow of

Robert J. Massley

Company

Infantry Regt.

Approved

J. W. LINDSEY,
Commissioner of Pensions

CHAS. F. BYRD, State Printer, Atlanta.

10/3-1915

WIDOW'S AFFIDAVIT.

STATE OF GEORGIA,

Fullon County.

Personally before me come Mrs Sarah E. Massey of said County, who, after being duly sworn, on oath says, that she is the widow of Robert J. Massey to whom in the County of Morgan State of Ga she was married on the 18 day of June 1915 and that she remained his wife, and resided with him to the date of his death on March 13 1918 and that she has not since his death remarried. At the time of his death he was a resident of Fullon County, in Ga said State of Georgia, and he was on the Indigent Pension Roll of the State and paid a pension of \$6.00 in Fullon County for 1915 per annum, on account of being a soldier in Company Regiment (Volunteers of State Militia).

Was in charge of surgical department - see record on file
At the death of Robert J. Massey he was in the use and possession of the following property None

of the cash value of \$ None
What property of any kind and of any value have you in your use, control and possession now, and the cash value, (State fully and where situated.)

Acres land	<u>Nothing</u>	\$ <u>00</u>
Horses and Mules	<u>Nothing</u>	\$ <u>00</u>
Hogs, Cows, etc.	<u>Nothing</u>	\$ <u>00</u>
Total Cash value of all property	<u>Nothing</u>	\$ <u>00</u>

That she is now a bona fide resident citizen of said County of Fullon and she has so continuously resided since 19 day of Sept 1893

Sworn to and subscribed before me, this the

12 day of June 1918 } Mrs Sarah E. Massey
Frank H. Jeffers Ordinary,

Fullon County.

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

STATE OF GEORGIA,

Fullon County.

Personally before me come G. S. Prior known to be responsible and truthful persons, residing in said County, who after having duly sworn on oath, say: that of their own personal knowledge Mrs Sarah E. Massey who made the foregoing affidavit, is the lawful widow of Robert J. Massey who died in Fullon County in said State of Ga on 18 day of March 1918 and that she has not since remarried. That she became the wife of Robert J. Massey on the 18 day of June 1915 and that she and he had resided together as man and wife continuously since to date of his death on March 13 1918 and that the said Robert J. Massey was the same man who was on the pension roll of said State Fullon from Fullon County when he died.

Sworn to and subscribed before me, this the

12 day of June 1918 } G. S. Prior
Frank H. Jeffers Ordinary,

Fullon County.

Widow's Application

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

County Fullon

Name Mrs Sarah E. Massey

Widow of Robert J. Massey

Ordinary Frank H. Jeffers

Approved

J. W. LINDSEY,

Commissioner of Penitentiaries

CITIZEN P. STENO, BOOK FIVE, ALBANY

1043-1918

AFFIDAVITS OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Fulton County.

Personally before me come W. B. Prior & J. M. Stallings who after being sworn on oath says, that they are freeholders of said County, and that they know Ann & Mary of said County and knew her said husband Robert J. Massey at his death on the 18 day of March 1917 that she and he were in the use, possession and control of the following property at his death to wit: None

of the value of None That she is now in the use, possession and control of the following property to wit:

of the value of None

Sworn to and subscribed before me, this the

19 day of June 1917

William R. McIntosh Ordinary,

of Fulton County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Fulton County.

I, Wm. R. McIntosh Ordinary of said County, do certify, that, I know Mrs. Ann & Mary 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 191

That I also know W. B. Prior & J. M. Stallings witness as to marriage and I also know W. B. Prior & J. M. Stallings who I know to be a resident free holder of said County that all of the foregoing were duly sworn by me before signing the respective affidavits and that they are truthful and trustworthy and their statements are entitled to full faith and credit.

That the tax Books of Fulton County shows that None returned property to the amount of \$ None for 1908 \$ None for 1909 \$ None for 1910 \$ None for 1911 \$ None for 1912 \$ None for 1913 \$ None for 1914 \$ None for 1915 \$ None for 1916

Sworn under my hand and official seal of office this 19 day of Oct 1917

(SEAL)

Wm. R. McIntosh Ordinary.

Fulton County.

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

Greene Morgan County
 J. H. Milliken Ordinary and Ex Off. Clerk of Ordinary of said
 County, do Certify that the within and foregoing is a true
 and correct Copy of the Original Marriage License of Robt
 J. Mason & Miss Elizabeth Cyphar, as recorded in Marriage Book
 1836 to 1854, Page 265.

Given under my hand and Seal of Office,
 This June 5th 1855.

A. H. Winter Ordinary
 Ex Off. Clerk of Court of Ordinary.

Copy

MARRIAGE LICENSE
 OF

Mr Robt J Mason
 AND

Miss Elizabeth Cyphar

Issued June 17th 1855

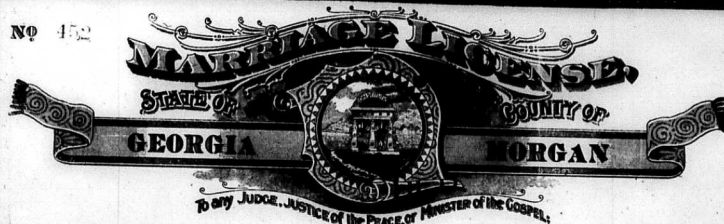
and recorded on page 265

Book 1836 to 1854 of Marriage Licenses.

J. H. Milliken

Ordinary.

No 452



You are hereby authorized to join
Mr. Robert J. Massey and Mrs. Elizabeth Copeland
in the Holy State of Matrimony, according to the Constitution and
Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me, with your
Certificate hereon of the fact and date of the Marriage.
Given under my hand and seal this 17th day of
June 1850. J. W. Arnold (L.S.)
Ordinary

STATE OF GEORGIA.

CERTIFIED

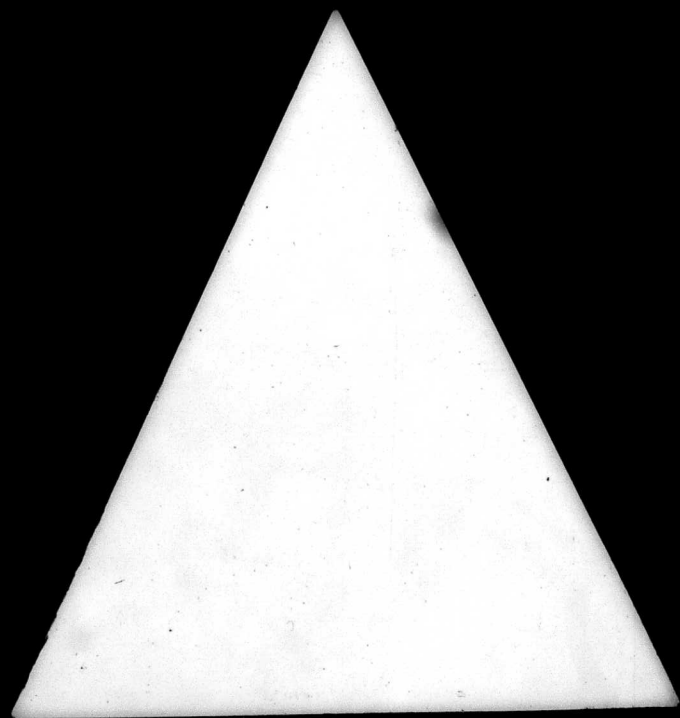
COUNTY OF MORGAN.

I Certify that Robert J. Massey and Mrs. Elizabeth Copeland
were joined in Matrimony by me this 18th day of June 1850.

Recorded 24th day of June 1850

J. W. Arnold C. C. of Ordinary.

Charles M. Lawrence M. G.



Mar 13 5 49 AM

Pension office
12/20-1919
Disapproval
for this reason that
Appl. Matthews name
is not official on
G. B. Matthews & Co.
Two reasons for this
cannot be found
there being no
evidence to establish
applicant - cannot
under the law approve
S. W. Lindsey
Com. of Pensions

Matthews Came & Co.
Disapproval
Mar 13/20-1919
No. 1007 for him

Widow's Pension

Under Act 1910—as Amended by Act of 1919.

County Fulton
Name Mrs. Carrie E. Matthews
Widow of A. B. Matthews
Company Griffin Sgt 920
Regiment 15th Ga Inf
Approved _____

J. W. LINDSEY,
Commissioner of Pensions.

Byrd Printing Co., State Printers, Atlanta.

10-31-1919

Ordinary's Certificate

STATE OF GEORGIA

Fulton COUNTY

I, F. W. Lindsey Ordinary of said County, do certify

that I know Mrs. Carrie E. Matthews the applicant for pension. She
is the person who represents herself to be and she is a bona fide continuing resident citizen of said County
and was on the 4th November 1905; that I also know James S. Caldwell

the witness who appears to the same as a witness; that both of them are now residents of said County and
were duly sworn by me before signing the foregoing affidavits and that they both are truthful, trust-
worthy, and their statements are entitled to full faith and credit.

Sworn under my hand and official seal of office this 29th day of Dec 1919
(SEAL) F. W. Lindsey Ordinary,
Fulton County.

NOTES: 1. Before any questions are answered the Ordinary shall swear applicant and the witness in the following words:
"You do solemnly swear that you will true answers make to each of the questions asked you and the evidence
you give shall be true to the best of your knowledge and belief."
2. Additional questions may be asked if blank spaces are available.
3. All affidavits must be made before the Ordinary of the County of the residence of the person to be sworn and certified by
him.
4. All affidavits must be made before the Ordinary of the County of the residence of the person to be sworn and certified by
him.
5. Any person who gives false evidence in support of a pension application shall be liable to punishment by some person, or by general
reputation.

STATE OF GEORGIA.

Sworn under my hand and official seal of office this 30 day of Oct 1919
(SEAL) _____ Ordinary,
_____ County.

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

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

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

4. All affidavits must be made before the Ordinary of the residence of the person to be sworn and certified by such Ordinary.

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

Widow's Pension

Under Act 1910—as Amended by Act of 1919

County Fulton

Name Mrs. Carrie Mathews

Widow of Alb Mathews

Yudhim dgtgdo

Approved

J. W. LINDSEY,
Commissioner of Pensions

David Printing Co. State Editors Atlanta

Questions for Applicant

STATE OF GEORGIA.

-----Tulsa----- COUNTY.

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

1. What is your name, and where do you reside? Mrs. Carrie E Matthews, 150 Lee St.
2. How long and since when have you been a continuing resident of the State of Georgia? All my life
3. When, where and to whom were you married? Dec. 18, 1872, Spalding Co., Ga.
to A. R. Mathews
- 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). Spring of 1862, Spalding Co., Ga. Griffin Light Guards, 5th Ga. Reg
Capt Geo. J. Jones
5. When and where did the commands of your husband surrender or discharge from the army? near Griffin Ga., April 1865
6. Was your husband personally present at the time of the surrender or discharge of this command? Yes
7. If he was not present state clearly where he was. Never left command until after
surrender
8. Where was his command when he left? _____
- a. For what cause did he leave his command? _____
- b. By whose authority did he leave his command? _____
- c. For how long was he granted leave of absence? _____
- d. What was his physical condition when he left his command? _____
- f. What effort did he make to return to his command? _____
- g. In what way was he prevented from going back to Command _____
- h. Was he captured by the enemy at any time? No
- i. If so, when and where captured and where held as a prisoner, and when and for what cause released? _____
- j. When and where did your first husband die? April 9, 1898, Atlanta, Ga.
- k. Were you residing together when he died? Yes
- l. If not, how long had you resided apart? Never resided apart
- m. Are you now a widow? Yes
9. Have you or your husband heretofore been paid a pension by the State? No
- If so, when and for what cause were you or your husband placed on the roll? Never applied

Sworn to and subscribed before me this the

25 day of Oct 1919
Charles Marshall Ordinary
 of Fulton County.
 (SEAL)

1 Mrs. Carrie E. Mathew

Anna B. Campbell

was subscribed before
this October 27, 1919.
Charles D. Munson
C. ORDINARY, WILSON CO., GA.

Anna B. Campbell

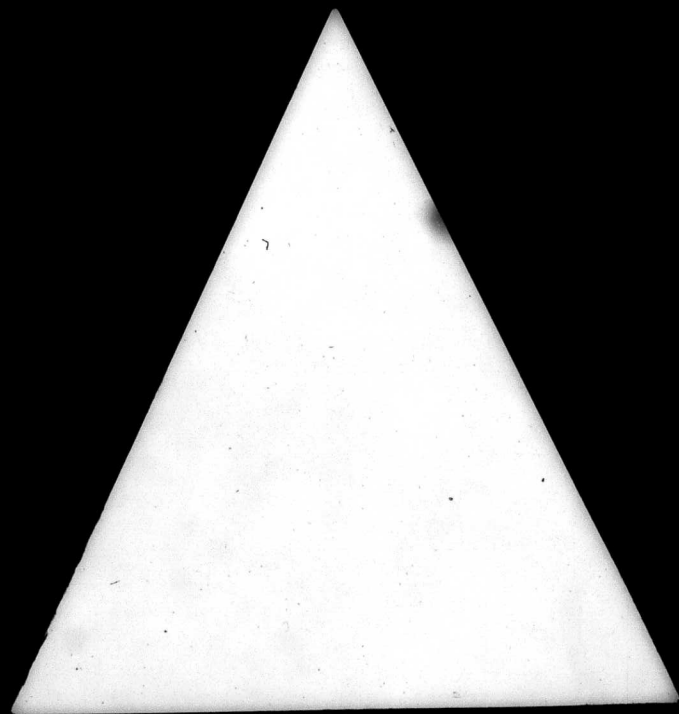
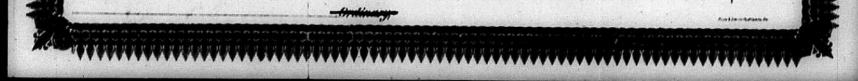
MARRIAGE LICENSE
STATE OF GEORGIA, COUNTY OF SPALDING.

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

A. B. Mathews. You are hereby authorized to join
and *Carrie E. Williams.*
in the Holy State of Matrimony, according to the Constitution
and Laws of this State and for so doing this shall be your License.
And you are hereby required to return this License to me,
with your Certificate hereon of the fact and date of the Marriage.
Given under my hand and seal this *17th* day of
December 1919. *John D. Stewart.* (L.S.)
Ordinary.

STATE OF GEORGIA, **CERTIFICATE**, SPALDING COUNTY.

I Certify that *A. B. Mathews.* and *Carrie E. Williams.*
were joined in Matrimony by me this *18th* day of *December*, *nineteen hundred*
and *(Year not given date by A.D. 1919, reading)*
Recorded *1919* *A. Van House, M. G.*



Matthew Mathews
Full & complete
630
April 1938
of 20.1920

Widow's Application

husband
Received pension in
Florida. Record
inclosed.

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

County.....F.U.L.T.O.N.....
 Name.....MRS. CHARLES MATHEWS.....
 Widow of.....RUFUS W. MATHEWS.....
 Date of Marriage.....JAN. 28...1918.....
 Date of Husband's Death.....Feb. 28.1932.....
 Company.....
 Regiment.....
 Approved.....*8/21/38*.....193.....
L. H. Mathews
 Director.

affirmed on
affidavit that Mrs
Mathews is and has
been a resident of
Fulton County.
Continued -
2/24/38
L. H. Mathews
 AUG 19-1937

Ordinary's Certificate

STATE OF GEORGIA,
 FULTON
 COUNTY.

I, THOMAS H. JEFFERS, Ordinary of said County, do certify that I know Mrs. Charlie Mathews, 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 E. N. Wicks, the witnesses who swear to the service of husband and/or the marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing 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 day of August, 193, 2 (SEAL OF ORDINARY)
L. H. Mathews Ordinary
 of Fulton County.

- INSTRUCTIONS:
1. Before any application for pension is presented to the Ordinary, all of the papers required and the witness in the following order: "The testimony given, that you will sign, sworn to make to me, and all the evidence you shall give will be the basis of the pension granted or refused."
 2. Additional affidavits you may desire to be attached if such sworn are unaffiliated.
 3. Affidavits must be sworn to before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
 4. Affidavits must be sworn to before the Ordinary of the County in which the applicant or witness resides and must be certified by such Ordinary.
 5. Fill out the back of the application carefully.
 6. Do not use the back of the application certificate as a receipt for the State. A receipt, sample form is easier to handle.
 7. Do not take any application from any widow who is already receiving a pension.

STATE OF GEORGIA,
FULTON COUNTY.

I, **THOMAS H. JEFFRIES**, Ordinary of said County, do certify that I know **Mrs. Charlie Mathews**, 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 **R. M. Wright**, the witness who swears to the service of husband and/or the marriage; that both of them are now residents of said County and were duly sworn by me before signing the foregoing 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** day of **August**, 1937.

(SEAL OF ORDINARY)

of **Fulton** County.

INSTRUCTIONS:

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

Widow's Application

Under Act of 1910 - As Amended by Act of 1915 and Constitutional Amendments of 1920 and 1937.

County **FULTON**
Name **Mrs. CHARLIE MATHES**
Widow of **CHARLES MATHES**
Date of Marriage **Jan. 29, 1916**
Date of Husband's Death **Jan. 29, 1920**
Company
Regiment
Approved **3/31/38**
by **John J. Allen**
Director

Applicant and
affidavit that Mrs
Mathews is and has
been a resident of
Fulton County
Georgia
3/31/38
John J. Allen
Director
AUG 19 1937

Ordinary's Certificate

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. Charlie Mathews**, of said State and County and hereby applies for the pension allowed by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, and submits testimony to support the same, and, after being duly sworn, true answers to make to the questions propounded, answers as follow, to wit:

SECTION I.

- What is your name, and where do you reside? (Give Post Office and County)
Mrs. Charlie Mathews, 475 South Gordon St., N.E. Atlanta, Ga.
- How long and since when have you been, continuously, a bona fide resident citizen of the State of Georgia?
16 years since 1921
- Give date, or year, of your birth. **Sept. 5, 1863** Age? **74**
- (1) When and where and (3) to whom were you married?
Jan. 29, 1916, at Ocala, Fla. to Rufus V. Mathews
- Have you married since the death of first and soldier husband?
No.
- When and where did your first husband die?
Jacksonville, Fla.
- Were you residing together when he died?
Yes, Feb. 28, 1922
- If not, how long had you resided apart?
Yes
- Are you now a widow?
Yes
- Have you or your husband heretofore been paid a pension by the State?
No. - My husband
- If so, when and for what cause were you or your husband placed on the roll?
was pensioned by the State of Florida

SECTION II.

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

- When, where and in what Company and Regiment did your husband enlist as a soldier in Confederate Army or Georgia Militia. (Give name of Colonel and Captain.) State whether Infantry, Cavalry, Artillery, Reserves, State Guards, State Militia or State Troops.
March 1862, 1st Co. Battery, Columbia Light Artillery, Columbia, South Carolina
- When and where did the Commands of your husband surrender or discharge from the Service?
Near West Point, Ga., after 17, 1865, and joined Macon, Ga.
- Was your husband personally present with his Command when it was surrendered or discharged?
Yes
- If he was not present, state specifically and clearly where he was?
- When did he leave the Command?
- For what cause did he leave?
- By whose authority did he leave?
- For how long was his leave of absence granted? d. In what way?
- What was his physical condition when he left his Command?
- What effort did he make to return to his Command?
- In what way was he prevented from going back to his Command?
- Was he captured by the enemy at any time?
- If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the

27 day of **July**, 1937
John J. Allen, Ordinary
of **Fulton** County.
(SEAL OF ORDINARY)

Mrs. Charlie Mathews
Applicant.

Aff Affidavit

(Read carefully before making this affidavit.)

State of Georgia, Paulton
County of Paulton.

Before me, the Ordinary of said County, comes Mrs. Charlie Mathews
who, after being duly sworn, deposes and says:

1. That she is an applicant for the Georgia pension allowed to widows of Confederate soldiers;
2. That her deceased husband was not a pensioner of the State of Georgia at the time of his death, and, therefore, his Confederate military service has not heretofore been proven in connection with an application for pension; in Georgia, but he was pensioned by the State of Alabama, and she is unable to obtain from any person or source evidence as to the Confederate military service of her deceased husband.
3. That she is unable to obtain from any person or source evidence as to the Confederate military service of her deceased husband; Copy of list is hereto attached.
4. That this affidavit is being made to authorize the use, as evidence, of any official record of said Confederate military service as may be preserved either at the Capitol in Atlanta, or in the office of the Adjutant-General, Washington, D. C.

Mrs. Charlie Mathews

Sworn to and subscribed before me, this the

22 day of July, 1937.
David D. Mason, Jr., Ordinary,
Paulton County.

Questions for Witness as to Marriage and Service of Husband.

STATE OF GEORGIA, Paulton COUNTY.

P. M. Wright of said State and County is hereby presented as a witness in support of the application of Mrs. Charlie Mathews for the pension provided by the Act of 1910, as amended by the Act of 1919 and the Constitutional Amendments of 1920 and 1937, in said State, who, after being sworn true answers to make to the questions propounded, answers as follows, to-wit:

1. What is your name and where do you reside? (Give Post Office and County). P. M. Wright
1229 McTendens Ave., N.E., Atlanta, Ga.
2. How long and since when have you known Mrs. Charlie Mathews applicant
16 years - Summer 1922
3. Where does she now reside, and since when has she been, continuously, a bona fide, resident citizen of this State? 475 Canaday St., N.E., Atlanta, Ga.
4. When and to whom was she married? Robert V. Mathews do you know? By Certificate
Jan. 29, 1916 Robert V. Mathews her husband?
5. How long and place when did you know Robert V. Mathews her husband?
Did Not Know him
6. When and where did Robert V. Mathews the husband of applicant, die? Feb. 28, 1922
7. Were the applicant and her husband living together as husband and wife at the date of his death?
Yes
8. If not, how long did they live apart before his death?
Were they divorced?

If the husband of the applicant was a pensioner, DO NOT answer the following questions.

9. When, where and in what Company and regiment did Robert V. Mathews enlist?
(Give date and place) Marta Battery, 1st Georgia Light Artillery, Columbia, S.C.
10. How did you obtain your information of this service? From his father, 1862
11. How long within your personal knowledge did he perform actual military service with this Company and Regiment? (Give dates.) Have no personal knowledge
12. When and where was his Command surrendered or discharged? (Give date and place.)
Near West Point, Ga., April 17, 1862
13. Were you personally present with this Command when it was surrendered? No.
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.) By whose authority did he leave his Command?
and how long was he granted leave?
How do you know all that you have stated to be true? (If of your own knowledge, state clearly and specifically).
15. For what cause, if you know of your own knowledge, was he prevented from returning to his Command?
16. What effort did he make to return to his Command and how do you know this?
17. Was he captured as a prisoner? No. If so, when and where?
In what prison was he held? and when released?

Sworn to and subscribed before me, this the
day of July, 1937.
Ordinary
of Paulton County.
(SEAL OF ORDINARY)

(Witness)

(COPY)

CHAPTER 6554- (No. 134)

AN ACT to Grant a Pension to Rufus V. Mathews, of Putnam County, Florida.

Whereas, Rufus V. Mathews in March 1862 enlisted in Waits Battery Columbia Light Artillery, Columbia, S. C., served faithfully as a Confederate Soldier until he surrendered to Gen. W. H. Wilson of the Federal Army near West Point, Ga., on the 17th day of April 1865 and paroled at Macon, Ga., at the close of the Civil War between the States, and

Whereas, Rufus V. Mathews is not eligible as a pensioner under existing law for the reason that he was not in 1895 a resident of the State of Florida, and

Whereas, since 1895 he has become a resident of the State of Florida and a worthy citizen of Putnam County entirely deserving of a pension, therefore

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF FLORIDA:

Section 1. That the Pension Board is hereby authorized and directed to place the name of Rufus V. Mathews of Putnam County, Florida, on the pension roll of the State at the regular rate now provided by law for the pensioners of the State of Florida.

Section 2. That this Act shall take effect upon its approval by the Governor.

Approved June 13, 1913.

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. CHARLIE MATHEWS, WIDOW OF RUFUS V. MATHEWS

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

ORDERED:

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

This, the 1st day of April 1938.

L. Thos. "Pat" G. G. G.

Director, Confederate Division
State Department of Public
Welfare

STATE OF GEORGIA
COUNTY OF FULTON SS

Mrs. Charlie Matthews, being duly sworn, deposes and says: that she was born in Walton County, Georgia, and has lived practically all her life in the State of Georgia; that at the time of her marriage to Rufus D. Matthews in 1918 she owned a home in the city of Atlanta, and that during the whole of their married life they resided the greater part of the time in Atlanta, spending only a month or two during the winter in Florida; that she resided at No. 1 Angier Avenue in the City of Atlanta, in Fulton County, from June 1, 1918, until after Mr. Matthews's death in 1932; and that since that time she has continued to maintain her residence in the City of Atlanta, Fulton County, Georgia.

Mrs. Charlie Matthews

Subscribed and sworn to
before me this 2nd
day of April, 1933

Walter G. Gentry
Notary Public

NOTARY PUBLIC, GEORGIA, STATE AT LARGE.
MY COMMISSION EXPIRES MARCH 3, 1934

STATE OF GEORGIA
COUNTY OF FULTON SS

Mrs. J. Edwin Kennedy, being duly sworn, deposes and says: that she is a resident of Fulton County, Georgia, and lives at No. 494 Highland Avenue, N. E., in the City of Atlanta; that she is employed in the Office of J. W. Simmons, Clerk of the Superior Court of Fulton County; that she knows Mrs. Charlie Matthews, the widow of Rufus D. Matthews, and knows that she resided at No. 1 Angier Avenue in the City of Atlanta, in Fulton County, Georgia, in 1920; that she lived in Mrs. Matthews home at No. 1 Angier Avenue, City of Atlanta, Fulton County, from March, 1919, until October, 1920; and knows that Mrs. Matthews continued to reside at No. 1 Angier Avenue in the city of Atlanta until after Mr. Matthews's death in 1932; and that she has resided in Fulton County, Georgia, from the death of Mr. Matthews until the present time.

Mrs. J. Edwin Kennedy

Subscribed and sworn to
before me this 1st
day of April, 1933

Helen M. Coleman
Notary Public, Fulton County, Georgia

State of Georgia
County of Fulton.

Personally before the undersigned Authority now
comes R. M. Wright, who upon oath
says that he knows Mrs. Charlie Mathews, and
knows that she was living with her husband Rufus V. Mathews
at the time of his death, that she has not remarried since his
death and is now his dependent widow.
Sworn to and subscribed before me
this 24th day of July 1937

Charles D. Mason
S.O. Ordinary, Fulton Co. Ga.

R. M. Wright

IN THE COUNTY JUDGE'S COURT, MARION COUNTY, FLORIDA.

STATE OF FLORIDA, }
COUNTY OF MARION. } SS.

I, L. E. Futch, County Judge in and for the County of Marion,
State of Florida, do hereby certify that the foregoing is a true
and correct copy of Marriage License and Certificate of Marriage
of Rufus V. Mathews and Mrs. Charlie Smith,

as the same now appears of record and on file in said Court. in
Marriage Record No. 6, page 207/

I FURTHER CERTIFY that the said County Judge's Court is a
Court of Record, with an official seal, and that the Judge of said
Court is the custodian of the records and the seal of said Court;
that said Court has original Jurisdiction of the settlement of the
estates of decedents and minors, to order the sale of real estate
of decedents and minors, to take probate of wills, to grant
letters, testamentary, administration and guardianship, and to
discharge the duties usually pertaining to Courts of Probate; that
said Court has no clerk of Record, but the duties usually per-
formed by a clerk of Record are performed by the Judge of said
Court; that the signature below subscribed is the signature of the
sole and the presiding Judge of said Court; that the seal hereto
affixed is the seal of said Court; and that this attestation is in
due form and by proper officer according to the laws of the State
of Florida.

IN WITNESS WHEREOF: I have hereunto set
my hand and the seal of the County Judge's
Court, at Ocala, this the 24th day of
June A. D. 1937

L. E. Futch
County Judge, Marion County
Florida.

MARRIAGE LICENSE

State of Florida



Marion County

To Any Minister of the Gospel, or any Officer Legally Authorized
to Solemnize the Rite of Matrimony:

Whereas, Application having been made to the County Judge
of Marion County, Florida, for a License for Marriage, and it
appearing to the satisfaction of said County Judge that no legal
impediments exist to the marriage now sought to be solemnized,

These are, Therefore, To authorize you to unite in the

Holy Estate of Matrimony

Rufus V. Mathews and Mrs. Charlie Smith

and that you make return of the same duly certified under your hand to the
County Judge aforesaid.

Witness, W. E. Smith County Judge, and the Seal of said Court at the Court
house in Ocala, this 29 day of January A. D. 1916
(County Judge's Seal) W. E. Smith

I Certify, the within named Rufus V. Mathews
and Mrs. Charlie Smith were by me, the undersigned, duly
united in the Holy Estate of Matrimony by the authority of the within License.

Done this Twenty-ninth day of January A. D. 1916.

WITNESSES:

R. R. Carroll

Mrs. J. A. Campbell

Jas G. Glass

Rector Grace Church
Ocala, Fla.



STATE OF FLORIDA COMPTROLLER'S OFFICE TALLAHASSEE

J. M. LEE,
COMPTROLLER

June 25th, 1937.

Mr. R. E. Lee Reynolds
Attorney & Counselor at Law
503 Haas-Howell Bldg
Atlanta, Ga.

Dear Mr. Reynolds:

Replying to your letter of the 18th,
I wish to advise that Mr. Rufus V. Mathews, Confederate
pensioner #4961, received a pension from this State un-
til his death which occurred on 28th, 1922, under Special
Act of the Legislature of 1913, copy of which is enclosed
herewith.

Yours very truly

J. M. Lee
Comptroller

/B

(County Judge's Seal)

W.E. Smith

I Certify, the within named Rufus V. Mathews

and Mrs. Charlie Smith were by me, the undersigned, duly
united in the Holy Estate of Matrimony by the authority of the within License.

Done this Twenty-ninth day of January A. D. ~~1916~~ 1916.

WITNESSES:

R. H. Carroll

Mrs. J. A. Campbell

Jas G. Glass

Rector Grace Church
Ocala, Fla.

TAYLOR PRINTING COMPANY

/B

J. M. Lee
Comptroller

POWER OF ATTORNEY.

STATE OF GEORGIA.

Fulton County.

Mrs. H. A. Mathews hereby authorize
of her husband John H. Mathews to receive and receipt for the pension paid heron and request that he remit same to
the State of Georgia at her home

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this
day of 14 1901.

Executed in presence of

John H. Mathews

Mrs. H. A. Mathews [L. S.]
Widow

Mathews, Mrs. H. Jackson
Fulton County

To Those Heretofore Paid.

1901.
From Clayton County
No. 203

WIDOW'S PENSION,

For year ending February 15th, 1901.

PAID TO
Mrs. H. A. Mathews
of Fulton County.

Widow of John H. Mathews
deceased

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

January 17 1901,
AND HANDED TO
H. A.

POWER OF ATTORNEY.

STATE OF GEORGIA,

Hulton County.

I, Mrs H A Matheson hereby authorize
J K Matheson of Hulton Co Ga
to receive and receipt for the pension paid hereon and request that he remit same to
the State of Georgia at her Name

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 14
day of 14 1901.

Executed in presence of

J K Matheson

Mrs H A Matheson [L. S.]
Math

Matheson, Mrs. H. A.
Hulton County

To Those Heretofore Paid.

1901
From Clayton County
No. 7803

WIDOW'S PENSION,

For year ending February 14th, 1901.

PAID TO
Mrs. H A Matheson.

J K Matheson
Hulton County

Widow of J K Matheson
Hulton County

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT ISSUED

January 17 1901,

AND HANDED TO

Math

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

OFFICE OF THE
CLERK OF THE COURT

1901 JANUARY 17 1901

For Widows Heretofore Allowed Pensions.

Form No. 1.

STATE OF GEORGIA,
County of Fulton

Personally Comes Mrs.

Mrs. J. A. Mathews

who, being sworn, says on oath, that she is a bona fide resident of said County of Fulton formerly Clayton State of Georgia, and that she has resided in said State continuously ever since all her life. That she is the Widow of Jess Mathews who was a soldier in Company D. of the 44th Regiment of Inf

Volunteers, that he enlisted in said regiment on or about the month of _____ 186 2 and served in the Army up to _____ 186 4. That he lost his life on the 19 day of Oct 18 64 (State here particulars of the husband's death, when, where and from what cause) In the service.

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

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

Sworn to and subscribed before me, this

14th day of Jan 1901.

N. G. Johnson Notary

Mrs. J. A. Mathews
Post Office South Atlanta

State of Georgia,

Fulton County.

Ordinary of said County, certify that I am well acquainted

with Mrs. Jess Mathews who made the above affidavit and am satisfied that the facts therein stated are true, and I know she is the individual she represents herself to be, and that she has continuously resided in this State since the all her life 18 _____

Given under my official signature and seal, this the 14th day of Jan 1901.

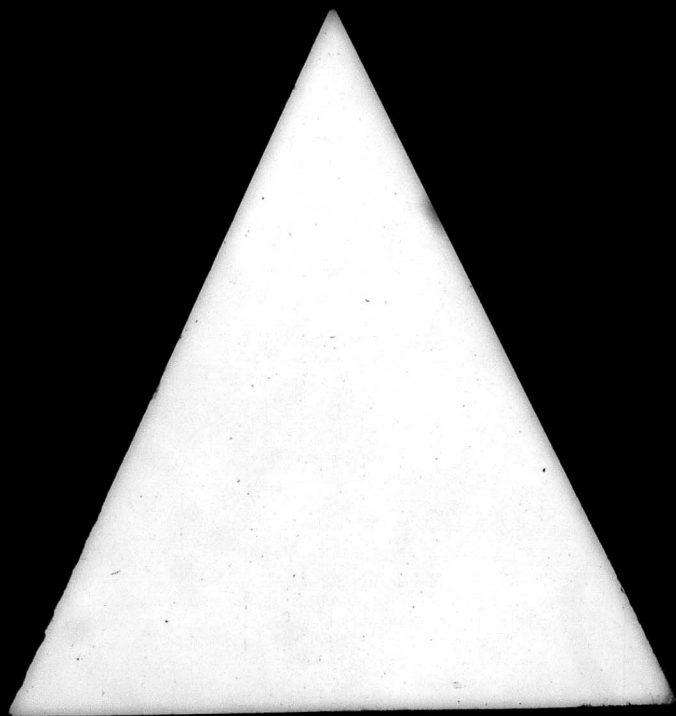
Official Seal.

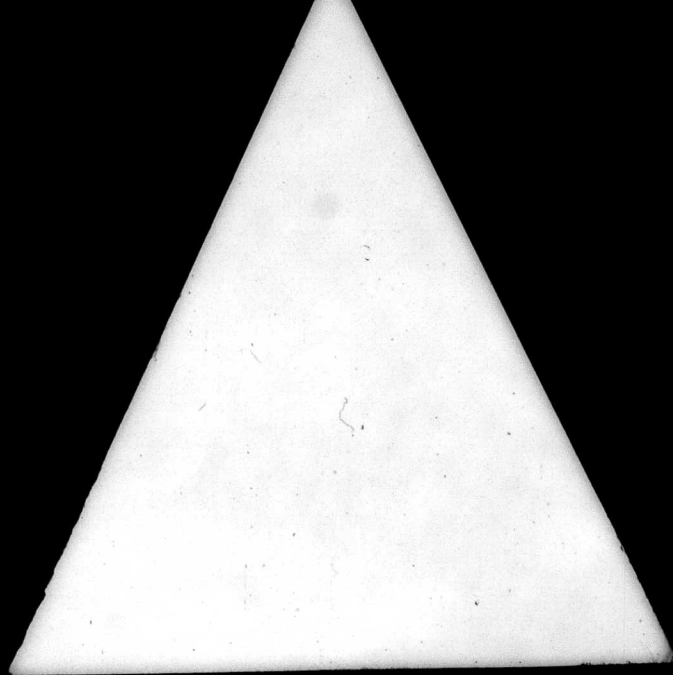
Ordinary of Fulton County.

Georgia }
Clayton County } I J. D. Marston Ordinary in and for said
County do hereby certify that Mrs. J. A. Matthews
has been drawing a pension of sixty dollars
as a widow of an Confederate Soldier from this
County.
Given under my hand and seal of Office this January
11th 1901

J. D. Marston Ordinary of
Clayton County Ga

Clayton County Ga





***LIGHT PRINT AND. OR BAD COPY ***

LIGHT PRINT AND, OR BAD COPY

Matthews, John C.
Des of 1st Regt. Col. 1st
No. *10715-1904*
assigned on account
of property

INDIGENT PENSION.

1904

Name *John C. Matthews*

County *Fulton*

Co. *E 7th Ga. Vol. Regt.*

Approved _____ 190__

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

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

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

9/26/04

10715-1904
This man is
in the line Com
pany of property
different to state
what he can do for
his support
when he is unable
for indigent Pension
him with his time
enough to pay
Matthews
Care of

POWER OF ATTORNEY.
STATE OF GEORGIA,
COUNTY _____

I, _____
do hereby authorize
to receive and receipt for the pension allowed and request that he remit same to _____
at _____ day of _____ 190__
Witness my hand and seal, this _____ day of _____ 190__
Executed in presence of _____
(L.S.)

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

at _____

by _____

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

[L. 8.]

Executed in presence of _____

QUESTIONS FOR APPLICANT.

STATE OF GEORGIA,

COUNTY.

I, John W. Lindsey, of said State and County, desiring to avail myself of the Pension Act (Section 1289 Code), hereby submit his proofs, and after being duly sworn true answers to the following questions, depose and answers as follows:

1. What is your name and where do you reside? (Give State County and post-office). John W. Lindsey, 75th Street, Savannah, Ga.

2. How long and since when have you been a resident of this State? all my life

3. When and where were you born? Savannah, Ga. 1838

4. When and where and in what company and regiment did you enlist or serve? 4 years, Co. G, 7th Reg. Vol. Inf.

5. How long did you remain in such company and regiment? all during the Civil War

6. When and where was your company and regiment surrendered and discharged? Appomattox Court House, Va.

7. Were you present with your company and regiment when it was surrendered? yes

8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority?

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

10. What has been your occupation since 1865? Nothing

11. Upon which of the following grounds do you base your application for pension, viz: first, "age and poverty,"

second, "infirmary and poverty," or third, "blindness and poverty"? Age and infirmity

12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? From childhood, to work four years; Piles + indigestion

13. What property, real and personal, or income, do you possess, and its gross value? Conditionally \$4000 in farm land, income about \$25 per year

14. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868, 1869, 1870, 1871, 1872, 1873, 1874, 1875, 1876, 1877, 1878, 1879, 1880, 1881, 1882, 1883, 1884, 1885, 1886, 1887, 1888, 1889, 1890, 1891, 1892, 1893, 1894, 1895, 1896, 1897, 1898, 1899, 1900, 1901, 1902, 1903, 1904, 1905, 1906, 1907, 1908, 1909, 1910, 1911, 1912, 1913, 1914, 1915, 1916, 1917, 1918, 1919, 1920, 1921, 1922, 1923, 1924, 1925, 1926, 1927, 1928, 1929, 1930, 1931, 1932, 1933, 1934, 1935, 1936, 1937, 1938, 1939, 1940, 1941, 1942, 1943, 1944, 1945, 1946, 1947, 1948, 1949, 1950, 1951, 1952, 1953, 1954, 1955, 1956, 1957, 1958, 1959, 1960, 1961, 1962, 1963, 1964, 1965, 1966, 1967, 1968, 1969, 1970, 1971, 1972, 1973, 1974, 1975, 1976, 1977, 1978, 1979, 1980, 1981, 1982, 1983, 1984, 1985, 1986, 1987, 1988, 1989, 1990, 1991, 1992, 1993, 1994, 1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 2680, 2681, 2682, 2683, 2684, 2685, 2686, 2687, 2688, 2689, 2690, 2691, 2692, 2693, 2694, 2695, 2696, 2697, 2698, 2699, 2700, 2701, 2702, 2703, 2704, 2705, 2706, 2707, 2708, 2709, 2710, 2711, 2712, 2713, 2714, 2715, 2716, 2717, 2718, 2719, 2720, 2721, 2722, 2723, 2724, 2725, 2726, 2727, 2728, 2729, 2730, 2731, 2732, 2733, 2734, 2735, 2736, 2737, 2738, 2739, 2740, 2741, 2742, 2743, 2744, 2745, 2746, 2747, 2748, 2749, 2750, 2751, 2752, 2753, 2754, 2755, 2756, 2757, 2758, 2759, 2760, 2761, 2762, 2763, 2764, 2765, 2766, 2767, 2768, 2769, 2770, 2771, 2772, 2773, 2774, 2775, 2776, 2777, 2778, 2779, 2780, 2781, 2782, 2783, 2784, 2785, 2786, 2787, 2788, 2789, 2790, 2791, 2792, 2793, 2794, 2795, 2796, 2797, 2798, 2799, 2800, 2801, 2802, 2803, 2804, 2805, 2806, 2807, 2808, 2809, 2810, 2811, 2812, 2813, 2814, 2815, 2816, 2817, 2818, 2819, 2820, 2821, 2822, 2823, 2824, 2825, 2826, 2827, 2828, 2829, 2830, 2831, 2832, 2833, 2834, 2835, 2836, 2837, 2838, 2839, 2840, 2841, 2842, 2843, 2844, 2845, 2846, 2847, 2848, 2849, 2850, 2851, 2852, 2853, 2854, 2855, 2856, 2857, 2858, 2859, 2860, 2861, 2862, 2863, 2864, 2865, 2866, 2867, 2868, 2869, 2870, 2871, 2872, 2873, 2874, 2875, 2876, 2877, 2878, 2879, 2880, 2881, 2882, 2883, 2884, 2885, 2886, 2887, 2888, 2889, 2890, 2891, 2892, 2893, 2894, 2895, 2896, 2897, 2898, 2899, 2900, 2901, 2902, 2903, 2904, 2905, 2906, 2907, 2908, 2909, 2910, 2911, 2912, 2913, 2914, 2915, 2916, 2917, 2918, 2919, 2920, 2921, 2922, 2923, 2924, 2925, 2926, 2927, 2928, 2929, 2930, 2931, 2932, 2933, 2934, 2935, 2936, 2937, 2938, 2939, 2940, 2941, 2942, 2943, 2944, 2945, 2946, 2947, 2948, 2949, 2950, 2951, 2952, 2953, 2954, 2955, 2956, 2957, 2958, 2959, 2960, 2961, 2962, 2963, 2964, 2965, 2966, 2967, 2968, 2969, 2970, 2971, 2972, 2973, 2974, 2975, 2976, 2977, 2978, 2979, 2980, 2981, 2982, 2983, 2984, 2985, 2986, 2987, 2988, 2989, 2990, 2991, 2992, 2993, 2994, 2995, 2996, 2997, 2998, 2999, 3000, 3001, 3002, 3003, 3004, 3005, 3006, 3007, 3008, 3009, 3010, 3011, 3012, 3013, 3014, 3015, 3016, 3017, 3018, 3019, 3020, 3021, 3022, 3023, 3024, 3025, 3026, 3027, 3028, 3029, 3030, 3031, 3032, 3033, 3034, 3035, 3036, 3037, 3038, 3039, 3040, 3041, 3042, 3043, 3044, 3045, 3046, 3047, 3048, 3049, 3050, 3051, 3052, 3053, 3054, 3055, 3056, 3057, 3058, 3059, 3060, 3061, 3062, 3063, 3064, 3065, 3066, 3067, 3068, 3069, 3070, 3071, 3072, 3073, 3074, 3075, 3076, 3077, 3078, 3079, 3080, 3081, 3082, 3083, 3084, 3085, 3086, 3087, 3088, 3089, 3090, 3091, 3092, 3093, 3094, 3095, 3096, 3097, 3098, 3099, 3100, 3101, 3102, 3103, 3104, 3105, 3106, 3107, 3108, 3109, 3110, 3111, 3112, 3113, 3114, 3115, 3116, 3117, 3118, 3119, 3120, 3121, 3122, 3123, 3124, 3125, 3126, 3127, 3128, 3129, 3130, 3131, 3132, 3133, 3134, 3135, 3136, 3137, 3138, 3139, 3140, 3141, 3142, 3143, 3144, 3145, 3146, 3147, 3148, 3149, 3150, 3151, 3152, 3153, 3154, 3155, 3156, 3157, 3158, 3159, 3160, 3161, 3162, 3163, 3164, 3165, 3166, 3167, 3168, 3169, 3170, 3171, 3172, 3173, 3174, 3175, 3176, 3177, 3178, 3179, 3180, 3181, 3182, 3183, 3184, 3185, 3186, 3187, 3188, 3189, 3190, 3191, 3192, 3193, 3194, 3195, 3196, 3197, 3198, 3199, 3200, 3201, 3202, 3203, 3204, 3205, 3206, 3207, 3208, 3209, 3210, 3211, 3212, 3213, 3214, 3215, 3216, 3217, 3218, 3219, 3220, 3221, 3222, 3223, 3224, 3225, 3226, 3227, 3228, 3229, 3230, 3231, 3232, 3233, 3234, 3235, 3236, 3237, 3238, 3239, 3240, 3241, 3242, 3243, 3244, 3245, 3246, 3247, 3248, 3249, 3250, 3251, 3252, 3253, 3254, 3255, 3256, 3257, 3258, 3259, 3260, 3261, 3262, 3263, 3264, 3265, 3266, 3267, 3268, 3269, 3270, 3271, 3272, 3273, 3274, 3275, 3276, 3277, 3278, 3279, 3280, 3281, 3282, 3283, 3284, 3285, 3286, 3287, 3288, 3289, 3290, 3291, 3292, 3293, 3294, 3295, 3296, 3297, 3298, 3299, 3300, 3301, 3302, 3303, 3304, 3305, 3306, 3307, 3308, 3309, 3310, 3311, 3312, 3313, 3314, 3315, 3316, 3317, 3318, 3319, 3320, 3321, 3322, 3323, 3324, 3325, 3326, 3327, 3328, 3329, 3330, 3331, 3332, 3333, 3334, 3335, 3336, 3337, 3338, 3339, 3340, 3341, 3342, 3343, 3344, 3345, 3346, 3347, 3348, 3349, 3350, 3351, 3352, 3353, 3354, 3355, 3356, 3357, 3358, 3359, 3360, 3361, 3362, 3363, 3364, 3365, 3366, 3367, 3368, 3369, 3370, 3371, 3372, 3373, 3374, 3375, 3376, 3377, 3378, 3379, 3380, 3381, 3382, 3383, 3384, 3385, 3386, 3387, 3388, 3389, 3390, 3391, 3392, 3393, 3394, 3395, 3396, 3397, 3398, 3399, 3400, 3401, 3402, 3403, 3404, 3405, 3406, 3407, 3408, 3409, 3410, 3411, 3412, 3413, 3414, 3415, 3416, 3417, 3418, 3419, 3420, 3421, 3422, 3423, 3424, 3425, 3426, 3427, 3428, 3429, 3430, 3431, 3432, 3433, 3434, 3435, 3436, 3437, 3438, 3439, 3440, 3441, 3442, 3443, 3444, 3445, 3446, 3447, 3448, 3449, 3450, 3451, 3452, 3453, 3454, 3455, 3456, 3457, 3458, 3459, 3460, 3461, 3462, 3463, 3464, 3465, 3466, 3467, 3468, 3469, 3470, 3471, 3472, 3473, 3474, 3475, 3476, 3477, 3478, 3479, 3480, 3481, 3482, 3483, 3484, 3485, 3486, 3487, 3488, 3489, 3490, 3491, 3492, 3493, 3494, 3495, 3496, 3497, 3498, 3499, 3500, 3501, 3502, 3503, 3504, 3505, 3506, 3507, 3508, 3509, 3510, 3511, 3512, 3513, 3514, 3515, 3516, 3517, 3518, 3519, 3520, 3521, 3522, 3523, 3524, 3525, 3526, 3527, 3528, 3529, 3530, 3531, 3532, 3533, 3534, 3535, 3536, 3537, 3538, 3539, 3540, 3541, 3542, 3543, 3544, 3545, 3546, 3547, 3548, 3549, 3550, 3551, 3552, 3553, 3554, 3555, 3556, 3557, 3558, 3559, 3560, 3561, 3562, 3563, 3564, 3565, 3566, 3567, 3568, 3569, 3570, 3571, 3572, 3573, 3574, 3575, 3576, 3577, 3578, 3579, 3580, 3581, 3582, 3583, 3584, 3585, 3586, 3587, 3588, 3589, 3590, 3591, 3592, 3593, 3594, 3595, 3596, 3597, 3598, 3599, 3600, 3601, 3602, 3603, 3604, 3605, 3606, 3607, 3608, 3609, 3610, 3611, 3612, 3613, 3614, 3615, 3616, 3617, 3618, 3619, 3620, 3621, 3622, 3623, 3624, 3625, 3626, 3627, 3628, 3629, 3630, 3631, 3632, 3633, 3634, 3635, 3636, 3637, 3638, 363

STATE OF GEORGIA.

Hutton COUNTY.

G. W. L. Power of said State and County, having been presented as a witness in support of the application of John V. Matthews 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? *935 N. 2, Howell*
235 Beckles St Atlanta Ga
2. Are you acquainted with *John B. Mathew*, the applicant; if so, how long have you known him? *ever since 1961*
3. Where does he reside, and how long and since when has he been a resident of this State?
983 Maratta St Atlanta Ga
4. When, where and in what company and regiment did he enlist, and how do you know?
Co E 7th Cal Infantry
5. Were you a member of the same company and regiment? *yes*
6. How long did he perform regular military duty? *during the war*
7. When and where was his command surrendered? *Appomattox Court House*

8. Were you present when it surrendered? yes
9. Was applicant present? yes
10. If he was not present, where was he?
- When did he leave his command? _____ For what cause? _____
- By what authority he left? By order _____ How do you know all of this?
I was present

11. What property, effects or income has the applicant? (Give your means of knowledge.)
Don't know
12. What property, effects or income did the applicant possess in 1896, 1897, 1898, 1899, 1900, 1901 and 1902, and what disposition, if any, did he make of same? *don't know*

13. Has he conveyed away any of his property in the last four years; if so, what was it, and to whom? don't know
14. What is the applicant's occupation and physical condition? feeble

15. Is the applicant unable to support himself by labor of any sort; if so, why? He states so

16. How was he supported during the years 1898, 1899, 1900, 1901 and 1902? *don't know*

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? Physically unable to earn a living

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

20. What interest have you in the recovery of a pension by this applicant? None
Sworn to and subscribed before me, this 10th day of September 1907.
John F. Wickham Ordinary. G. W. L. Powell Witness. (2)

STATE OF GEORGIA.

Lulton COUNTY

Personally came before me. W. L. Vinson

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

He had indigestion and Pile so he
 Cant Eat on left and looz and he
 is old and very little out of which
 renders him unable to earn a support
 by manual labor

Sworn to and subscribed before me, this, the }
24 day of September, 1904 }
John C. Redman } Ordinary

STATE OF GEORGIA.

Fuller COUNTY

I, John F. Winkler Ordinary, in and for said County, hereby certify that the applicant John F. Halliwell resides in said County, and has been a bona fide resident of this State since the 31st day of May 1898 and that the witnesses, viz.: Wm. L. Powell

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

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

I further certify that the tax digest of _____ County shows that applicant
returned for taxation in his name in 1899 _____ Dollars of
property, and in 1900 _____ Dollars of property; in 1901 _____ Dollars of property; in 1902 _____ Dollars of property.

In my opinion the foregoing claim is _____ made in good faith _____
 Witness my hand and seal of office, this 22 day of September, 1904
John P. Wilkinson Ordinary,
 of Fulton County.

NOTE

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

8. Additional affidavits may be attached if blank spaces are insufficient.

9. In every case the Ordinary must certify to the character of the witness, and as to the execution of the proof as above set out.

APPLICATION FOR SOLDIER'S PENSION UNDER ACT 1910.

Questions for Applicants to Answer.

STATE OF GEORGIA.

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

What is your name and where do you reside? (Give County and Post-office)
J. B. Mathews Paulding County Atlanta Ga
 How long and since when have you been a continuous resident citizen of this State?
7 1/2 years from 22/5/83

Did you enlist in the Army of the Confederate States or of the Organized Militia of this State from 1861 to 1865?
Confederate State

When and where, and in what Company and Regiment did you enlist? (Give the arm and class of Service)
July 1861 Marietta Ga Company 8780

How long did you remain in the actual Military Service with said Company and Regiment? (Give date of discharge)
Nearly 4 years from July 1861 to Nov 1864

When and where was your Company and Regiment surrendered or discharged from the Service?
April 9th 1865 Appomattox Va

Were you actually present with your Command when it was surrendered or discharged?
I was

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

Where was your Command when you left it?
did not leave

When did you leave the Command?
Summation

For what cause did you leave?
was over

By whose authority did you leave?
was closed

For how long was your leave granted? In what way?
no leave

Why did you not return to your Command after leave expired?
was over

In what way were you prevented?
was over

What effort did you make to return?
no

Were you captured during the war?
no

If so, when, and where? In what prison were you held and when were you released?
no

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)
Land in Sand Lot No 125 acres in Paulding County Ga valued at \$200.00

What property of any kind have you or your wife disposed of and for what purpose since 4 Nov, 1908. To whom and for what price?
none

What property of any description of any kind, and of any value now owned and in the use, possession and control of yourself and wife, and its cash value? (Make itemised list)
125 acres in Sand Lot No 125 in Paulding County Ga

What annual or monthly income or earnings of yourself and wife and the source derived have you?
75.00 from rent of house

Are you drawing a pension of any amount from this State or the United States?
no

Have you ever applied for the Georgia Pension and had it refused? and for what cause it was not allowed?
yes on account of disability

Sworn to and subscribed by me this the _____ day of _____ 1910.

Subscribed and sworn to before me this _____ day of _____ 1910.

Notary Public for the State of Georgia.

of _____ County.

Soldier's Application.

UNDER ACT 1910.

Confederate

Paulding

Mathews J. B.

Paulding Co

22/5/83

Paulding

Paulding

Paulding

Paulding

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QUESTIONS FOR WITNESS AS TO SERVICE.

STATE OF GEORGIA,

Dekalb County.

J. L. Beck of said Dekalb County is hereby presented as a witness in support of the application of J. P. Matthews for the pension provided by the Act of 1910, in said State, and after being sworn true answers to the questions propounded, answers as follows:

1. What is your name and where do you reside?
J. L. Beck Adamswood, Dekalb County, Ga.

2. How long and since when have you known J. P. Matthews the applicant?
49 years July 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?
Knowledge 49 years Adamswood, Dekalb County, Ga.

4. When, where and in what Company and Regiment did J. P. Matthews enlist during the war from 1861 to 1865? (Give date and place)
July 1861, Washington, D.C., 2nd Regt. Ill. Cav.

5. How did you obtain your information of this service?
He told me of his own knowledge.

6. How long within your own personal knowledge did he perform actual military service with this Company and Regiment? (give date)
July 1861 to April 9, 1865.

7. When and where was his Command surrendered or discharged (give date and place)
April 9, 1865, Appomattox, Va.

8. Were you personally present at the Surrender?
Yes

9. If not, where were you and how came you there?
Present

10. Was the applicant personally present with his Command at surrender?
He was

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

12. When did he leave his Command?
Surrendered

13. When did he leave his Command?
When he left it, Appomattox, Va.

14. By whose authority did he leave?
When was over

15. How long was he granted leave?
When was over

16. All that you have related to be true? If of your own knowledge (Tell clearly and specifically)
I will

17. In what way was he prevented from returning to his Command?
When was over

18. How do you know?
Was present

19. What effort did he make to return to his Command and how do you know?
When was over

20. Was applicant captured as a prisoner?
No

21. In what prison was he held?
No

22. When released?
No

Sworn to and subscribed before me, this the
15 day of April 1912

J. L. Beck Ordinary.

Dekalb County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA,

Dekalb County.

Personally before me comes J. P. Matthews who on oath

says that they are free holders residing in said County and we know the applicant for pension and we know the property that is now in the possession and control of himself

and wife and of its cash value to wit: (Make list by items and value)
1200.00

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.

1908? (State it fully by items.) None

2. When and to whom was it sold or given to?
None

3. What was the price paid or stated to be paid?
None

4. What relation is the party to applicant?
None

5. What disposition was made of the proceeds of the sale?
None

6. Was the disposition of this property made in good faith and full value?
None

or was it made to obtain a pension?
None

Sworn to and subscribed before me, this the
15 day of April 1912

J. H. Carroll Ordinary.

Dekalb County.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Dekalb County.

I, J. H. Carroll Ordinary of said County, certify that I know

the applicant J. P. Matthews for Pension is the person he represents himself to be and resides in

said County. Dekalb the witness swearing to the

service and J. H. Carroll who are free holders, that

they are all residents of said County and were duly sworn by me before signing the foregoing affidavit and

they are all truthful and trustworthy and their statements are entitled to full faith and credit. That the

Tax Results of J. P. Matthews shows that and wife

value for tax is in 1908 None for 1909 None for 1910 None

under my hand and official seal of office this 15 day of April 1912

J. H. Carroll Ordinary.

of Dekalb County.

NOTES 1. Before any questions are answered the Ordinary shall swear applicant and all witnesses in the following words

"You do solemnly swear that you will true answers make to each question asked you and the evidence you

shall give shall be the whole truth; so help you God."

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

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

4. If applicant has no property at all in his possession, use or control of self and wife, affidavits of Free holders

unnecessary.

This is to certify that J. P. Matthews is a man of good character and his State is a man of full faith and credit.

This is to certify that I and his date when

15th day of Sept 1912 } J. L. R. W.
James R. Sledge } Ordinary
DeKalb } County.

AFFIDAVIT OF TWO FREEHOLDERS.

STATE OF GEORGIA }
Fulton } County.

Personally before me comes _____ who on oath
says that they are free holders residing in said County and we know J. F. Mathews
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) 125 Acres of Land
DeKalb

1. What property, if any, has been sold or given away by the applicant or his wife since 4 Nov.

G. G. ROBINSON,
ORDINARY GWINNETT COUNTY.

LAWRENCEVILLE, GA.,

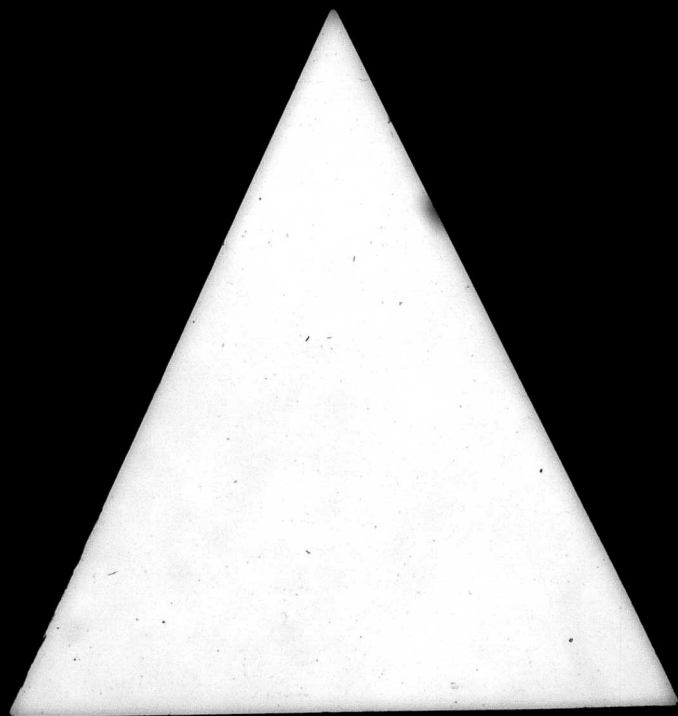
Georgia Gwinnett County,

In Person appeared before me, S.D. Pittard, who on oath says
that he is a free holder residing in said county, and that he
knows, J.F. Mathews, the applicant for pension and he knows the ~~xxx~~
property that is now in the use, possession and control of him-
self and wife and its cash value to-wit;
125 Acres of land \$900.00, ? And further certifies that this
land is all the property he has.

S. D. Pittard

Sworn to and Subscribed to before me,
This September 1910,

G. G. Robinson Ordinary.



Director Confederate Records
Div.

County **FULTON**
Name **MRS. LOLA B. MATHEWS**
Widow of **WILLIAM SANFORD MATHEWS**
Date of Marriage **Aug. 31, 1888**
Date of Husband's Death **Dec. 1, 1925**
Company **Co. Light Battery**
Regiment **Co. Light Battery**
Approved **DEC 27 1937**
Director.

STATE OF GEORGIA,

SECTION _____ **COUNTY** _____

1. THOMAS H. JEFFRIES

that I know Mrs. Lola B. Matthews

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

Mrs. F. B. Leach

Mrs. W.B. Lackey

the witnesses who swear to the ~~accuracy of the foregoing~~ 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 23 day of August, 1937.

(SEAL OF ORDINARY)

Ordinary

[illegible]

State Dept. Public Welfare,
Atlanta, Ga., Nov. 18, 1937.

Wm. S. Mathews enlisted as a
private in the 1st Battery
Ga. Light Artillery, 1862.
Discharged disabled
by lifting heavy artillery
gun, Sept. 9, 1862.

Detailed for light duty, guard
duty, etc., Aug. 1864. Surren-
dered, March, Ga., Apr. 1865.

Paid a pension, Jackson
County, Ga., account disa-
bilities received in line of
duty, 1920.

John B. Mathews
Director Confederate Records
Div.

Widow's Application

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

County FULTON
Name MRS. LOLA B. MATHEWS
Widow of WILLIAM SANFORD MATHEWS
Date of Marriage Aug. 31, 1898
Date of Husband's Death Dec. 1, 1925
Company Co. Light Artillery
Regiment 1st Light Artillery
Approved Dec. 27, 1937
Director

AUG 26 1937

Ordinary's Certificate

STATE OF GEORGIA,

Fulton COUNTY.

I, THOMAS H. JEFFRIES, Ordinary of said County, do certify
that I know Mrs. Lola B. Mathews, 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 Mrs. W. B. Leakey,
the witness who swears to the ~~several~~ 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 28 day of August, 1937.
(SEAL OF ORDINARY) Thomas H. Jeffries, Ordinary,
of Fulton County.

INSTRUCTIONS:

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

APPLICATION FOR PENSION BY A WIDOW OF A CONFEDERATE SOLDIER

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

QUESTIONS FOR APPLICANT TO ANSWER:

STATE OF GEORGIA,

FULTON COUNTY.

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

SECTION I.

- What is your name, and where do you reside? (Give Post Office and County) Mrs. Lola B. Mathews, 50 Little St. S.E. Atlanta, Ga. Fulton County
- 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. Aug. 16, 1875 Age? 61
- (1) When, (2) where and (3) to whom were you married? (1) Aug. 31, 1898
(2) Jefferson, Ga. (2) William Sanford Mathews
- Have you married since the death of first and soldier husband? No
- When and where did your first husband die? Dec. 1, 1925 Center, Ga.
- Were you residing together when he died? Yes
- If not, how long had you resided apart?
- Are you now a widow? Yes
- Have you or your husband heretofore been paid a pension by the State? Husband - (Jackson, County)
- If so, when and for what cause were you or your husband placed on the roll? Confederate Veteran

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.

- When and where did the Commands of your husband surrender or discharge from the Service?
- Was your husband personally present with his Command when it was surrendered or discharged?
- If he was not present, state specifically and clearly where he was?
- When did he leave the Command?
- For what cause did he leave?
- By whose authority did he leave?
- For how long was his leave of absence granted? d. In what way?
- What was his physical condition when he left his Command?
- What effort did he make to return to his Command?
- In what way was he prevented from going back to his Command?
- Was he captured by the enemy at any time?
- If so, when and where? In what prison was he held and when was he released?

Sworn to and subscribed before me, this the

28 day of August, 1937.
John B. Mathews, Ordinary
of FULTON County.
(SEAL OF ORDINARY)

Mrs. Lola B. Mathews
Applicant.

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

Sworn to and subscribed before me, this the

2 day of AUGUST, 1937

H. J. Kemp, C. Ordinary

of FULTON County.

(SEAL OF ORDINARY)

Applicant.

State of Georgia
County of Fulton.

Personally before the undersigned authority now
comes Mrs. W. B. Lackey who upon oath
says that she knows Mrs. Lola B. Mathews and
knows that she was living with her husband William Sanford Mathews
at the time of his death, that she has not remarried since his
death and is now his dependent widow.

Sworn to and subscribed before me

this 2 day of AUG. 1937

H. J. Kemp
C. O. Ordinary, Fulton Co. Ga.

Mrs. W. B. Lackey

STATE DEPARTMENT OF PUBLIC WELFARE

HURT BUILDING

ATLANTA

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

WHEREAS:

MRS. LOLA B. MATHEWS, WIDOW OF WM. SANFORD MATHEWS,

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

ORDERED:

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

This, the 27th day of December 1937.

R. F. Gillen
Director, Confederate Division
State Department of Public Welfare

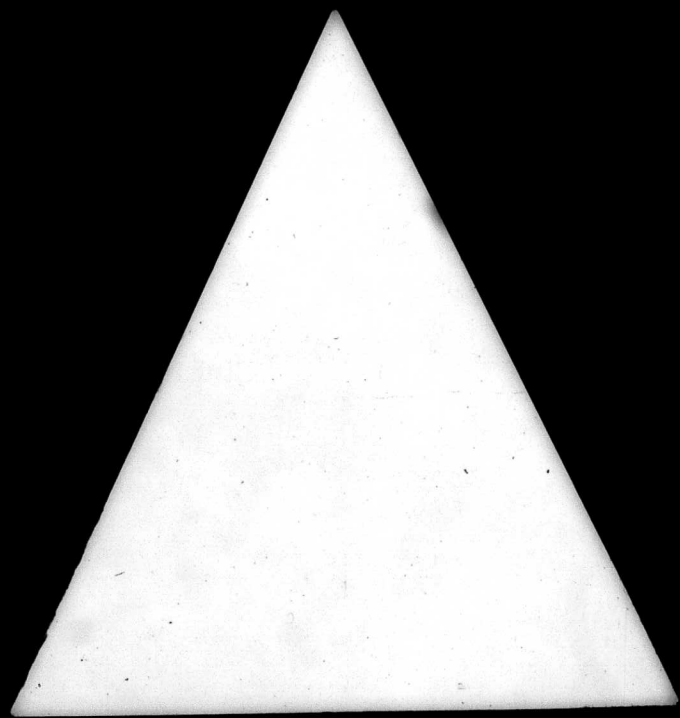
STATE OF GEORGIA

Clerk of Superior Court

This Certifies that W.S. Mathews,
and Lola A. Farnett
WERE UNITED IN THE HOLY BONDS OF MATRIMONY
By W.P. Boggs, N.P. & J.P.
On the 31st day of August, in the year of our Lord 1937 1898
as appears of record in my office in Marriage Record, book H,
page 188. This 4th day of August, 1937

Form 120

W.W. Dickson
W.W. Dickson,
Ex-officio Clerk Court and
Ordinary



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

Form No. 2.

STATE OF GEORGIA, County of Fulton
J. E. Callahan Ordinary in and for said County of
Fulton State of Georgia, hereby certify that I am acquainted with Mrs.
Mary E. Matthews 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
William H. Matthews 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
20 day of February, 1893.
J. E. Callahan Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA,
Know ALL MEN BY THESE PRESENTS, That I, _____ County,
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 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 _____, 1893.

[L.S.]

Executed in the presence of us:

DIRECTIONS.

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

Mathews, Mary E.
Fulton County
FOR THOSE HERETOFORE PAID.

1893.
J. E. Callahan 1893
To February 15th 1894
No. 720

Widows' Pension,

for year ending February 15th, 1893.

—PAID TO—

Mrs. Mary E. Matthews

—OF—

Fulton COUNTY.
J. E. Callahan

Warrant Issued

720 1893

AND HANDED TO

Applicant

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

Form No. 2.

STATE OF GEORGIA, County of Fullon
 I, M. E. Calhoun Ordinary in and for said County of
Fullon State of Georgia, hereby certify that I am acquainted with Mrs.
Mary E. Matthews 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
William H. Matthews deceased, and as such has heretofore been allowed a
 pension for the year ending February 15th 1892.

In Witness Whereof, I have hereunto set my hand and affixed the seal of my office, this, the
20th day of February 1893.

M. E. Calhoun Ordinary.

POWER OF ATTORNEY.

Form No. 2.

STATE OF GEORGIA, _____ County.

Know ALL MEN BY THESE PRESENTS, That I,

_____ of _____
 County, in said State, do hereby appoint _____
 of _____ my true and lawful attorney in fact, for

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

In WITNESS WHEREOF, I have hereunto set my hand and seal, this
 day of _____ 189____

Executed in the presence of: _____ [L. S.]

DIRECTIONS.

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

Widow's Pension.

for year ending February 15th, 1893.

PAID TO

Mary E. Matthews

—OF—

Fullon COUNTY.

Warrant Issued

772 1893

AND PAID TO

Applicant

Geo. W. Matthews, State Treasurer, Atlanta.

FOR THE YEAR ENDING FEBRUARY 15th, 1893.

1893.

Matthews, Mary E.
Fullon County
20 February 1893

For Widows' Heretofore Allowed Pensions.

STATE OF GEORGIA,

County of Fulton

Personally comes Mrs.

Mary E. Matthews

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

Fulton State of Georgia, and that she has resided in said Statecontinuously ever since all her life That she is the Widow ofW. H. Matthews who was a Soldier in CompanyK of the 36 Regiment of GeorgiaVolunteers, that he enlisted in said Regiment on or about the month of 1st May1862 and served in the Army up to July 1864 That he lost hislife on the _____ day of July 1864 (State here

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

Killed as a supernumerary between
Dalton + Atlanta Ga
and has never been heard
of since July 1864

Deponent swears that she was the wife of said deceased soldier during his service in the army as a soldier; and that she has never married since his death aforesaid, that she became his wife in the year 1860; that Georgia is her home and she resided in this State 23d day of December, 1890, and has not lived in any other State or locality since that date. I have been allowed a pension 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

20th day of February, 1893.W. L. Williams Ordinary.

Post-office

Atlanta GaMrs Matthews, seen last year in Summit Ga

in the year 1842, 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
20th day of February 1893.
W. L. G. ~~W. L. G.~~ Ordinary.

^{him}
Moag E. Killeath
Mark
Post-office Atlanta Ga.

Mrs. Martha Ann Lee last year in Summit Co

Mathis J. S.
Fulton Co.

On No. 1902 22

INDIGENT PENSION,
1900.
1902

Name J. S. Mathis
Co. 30th
County Fulton

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT HANDED TO

Geo. W. Harrison, State Printer, Albany.
7/25-1901-7/25-1902

Pension Office - 9-25-1901.

Applicant is not an aged man.
Affirmative not proven that he is
cannot earn his support.

J. W. Lindsey,
Com. of Pensions.

STATE OF GEORGIA,
Power of Attorney.
County. }

I, _____ of _____
do hereby authorize
to receive and receipt for the pension allowed, and request that he remit same to
at _____ by _____
Witness my hand and seal, this _____ day of _____ 1900.
Executed in presence of _____
(L. S.)

Power of Attorney.

STATE OF GEORGIA,

County.

I, _____ hereby authorize

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

at _____ by _____

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

Executed in presence of _____

[L. 8.]

Pension Office - 8-25-1901.

Applicant is not an aged man. Information not given that he cannot earn his support.

J. W. Lindsey,
Com. of Pensions.

Mathis & Co.,
Fulton G.

On No. 1902 22

INDIGENT PENSION,

1900.

1902

Name J. D. Mathis

County Fulton

Approved _____ 1900.

JOHN W. LINDSEY,
Commissioner of Pensions.

WARRANT FORWARDED TO

7/20-1901-125-1902

Questions for Applicant.

STATE OF GEORGIA,

County.

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

1. What is your name and where do you reside? (give State, County and post office) J. D. Mathis, Fulton, Fulton County Ga.
2. How long and since when have you been a resident of this State? 55 Years.
3. When and where were you born? I came from S. C. in 1846.
4. When and where and in what company and regiment did you enlist or serve? June 1st 1864, at Athens Ga. Co. 3rd Ga. Cavalry of Cavalry.
5. How long did you remain in such company and regiment? Eleven (11) Months and eleven (11) days.
6. When and where was your company and regiment surrendered and discharged? May 12th 1865, at Kingston Ga. Surrendered with Gen. Wofford to Gen. Judah U. S. Army.
7. Were you present with your company and regiment when it was surrendered? Yes.
8. If not present, state specifically and clearly where you were, when you left your command, for what cause and by whose authority? You may but your sweet life I was "right there"
9. How much can you earn (gross) per annum by your own exertions or labor? \$10.00
10. What has been your occupation since 1865? Working for 13 years since when I have been practically unable to work
11. Upon which of the following grounds do you have your application for pension, viz: first, "age and poverty," second, "infirmary and poverty," or third, "blindness and poverty"? The 2nd
12. If upon the first ground, state how long you have been in such condition that you could not earn your support? If upon the second, give a full and complete history of the infirmity and its extent? If upon the third, state whether you are totally blind and when and where you lost your sight? I had my left hand in a rock quarry in 1872, and in 1873 I was struck by lightning, partially paralyzed from which I have never recovered, but get some as age advances.
13. What property, real or personal, or income, do you possess, and its gross value? I do not own any property, real or personal.
14. What property, real or personal, did you possess in 1864, 1865, 1866, 1867, 1868 and 1869, and what disposition, if any, by sale or gift, have you made of same? I had none.
15. In what County did you reside during those years, and what property did you then return for taxation? In Fulton County. Returned nothing.
16. How were you supported during the years 1868 and 1869? By my relatives principally.
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? At cost \$50.00 I suppose. 10 or 12 dollars
18. What was your employment during 1868 and 1869? What pay did you receive in each year? I have been occasionally hired perhaps \$10.00
19. Have you a family? If so, who composes such family? Give their means of support? Have they a homestead? I have a wife. She has a homestead valued at \$225.00 off of which she manages to support herself and help to support me.
20. Are you receiving any pension? If so, what amount and for what disability? None
21. Have you ever made an application for pension before? I have
22. How many applications have you ever made and under what class? One, and under same class as this application

Sworn to and subscribed before me this the _____ day of _____ 1900.

J. D. Mathis
Applicant,
of Fulton County.

Every Question MUST be Answered.

QUESTIONS FOR WITNESS.

STATE OF GEORGIA,

Gulton COUNTY.

J. B. Mathis of said State and County, having been presented as a witness in support of the application of J. B. Mathis for pension under Section 1254, Code, and after being duly sworn true answers to the following questions, deposes and answers as follows:

1. What is your name and where do you reside? J. B. Mathis
Gulton County, Georgia
2. Are you acquainted with J. B. Mathis, the applicant; if so, how long have you known him? I am; have known him all my life.
3. Where does he reside, and how long and since when has he been a resident of this State? Gulton, Gulton Co., Ga. has been here as long as I can remember.
4. When, where and in what company and regiment did he enlist, and how do you know? Dec 1864 at Athens Ga. 10th Va. Inf. Co. I was then a member of said Co.
5. Were you a member of the same company and regiment? I was
6. How long did he perform regular military duty? Eleven Months & 11 days
7. When and where was his command surrendered? May 12th 1865 at Kingston Ga.
8. Were you present when it surrendered? Yes.
9. Was applicant present? He was
10. If he was not present, where was he? Present
When did he leave his command? did not For what cause? leave at all
By what authority he left? did not leave How do you know all of this?
I was present

11. What property, effects or income has the applicant? (Give your means of knowledge.) None
time near him have the best of means for knowing.
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? Had no property or income and never owned a foot of land in his life.
13. Has he conveyed away any of his property in the last four years, if so, what was it, and to whom? Had none to convey.
14. What is the applicant's occupation and physical condition? Idle a little
He is one handed, partially paralyzed and unable to perform manual labor.
15. Is the applicant unable to support himself by labor of any sort, if so, why? He is
because of the loss of left hand, old age, general debility, involving partial paralysis.
16. How was he supported during the years 1898 and 1899? Worthily by his wife & relatives
17. What portion of his support for these two years was derived from his own labor or income? Perhaps one fourth, or even less.
18. Give a full and complete statement of the applicant's physical condition that entitles him to a pension under Section 1254, Code? He is 63 years old and naturally feeble
he has but one hand, his eye sight badly fails, his right
left side nearly totally with out feeling or strength of motion.
19. What interest have you in the recovery of a pension by this applicant? I have none

Sworn to and subscribed before me, this 10th day of June, 1906. J. B. Mathis Witness.
John R. Wilkinson Ordinary.

AFFIDAVIT OF PHYSICIANS.

STATE OF GEORGIA,

Gulton COUNTY.

Personally came before me J. B. Mathis and N. B. Pope M.D., both known to me as reputable physicians of said County, who, being severally sworn, say on oath that they have examined carefully

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

We find from our examination that applicant
left hand is off about the wrist joint.
He has general debility including partial
paralysis.

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

Sworn to and subscribed before me, this 25th day of June, 1906. John R. Wilkinson Ordinary.
R. B. Pope M.D.

ORDINARY'S CERTIFICATE.

STATE OF GEORGIA,

Gulton COUNTY.

I, John R. Wilkinson, Ordinary in and for said County, hereby certify that the applicant J. B. Mathis resides in said County, and has been a bona fide resident of this State since the 10th day of June, 1906, and that the witnesses, viz: J. B. Mathis

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 of them took the oath heron prescribed, and that the full text of the affidavits was read to the applicant and before same was signed.

I further certify that the tax digests of Gulton County show that applicant returned for taxation in his name in 1898, 1899 Dollars of property, and in 1899, 1900 Dollars of property.

In my opinion the foregoing claim is made in good faith.
Witness my hand and seal of office, this 25th day of June, 1906.
John R. Wilkinson Ordinary,
of Gulton County.

NOTE.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

Fulton County.

I, J. S. Mathis hereby authorize
Wm. Fisher of Said County & State
to receive and receipt for the pension allowed and request that he remit same to
me at in person
by in City

Witness my hand and seal, this 20 day of Jan 1903.

Executed in presence of

John W. Lindsey
Commissioner of Pensions

J. S. Mathis [L. S.]

POWER OF ATTORNEY.

STATE OF GEORGIA,

_____ County.

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

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

Executed in the presence of

[L. S.]

Mathis, J. S.
Fulton County
CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 157

INDIGENT

**SOLDIER'S PENSION
1903.**

Name J. S. Mathis

County Fulton

Co. 4 Regiment 3rd

Wm. Fisher

WARRANT ISSUED

1/20 1903

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Wm. Fisher

Gen. Harrison, State Printer, Atlanta.

No data

Mathis, J. S.
Fulton Co
CODE SECTION 124.
(FOR THOSE ALREADY ENROLLED.)

No. 157

INDIGENT

**SOLDIER'S PENSION
1904.**

Name J. S. Mathis

County Fulton

Co. 4 30 Regiment 3rd

Wm. Fisher

WARRANT ISSUED

1/20 1904

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Wm. Fisher

Gen. Harrison, State Printer, Atlanta.

No data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,
Fulton.

County.

Personally appears J. S. Mathis of said
County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen
and resident of said County and State, and has resided in said State continuously ever
since the _____ day of _____ 1846; that he is Ann 1838 years old and
by occupation a Fanner, 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 11 mos in Company 4, of 32th Regiment
of Geo. Bath of Cal.; that his physical condition is as
follows: J & P

that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the _____
day of JAN 20 1903 1903.

Ordinary.

STATE OF GEORGIA,
Fulton.

County.

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

Given under my official signature and seal, this _____
day of JAN 20 1903 1903.

John P. Wilkinson
Ordinary _____ County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

County.

Personally appears J. S. Mathis 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 _____ 1846; that he is Ann 1838 years old and
by occupation a Fanner, 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 11 mos in Company 4, of 32th Regiment
of Geo. Bath of Cal.; that his physical condition is as
follows: Infirm

that his property consists of the following items: _____

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

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

Sworn to and subscribed before me, this the _____
day of JAN 20 1904 1904.

Ordinary.

STATE OF GEORGIA,

Fulton County.

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

Given under my official signature and seal, this JAN 20 1904
day of _____ 1904.

John P. Wilkinson
Ordinary _____ Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, Mathis, D. S. hereby authorize

of

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

at

by

WITNESS my hand and seal, this 11 day of May 1905.

[L. S.]

Executed in the presence of

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY. }

I, _____ hereby authorize

of

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

at

by

WITNESS my hand and seal, this _____ day of _____ 1906.

[L. S.]

Executed in the presence of

(FOR THOSE ALREADY ENROLLED.)

No. 192

**INDIGENT
SOLDIER'S PENSION
1905.**

Name D. S. Mathis

County Fulton

Co. E. Regiment 30th Cav.

WARRANT ISSUED

11 5 1905.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Mathis, D. S.

THE FARMVILLE PRINTING AND PUBLISHING CO., GEORGETOWN, GA.

no date

(FOR THOSE ALREADY ENROLLED.)

No. 171

**INDIGENT
SOLDIER'S PENSION
1906.**

Name D. S. Mathis

County Fulton

Co. E. Regiment 30th Cav.

WARRANT ISSUED

17 1906.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDED TO

Mathis, D. S.

THE FARMVILLE PRINTING AND PUBLISHING CO., GEORGETOWN, GA.

no date

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

STATE OF GEORGIA,

Fulton County.

Personally appears J. S. Mathis of Fulton

County, State of Georgia, who, being duly sworn, says on oath that he is a *bona fide* citizen and resident of said County and State, and has resided in said State continuously ever since the _____ day of _____ 18____; that he is _____ years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 12 mos in Company 12, of 22th Regiment of La. Battn. of Cav.; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: _____

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

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

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

J. S. Mathis

Ordinary.

STATE OF GEORGIA.

County.

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

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

Ordinary Fulton County.

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

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS.

State of Georgia,

Fulton County.

Personally appears J. S. Mathis 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 _____ 1890; that he is 67 years old and by occupation a Farmer, that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 12 mos in Company 12, of 22th Regiment of La. Bat. Cavalry; that his physical condition is as follows: Infirmity and poverty

that his property consists of the following items: _____

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

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

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

J. S. Mathis

Ordinary.

State of Georgia,

County.

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

Given under my official signature and seal, this _____ day of _____ 1906.

Ordinary Fulton County.

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

POWER OF ATTORNEY.

STATE OF GEORGIA,

COUNTY.

I, _____ hereby authorize

of _____

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

at _____

by _____

Witness my hand and seal, this _____ day of _____ 1907.

[L. S.]

Executed in presence of _____

*Mathis & Co.
Fulton Co.*

Count Expires 1907.
(FOR THOSE ALREADY ENROLLED)

MA

INDIGENT

SOLDIER'S PENSION

1907.

Name *J. J. Mathis*

County *Fulton*

Co. *4th Regiment "G" Cav.*

WARRANT ISSUED

He 1907.

JOHN W. LINDSEY,

Commissioner of Pensions.

WARRANT HANDLED TO

He

per data

FOR APPLICANTS HERETOFORE ALLOWED PENSIONS

State of Georgia,

Waller County.

Personally appears J. S. Mathis 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 60; that he is 69 years old and by occupation a _____ that he enlisted in the military service of the Confederate States (or of the State of Georgia) during the war between the States, and served for the term of 18 months in Company Co. of 20th Regiment of 3rd Bat. Cav.; that his physical condition is as follows: infirmity + poverty

that his property consists of the following items:

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

Deponent desires to participate in the benefits of the Act approved December 16th, 1894, and the Acts amendatory thereof, and makes application for the pension to which he is entitled for the year 1907. I have heretofore, as a resident of _____ County, been allowed a pension for the year 1906.

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

John R. Williamson Ordinary.

State of Georgia,

Waller County.

I, John R. Williamson Ordinary of said County,

do certify that I am well acquainted with J. S. Mathis the applicant in the foregoing affidavit, and am well satisfied that the statements made by him in his said affidavit are true, and I know 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 27 1907.

John R. Williamson

Ordinary Waller County.



Note.—The blank spaces must be filled.
Note.—Affidavits should not be situated before January 1st, 1907.

*Affidavits of Physicians
Supplemental to Application of A.S.
Muthie for Pension.*

We, G. P. Pierce and Sil. Pope,
Physicians whose names appear on the
affidavit to which this is attached, make
this additional affidavit to wit:

We find as a result of our examination
of said A.S. Muthie, that his Paralysis and
the loss of his left hand, coupled with
infirmitv from age (64 years), partial
loss of sight and general debility render
him absolutely unable to support
himself by his own labor at any trade
or calling.

G. P. Pierce M.D.
Sil. Pope M.D.

Joan Hand subscribed
before me, the 25th September 1902
John Breckin
Ordinary Fulton Co. Ga